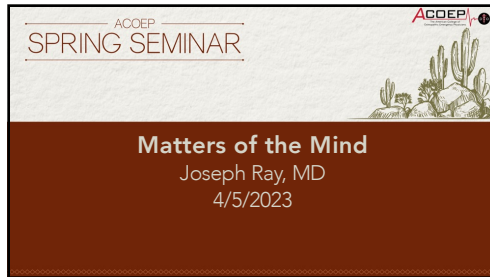
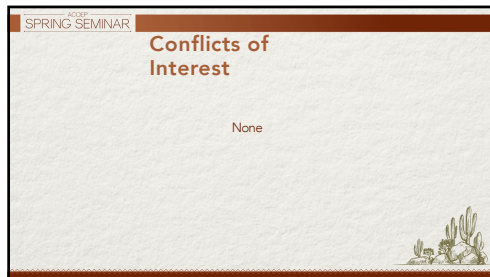




1



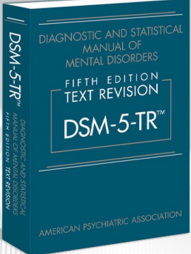
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3

Agenda

1. Review DSM V
2. Depressive Disorders
3. Anxiety Disorders
4. Bipolar and Related Disorders
5. Psychotic Disorders
6. Substance Use Disorders

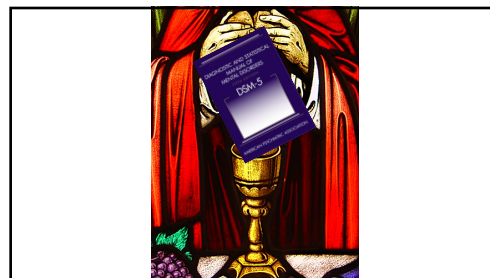


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What changed?

- DSM V released in 2013
- No more axes
- Removal of GAF score
- Reclassifying diagnoses
- Improved cohesion with ICD coding

Understanding the Axes of DSM-IV

Axis I: Clinical disorders
Axis II: Personality and intellectual traits
Axis III: General medical conditions
Axis IV: Psychosocial and environmental factors
Axis V: Global Assessment of Functioning - GAF

<http://www.psychiatry.com/files/assets/downloads/03-08-12-01.pdf>

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| DSM 5 Code | ICD-10 | Description |
|------------|--------|---|
| 309.0 | F43.21 | Adjustment Disorder, With depressed mood |
| 309.21 | F93.0 | Separation Anxiety Disorder |
| 309.24 | F43.22 | Adjustment Disorder, With anxiety |
| 309.28 | F43.23 | Adjustment Disorder, With mixed anxiety and depressed mood |
| 309.29 | F43.29 | Adjustment disorder with other symptoms |
| 309.3 | F43.24 | Adjustment Disorder, With disturbance of conduct |
| 309.4 | F43.25 | Adjustment Disorder, With mixed disturbance of emotions and conduct |
| 309.81 | F43.10 | Post Traumatic Stress Disorder |
| 309.81 | F43.11 | Post Traumatic Stress Disorder - Acute |
| 309.81 | F43.12 | Post Traumatic Stress Disorder - Chronic |

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"Since a complete description of the underlying pathological processes is not possible for most mental disorders, it is important to emphasize that the current diagnostic criteria are the best available description of how mental disorders are expressed and can be recognized by trained clinicians. DSM is intended to serve as a practical, functional, and flexible guide for organizing information that can aid in the accurate diagnosis and treatment of mental disorders."

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Universal Qualifiers

Mild: few to no excess symptoms with manageable intensity

Moderate: between mild and severe

Severe: Substantial excess symptoms and unmanageably intense, marked impairment

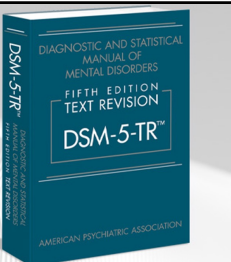
NOT due to other medical condition



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List of Depressive Disorders

- Disruptive mood dysregulation disorder
- Major Depressive Disorder, single and recurrent episodes
- Persistent depressive disorder (dysrhythmia)
- Premenstrual dysphoric disorder
- Substance/Medication-induced depressive disorder
- Depressive disorder due to another medical condition
- Other specified depressive disorder
- Unspecified depressive disorder



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Major Depressive Disorder (MDD)

≥ 2 weeks of ≥ 5 D SIG E CAPS sx's, most of day, nearly every day (if applicable). 1 sx must be the "D" or "T"

- Depressed mood
- Sleep (↑/↓)
- ↓ Interest in activities
- Guilt
- ↓ Energy
- ↓ Concentration
- Appetite (↑/↓)
- Psychomotor retardation or agitation
- Suicidal ideations (active or passive)

<http://www.psychiatry.com/psychiatrists/clinical-services/education/continuing-education/2023-spring-seminar>
diagnosis in major depressive disorder

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Major Depressive Disorder

| Severity/course specifier | Single episode | Recurrent episode* |
|------------------------------------|----------------|--------------------|
| Major (p. 180) | 296.21 (F32.0) | 296.20 (F32.0) |
| Moderate (p. 180) | 296.22 (F32.1) | 296.22 (F32.1) |
| Severe (p. 180) | 296.23 (F32.2) | 296.23 (F32.2) |
| With psychotic features** (p. 180) | 296.24 (F32.3) | 296.24 (F32.3) |
| In partial remission (p. 180) | 296.25 (F32.4) | 296.35 (F32.4) |
| In full remission (p. 180) | 296.26 (F32.5) | 296.36 (F32.5) |
| Unspecified | 296.20 (F32.9) | 296.30 (F32.9) |

In recording the name of a depression, terms should be listed in the following order: major depressive disorder, single or recurrent episode, severity/psychotic/remission specifier, followed by as many of the following specifiers without codes that apply to the current episode.

Specify:

- With anxious distress (p. 184)
- With mixed features (p. 184-185)
- With melancholic features (p. 185)
- With atypical features (p. 185-186)
- With mood-congruent psychotic features (p. 186)
- With mood-incongruent psychotic features (p. 186)
- With cataplexy (p. 185, Coding note: Use additional code 293.89 [506.1], With peripartum onset (pp. 186-187)
- With seasonal pattern (recurrent episode only) (pp. 187-188)

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1. Review DSM V
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List of 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



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Panic Attack

"Panic attack is not a mental disorder and cannot be coded"

Abrupt surge that reaches peak within minutes. 4 of the following:

1. Sweating
2. Trembling or shaking
3. Sensations of shortness of breath or smothering
4. Feelings of choking
5. Chest pain or discomfort
6. Nausea or abdominal distress
7. Feeling dizzy, unsteady, light-headed, or faint
8. Chills or heat sensations
9. Paresthesias (numbness or tingling sensations)
10. Depersonalization (feelings of unreality) or derealization (being detached from oneself)
11. Fear of losing control or "going crazy"
12. Fear of dying



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Panic Disorder

Panic Attacks
+

1 month of worrying about panic attacks
Maladaptive behavior to avoid panic attacks

DON'T PANIC !!

Probably the most thing to say to someone having a panic attack.



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Generalized Anxiety Disorder (GAD)

6 months
Inability to control worry
3 of 6 to the right →

Adapted from Psychology in PA
https://www.bbc.com/news/health-55811021
photo: iad871012844021/47520872286137

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Agenda

1. Review DSM V
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Manic Episode

A. 1 week of "elevated, expansive, or irritable mood"

B. 3 of the following:

- A. Inflated self esteem
- B. Decreased NEED for sleep
- C. Talkative
- D. Flight of ideas or thoughts
- E. Distractibility
- F. Increased goal directed activity
- G. Excessive dangerous activities

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Hypomanic Episode

A. 4 days of "elevated, expansive, or irritable mood"

B. 3 of the following:
 A. Inflated self esteem
 B. Decreased NEED for sleep
 C. Talkative
 D. Flight of ideas or thoughts
 E. Distractibility
 F. Increased goal directed activity
 G. Excessive dangerous activities

C. NOT severe enough to cause marked impairment in social/occupational function



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Bipolar 1 Disorder

1 manic episode

May or may not be preceded by hypomanic or major depressive episodes


Bipolar 2 Disorder

1 hypomanic episode

MUST have major depressive episode

NEVER manic episode

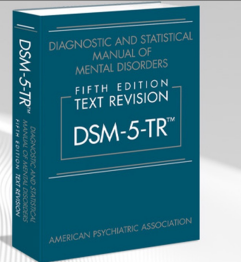
With anxious distress (p. 149)
 With mixed features (pp. 149-150)
 With rapid cycling (pp. 150-151)
 With melancholic features (p. 151)
 With atypical features (pp. 151-152)
 With mood-congruent psychotic features (p. 152)
 With mood-incongruent psychotic features (p. 152)
 With catatonia (p. 152). Coding note: Use additional code 293.89 (F06.1).
 With peripartum onset (pp. 152-153)
 With seasonal pattern (pp. 152-153)



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Agenda

1. Review DSM V
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Schizophrenia Spectrum and other Psychotic Disorders

- Schizotypal (personality) disorder
- Delusional disorder
- Brief Psychotic disorder
- Schizophreniform disorder
- Schizophrenia
- Schizoaffective
- Substance/Medication-induced psychotic disorder
- Psychotic disorder due to another medical condition




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Psychotic Spectrum

Two (or more) of the following, each present for a significant portion of time during a 1-month period (or less if successfully treated). At least one of these must be (1), (2), or (3):

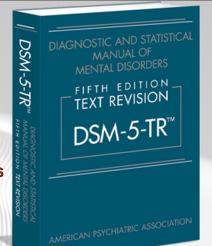
1. Delusions.
2. Hallucinations.
3. Disorganized speech (e.g., frequent derailment or incoherence).
4. Grossly disorganized or catatonic behavior.
5. Negative symptoms (i.e., diminished emotional expression or avolition).



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Agenda

1. Review DSM V
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Substance-Related and Addictive Disorders

- Alcohol
- Caffeine*
- Cannabis
- Hallucinogen
- Inhalant
- Opioid
- Sedative-, hypnotic-, or anxiolytic-related
- Stimulant
- Tobacco
- Other (or Unknown)

Winters, M.D., Csernig, Wang, G.S., Cooper, J.L., Saito, T., et al. (2005). The effects of methamphetamine on brain activity. *Journal of Psychiatry*, 161, 204-211.

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Criteria for substance use disorder

- Impaired Control (1-4)
- Social Impairment (5-7)
- Risky Use (8-9)
- Pharmacology Criteria (10-11)

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Conditions for Further Study Caffeine Use Disorder

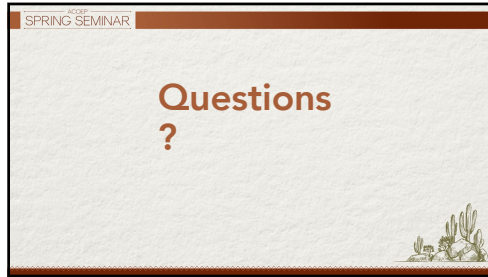
Must have:

- Persistent desire to cut back
- Continued use despite it causing or exacerbating problems
- Withdrawal (or using to prevent other withdrawal)

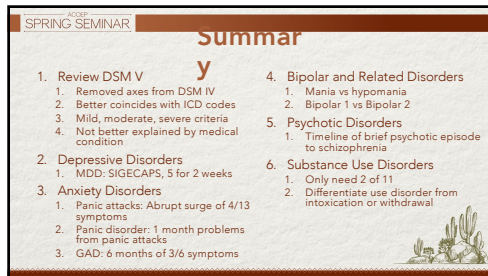
Other substance use criteria possibly included?

Winters, M.D., Csernig, Wang, G.S., Cooper, J.L., Saito, T., et al. (2005). The effects of methamphetamine on brain activity. *Journal of Psychiatry*, 161, 204-211.

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