# Classification of Psychiatric Disorders

LEVEL IV 2020

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# Objectives

- By the end of the lecture the student should be conversant with the
- two commonly used systems of classifications of Psychiatric disorders
- ► ICD and the DSM (DSM V)

#### Introduction

- Classification: A process of reduction of complex phenomena into categories
- Classification of disorders is based on knowledge of etiology or patho-physiology
- Classification of psychiatric disorders unlike other medical conditions has been hampered by inadequate knowledge of the biological basis
- Current classification of mental disorders consists of specific mental disorders grouped together- on the basis of some shared phenomenological characteristics.

# Why Classify Mental Disorders

- The ultimate purpose of classification is to improve treatment and prevention efforts
- The 3 main aims of classification of mental disorders are communication, control, and comprehension.
- Classification is only useful tool among users if there is a high level of agreement

#### Communication

- Globally Health workers, researchers and users of Psychiatry can communicate with each other about the disorders with which they deal.
- Using names of categories- summarizes a great deal of information: clinical features, disease progress, and prognosis.
   And treatment strategies

#### Control

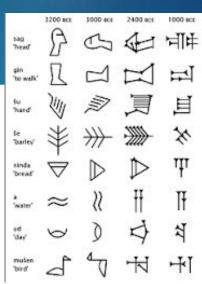
Control of mental disorders- prevention of their occurrence or the modification of their course with treatment.

# Comprehension

- Classification should provide comprehension of the causes of mental disorders and the processes involved in their development and maintenance.
- Comprehension leads to more effective treatment and prevention

# Historical Background

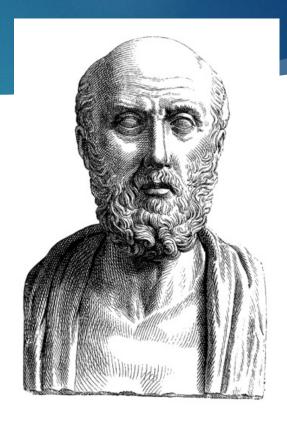
The First documented description of Mental Illness goes as far back as 3000 BC in Ancient Egypt-Sumarians and Hindu writings





#### Ct

- Hippocrates (approximately 460 to 370 BC) is usually regarded as the one who introduced the concept of psychiatric illness into medicine.
- He described acute mental disturbances with fever, acute mental disturbances without fever, chronic disturbance without fever



- Philippe Pinel (1745 to 1826), a French physician, recognized four fundamental clinical types:
- mania
- Melancholia
- Dementia
- Idiotism

- Kraepelin (1856 to 1926)- viewed mental illnesses as organic disease entities that could be classified on the basis of knowledge about their causes, courses, and outcomes.
- He recognized manic and depressive disturbances as 2 phases of the same disorders characterized by relapses and remissions manic-depressive psychosis
- Chronic deteriorating illness called dementia praecox, with a distinct form – Paranoia.
- Introduced the concepts of psychogenic neuroses and psychopathic personalities
- Eugen Bleuler later renamed Dementia praecox schizophrenia.

# Disorders/ syndromes

In the absence of clear biological aetiological causes, most of the disorders or diseases diagnosed are syndromes /collections of symptoms that tend to appear together and seem to have a characteristic course and outcomes

#### Modern Classifications

- There are currently two widely established Systems for classifying mental disorders
- 1. International Classification of Diseases (ICD- 10) produced by the World Health Organization
- The Diagnostic and Statistical Manual of Mental Disorders (DSM) Currently DSM V
- produced by the American Psychiatric Association (APA).

#### ICD

The ICD) is an international standard diagnostic classification for a wide variety of health conditions. The ICD-10 states that mental disorder is "not an exact term", although is generally used "...to imply the existence of a clinically recognisable set of symptoms or behaviours associated in most cases with distress and with interference with personal functions.

# ICD 10- Mental and Behavioural disorders

- ► F0: Organic, including symptomatic, mental disorders
- F1: Mental and behavioural disorders due to use of psychoactive substances
- F2: Schizophrenia, schizotypal and delusional disorders
- F3: Mood [affective] disorders
- F4: Neurotic, stress-related and somatoform disorders
- F5: Behavioural syndromes associated with physiological disturbances and physical factors
- **F**6: Disorders of personality and behaviour in adult persons
- F7: Mental retardation
- F8: Disorders of psychological development
- F9: Behavioural and emotional disorders with onset usually occurring in childhood and adolescence
- In addition, a group of "unspecified mental disorders".

# DSM-IV- Tr (2000)

- Consists of five axes (domains) on which disorder can be assessed. The five axes are:
- Axis I: Clinical Disorders (all mental disorders except Personality Disorders and Mental Retardation)
- Axis II: Personality Disorders and Mental Retardation
- Axis III: General Medical Conditions (must be connected to a Mental Disorder)
- Axis IV: Psychosocial and Environmental Problems (for example limited social support network)
- Axis V: Global Assessment of Functioning (Psychological, social and job-related functions are evaluated on a continuum between mental health and extreme mental disorder) The main categories of disorder in the DSM are:

#### DSM V

- The American psychiatric Association (APA) formed the *DSM*–5 Task Force, in 2007 to begin revising the DSM IV manual. *DSM*–5 was published in 2013.
- A summary of the Disorders under DSM V follow

### 1. Neurodevelopmental Disorders

- Intellectual Disabilities
- Communication Disorders
- Autism Spectrum Disorder
- Attention-Deficit/Hyperactivity Disorder
- Specific Learning Disorder
- Motor Disorders
- Other Neurodevelopmental Disorders

# Schizophrenia Spectrum and Other Psychotic Disorders

- Schizotypal (Personality) Disorder
- Delusional Disorder
- Brief Psychotic Disorder
- Schizophreniform Disorder
- Schizophrenia
- Schizoaffective Disorder
- Substance/Medication-Induced Psychotic Disorder
- Psychotic Disorder Due to Another Medical Condition

#### Catatonia

- Catatonia Associated With Another Mental Disorder
   (Catatonia Specifier)
- Catatonic Disorder Due to Another Medical Condition
- Unspecified Catatonia
- Other Specified Schizophrenia Spectrum and Other Psychotic Disorder
- Unspecified Schizophrenia Spectrum and Other Psychotic Disorder

### Bipolar and Related Disorders

- Bipolar I Disorder
- Bipolar II Disorder
- Cyclothymic Disorder
- Substance/Medication-Induced Bipolar and Related Disorder
- Bipolar and Related Disorder Due to Another Medical Condition
- Other Specified Bipolar and Related Disorder
- Unspecified Bipolar and Related Disorder

### Depressive Disorders

- Disruptive Mood Dysregulation Disorder
- Major Depressive Disorder, Single and Recurrent Episodes
- Persistent Depressive Disorder (Dysthymia)
- Premenstrual Dysphoric Disorder
- Substance/Medication-Induced Depressive Disorder
- Depressive Disorder Due to Another Medical Condition
- Other Specified Depressive Disorder
- Unspecified Depressive Disorder

### Anxiety Disorders

- Separation Anxiety Disorder
- Selective Mutism
- Specific Phobia
- Social Anxiety Disorder (Social Phobia)
- Panic Disorder
- Panic Attack (Specifier)
- Agoraphobia
- Generalized Anxiety Disorder
- Substance/Medication-Induced Anxiety Disorder
- Anxiety Disorder Due to Another Medical Condition
- Other Specified Anxiety Disorder
- Unspecified Anxiety Disorder

# Obsessive-Compulsive and Related Disorders

- Obsessive-Compulsive Disorder
- Body Dysmorphic Disorder
- Hoarding Disorder
- Trichotillomania (Hair-Pulling Disorder)
- Excoriation (Skin-Picking) Disorder
- Substance/Medication-Induced Obsessive-Compulsive and Related Disorder
- Obsessive-Compulsive and Related Disorder Due to Another Medical Condition

# Trauma- and Stressor-Related Disorders

- Reactive Attachment Disorder
- Disinhibited Social Engagement Disorder
- Posttraumatic Stress Disorder
- Acute Stress Disorder
- Adjustment Disorders
- Other Specified Trauma- and Stressor-Related Disorder
- Unspecified Trauma- and Stressor-Related Disorder

#### Dissociative Disorders

- Dissociative Identity Disorder
- Dissociative Amnesia
- Depersonalization/Derealization Disorder
- Other Specified Dissociative Disorder
- Unspecified Dissociative Disorder

### Somatic Symptom and Related Disorders

- Somatic Symptom Disorder
- Illness Anxiety Disorder
- Conversion Disorder (Functional Neurological Symptom Disorder)
- Psychological Factors Affecting Other Medical Conditions
- Factitious Disorder
- Other Specified Somatic Symptom and Related Disorder
- Unspecified Somatic Symptom and Related Disorder

### Feeding and Eating Disorders

- Pica
- Rumination Disorder
- Avoidant/Restrictive Food Intake Disorder
- Anorexia Nervosa
- Bulimia Nervosa
- Binge-Eating Disorder
- Other Specified Feeding or Eating Disorder
- Unspecified Feeding or Eating Disorder

#### Elimination Disorders

- Enuresis
- Encopresis
- Other Specified Elimination Disorder
- Unspecified Elimination Disorder

### Sleep Disorders

#### **Sleep Wake Disorders**

- Insomnia Disorder
- Hypersomnolence Disorder
- Narcolepsy

# **Breathing-Related Sleep Disorders**

- Obstructive Sleep Apnea Hypopnea
- Central Sleep Apnea
- Sleep-Related Hypoventilation
- Circadian Rhythm Sleep-Wake Disorders

#### **Parasomnias**

- Non–Rapid Eye Movement Sleep Arousal Disorders
- Sleepwalking
- Sleep Terrors
- Nightmare Disorder
- Rapid Eye Movement Sleep Behavior Disorder
- Restless Legs Syndrome
- Substance/Medication-Induced Sleep Disorder

### Sexual Dysfunctions

- Delayed Ejaculation
- Erectile Disorder
- Female Orgasmic Disorder
- Female Sexual Interest/Arousal Disorder
- Genito-Pelvic Pain/Penetration Disorder
- Male Hypoactive Sexual Desire Disorder
- Premature (Early) Ejaculation
- Substance/Medication-Induced Sexual Dysfunction

# Gender Dysphoria

- Gender Dysphoria
- Other Specified Gender Dysphoria
- Unspecified Gender Dysphoria

# Disruptive, Impulse-Control, and Conduct Disorders

- Oppositional Defiant Disorder
- Intermittent Explosive Disorder
- Conduct Disorder
- Antisocial Personality Disorder
- Pyromania
- Kleptomania

# Substance-Related and Addictive Disorders

- Substance-Related Disorders
- Substance Use Disorders
- Substance-Induced Disorders
- Substance Intoxication and Withdrawal
- Substance/Medication-Induced Mental Disorders

#### Substance related----

- Alcohol-Related Disorders
- Caffeine-Related Disorders
- Cannabis-Related Disorders
- Hallucinogen-Related Disorders
- Inhalant-Related Disorders
- Opioid-Related Disorders
- Sedative-, Hypnotic-, or Anxiolytic-Related Disorders
- Stimulant-Related Disorders
- Tobacco-Related Disorders

#### Non-Substance-Related Disorders

Gambling Disorder

# Neurocognitive disorders

- Delirium
- Major and Mild Neurocognitive Disorders

#### **Personality Disorders**

- General Personality disorder
- Cluster A Personality Disorders
- Cluster B Personality Disorders
- Cluster C Personality Disorders

#### **AND**

#### Other Personality Disorders

- Personality Change Due to Another Medical Condition
- Other Specified Personality Disorder
- Unspecified Personality Disorder

# Personality Disorders

Cluster A	Cluster B	Cluster C
Paranoid Personality Disorder	Antisocial Personality Disorder	Avoidant Personality Disorder
Schizoid Personality Disorder	Borderline Personality Disorder	Dependent Personality Disorder
Schizotypal Personality Disorder	Histrionic Personality Disorder	Obsessive-Compulsive Personality Disorder
	Narcissistic Personality Disorder	

### Paraphilic Disorders

- Voyeuristic Disorder
- Exhibitionistic Disorder
- Frotteuristic Disorder
- Sexual Masochism Disorder
- Sexual Sadism Disorder
- Pedophilic Disorder
- Fetishistic Disorder
- Transvestic Disorder

#### Other Mental Disorders

#### Other Specified Mental Disorder Due to Another Medical Condition

- Unspecified Mental Disorder Due to Another Medical Condition
- Other Specified Mental Disorder
- Unspecified Mental Disorder

Medication-Induced Movement Disorders and Other Adverse Effects of Medication

Other Conditions That May Be a Focus of Clinical Attention