

General Principles of Psychiatric Assessment

Lecture objectives

1. Define what is meant by psychopathology.
2. Examine what (if anything) systematically distinguishes ‘mental’ from ‘physical’ illnesses.
3. Introduce the current diagnostic system used in psychiatry and describe its strengths and weaknesses.

Psychopathology: definition

- Also commonly called ***mental disorders***
- Discrepancies between actual definition of ‘mental’ and its uses in medical contexts (more on this later)
- “Psychopathology” or “mental disorder” usually refers to illnesses characterized by abnormalities of
 - Emotion (AFFECT),
 - Complex behavior, and/or (BEHAVIOR)
 - Cognition (COGNITION)

Key Point #1

Psychopathology consists of a diverse group of illnesses marked by abnormal cognition, emotion, and/or behavior.

Do diseases come in two flavors: mental and physical?

- Do mental disorders have mental manifestations while physical disorders have physical manifestations?
 - Mental manifestations = symptoms
 - Physical manifestations = signs
- Are mental disorders those conditions marked by abnormal **experiences (symptoms)**, while physical disorders are marked by abnormal **findings (signs)**?

Mental disorder / physical disorder distinction



Mental disorders?

- Attention-deficit/hyperactivity disorder
- Trichotillomania
- Alcohol use disorder

Physical disorders?

- Fibromyalgia
- Chronic fatigue syndrome
- Migraine
- Hypertension

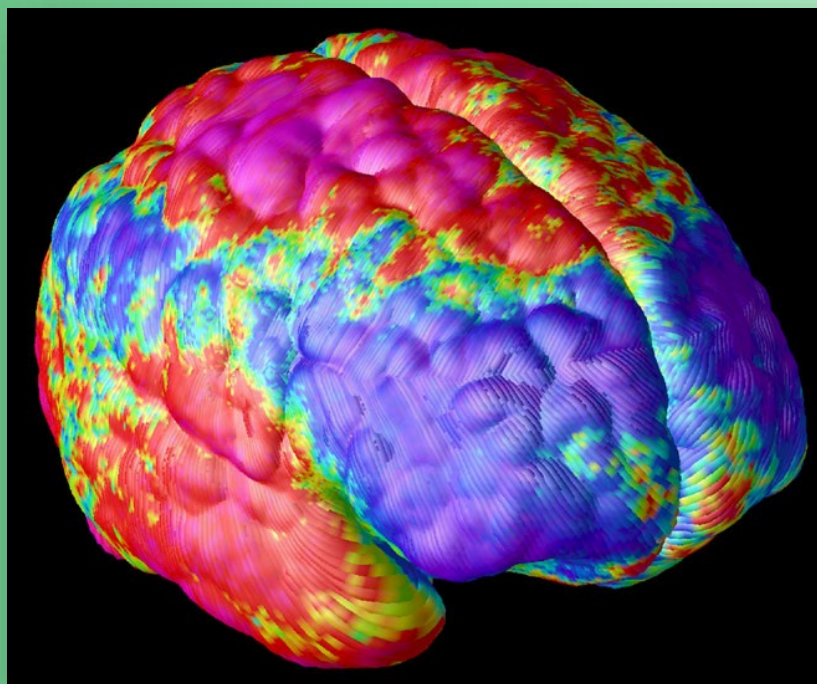
Genetic and Environmental Factors in Medicine



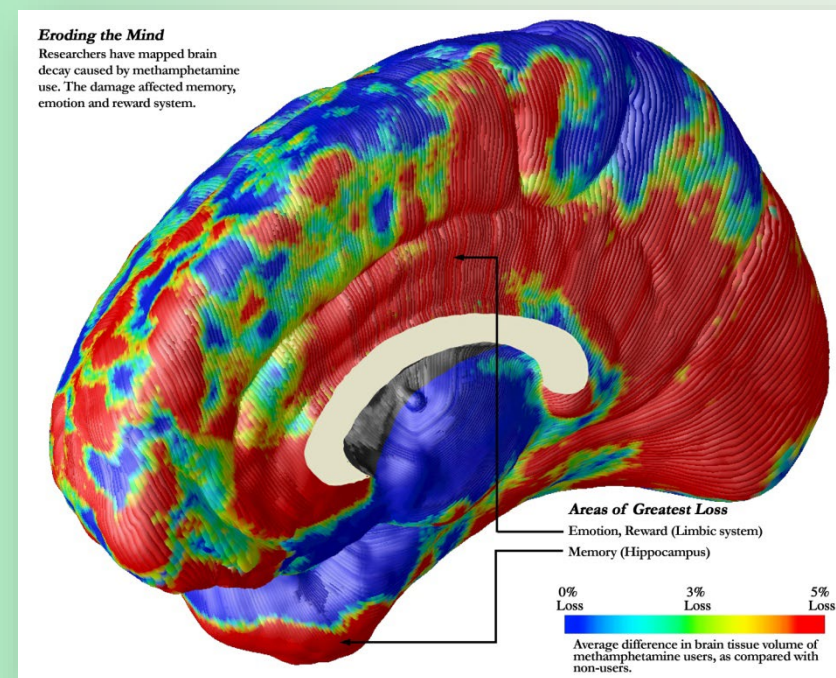
Disorder	Genetic	Environmental
Asthma	70%	30%
Obesity	78%	22%
Hypertension	37-66%	33-63%
Death from CAD	33-57%	43-67%

Disorder	Genetic	Environmental
Depression	70%	30%
ADHD	73-90%	10-27%
Anxiety	37%	63%
Autism	80-90%	10-20%

Psychiatric Disorders are Brain Disorders



Schizophrenia



Methamphetamine Use Disorder

USC Imaging Center: <http://igc.ini.usc.edu/>

Distinguishing Mental from Physical Illness



- Mental illness / physical illness distinction has no clearly *principled* underpinnings.
- This training will cover the neural bases of emotion, behavior, and cognition and their abnormalities specifically in relation to depression and anxiety.

Key Point #2



Attempts to demarcate ‘mental’ illness from ‘physical’ illness, fail.

Psychiatric nosology

- Psychoanalytic (recent) past
 - Little emphasis on diagnosis
 - Accentuated division between psychiatry and rest of medicine
- Modern “biological” psychiatry
 - Led by psychopharmacological revolution
 - Increased emphasis on diagnosis
 - Broader range of choices for treatment
 - “Re-medicalization” of psychiatry

DSM project

- DSMs I and II
- DSM III (1980)
 - Purportedly “descriptive” and “atheoretical” with respect to etiopathogenesis
 - Diagnoses based on explicit criteria, both cross-sectional (signs and symptoms) and longitudinal (course of illness)
- DSM IV
- DSM 5

DSM-5 Process

- The APA prepared with a research evaluation that included a series of white papers and 13 scientific conferences supported by the National Institutes of Health.
- The DSM-5 Task Force and Work Groups, made up of more than 160 clinicians and researchers, reviewed scientific literature and garnered input from a breadth of advisors as the basis for proposing draft criteria.

DSM-5 Process

- The APA Board of Trustees appointed a Scientific Review Committee of mental health experts to review and provide guidance
- A Clinical and Public Health Committee reviewed proposed revisions to address difficulties experienced with the clinical utility, consistency and public health impact of DSM-5 criteria.

DSM-5 Process

- The reported goal in developing DSM-5 is an evidence-based manual that is useful to clinicians in helping them accurately diagnose mental disorders.
- Decisions to include a diagnosis in DSM-5 were based on the collective clinical knowledge of experts in the field.

Overall changes between DSM-IV and DSM-5



- Removal of the multi-axial system
- Removal of GAF scores as metrics
- A renaming of certain disorders
 - And a change in names that previously supported a multi-axial system (like “general condition” which becomes “another medical condition”)
- A subtle list toward dimensionality





DSM-5 diagnostic categories

- Neurodevelopmental disorders
- Schizophrenia spectrum and other psychotic disorders
- Bipolar and related disorders
- Depressive disorders
- Anxiety disorders
- Obsessive-compulsive and related disorders
- Trauma- and stressor-related disorders
- Dissociative disorders
- Somatic symptom and related disorders
- Feeding and eating disorders
- Sleep–wake disorders
- Sexual dysfunctions
- Gender dysphoria
- Disruptive, impulse-control, and conduct disorders
- Substance-related and addictive disorders
- Neurocognitive disorders
- Paraphilic disorders
- Personality disorders

DSM diagnostic system

- Benefits
 - Provides standard nomenclature for clinical communication, research, and administrative functions
 - Higher degree of diagnostic reliability (maybe?)
- Drawbacks
 - Questionable validity of many categories
 - Reification of diagnostic categories – giving impression of greater understanding than is warranted

Key Point #3



The DSM diagnostic system has brought benefits along with significant problems.

Conclusions

1. Psychopathology consists of a diverse group of illnesses marked by abnormal cognition, emotion, and/or behavior.
2. Attempts at more principled definition or at demarcation of “mental illness” from ‘physical’ illness, fail.
3. The DSM diagnostic system has brought benefits along with some problems.