

DSM-5™ E-Chapter Update

Selecting Effective Treatments

fourth
edition

A Comprehensive,
Systematic Guide
to Treating
Mental Disorders



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***DSM-5 E-Chapter
Update to *Selecting
Effective Treatments****

**A Comprehensive,
Systematic Guide to
Treating Mental Disorders**

Fourth Edition

**LINDA SELIGMAN AND
LOURIE W. REICHENBERG**

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DSM-5 Update to Selecting Effective Treatments, Fourth Edition

How to Use This Chapter

If you are reading these words, it is most likely with the goal of being able to link the diagnosis of mental disorders with the best evidence-based treatment practices available. The publication of the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5; American Psychiatric Association, 2013a)* in May 2013 changed the diagnostic criteria for many disorders; created some new disorders (e.g., hoarding, binge eating disorder, skin excoriation); and removed a few disorders completely (e.g., Asperger's disorder, hypochondriasis). It's not surprising if clinicians are confused!

The goal of this additional chapter to the fourth edition of *Selecting Effective Treatments (SET-4)* is to highlight these changes, no matter how small, in a logical and systematic manner so that readers can easily make the transition from *DSM-IV* to the new *DSM-5*.

For each diagnosis, the reader will be alerted to any changes from *DSM-IV* to *DSM-5*, given information on the implications of these changes for diagnosis and assessment, and be advised as to how these changes may affect treatment. When additional information is necessary for further clarification, the specific pages in *SET-4* or in *DSM-5*

will be provided so that you can find the exact information you need to make an accurate diagnosis and informed treatment decision. This process won't be easy; after all, there are a lot of changes in *DSM-5* ! But by following this systematic process, readers will feel competent that their diagnostic skills are accurate as well as consistent with the new *DSM-5* changes—benefiting their clients and ensuring that they receive the care they deserve. Now, let's get started.

Introduction to *DSM-5*

Over the past 60 years, the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* published by the American Psychiatric Association (APA) has become the standard reference for mental health professionals in the United States. With the publication of the fifth edition earlier this year, *DSM-5* has become more consistent with the International Classification of Diseases (ICD, the coding system used in the United States) put out by the World Health Organization (WHO; 1992).

DSM-5 incorporates years of research about the brain, human behavior, and genetics. Thousands of experts participated in more than 160 task forces, work groups, and study groups over a 12-year period to research, measure, and conduct field trials of diagnostic criteria for the mental health disorders. In December 2012, the Board of Trustees of the American Psychiatric Association approved the final changes that now constitute *DSM-5*.

All of the additions or substantive changes to *DSM-5* were supported by research and planned with the intent to improve diagnosis and treatment, and to be able to be incorporated into routine clinical practice. According to APA, all changes were “intended to more clearly and accurately define the criteria for that mental disorder. Doing so helps to

ensure that the diagnosis is accurate as well as consistent from one clinician to another—benefiting patients and the care they receive” (APA, 2013b).

These and other enhancements to *DSM-5*, such as changes in the organizational structure, use of dimensional measures, and consistency with ICD codes are planned to increase the manual's clinical utility and enhance its value for clinicians and researchers alike.

To help clinicians conceptualize and diagnose disorders, *DSM-5* is divided into three sections:

- Section I provides a basic introduction on how to use the new manual and how to diagnose using a nonaxial system, and a new definition of a mental disorder as a syndrome that causes clinically significant problems with cognitions, emotion regulation, or behavior that results in dysfunctional mental functioning and is “associated with significant distress or disability in social, occupational, or other important activities” (APA, 2013a, p. 20).
- Section II provides 20 classifications of disorders that focus on diagnostic criteria and codes.
- Section III, Emerging Measures and Models, includes assessment measures, cultural formulation, an alternative model for personality disorders, and conditions for further study.

The Appendix of *DSM-5* includes highlights of the changes made from *DSM-IV* to *DSM-5*, glossaries of terms and cultural concepts of distress, and ICD-9 and ICD-10 codes.

We turn now to a more detailed look at several important changes in *DSM-5* that will impact how clinicians conceptualize the diagnosis of mental disorders: the elimination of the multiaxial system of diagnosis, the adoption of a dimensional approach to diagnosis, developmental and lifespan considerations, and the expansion of gender-related and cultural considerations.