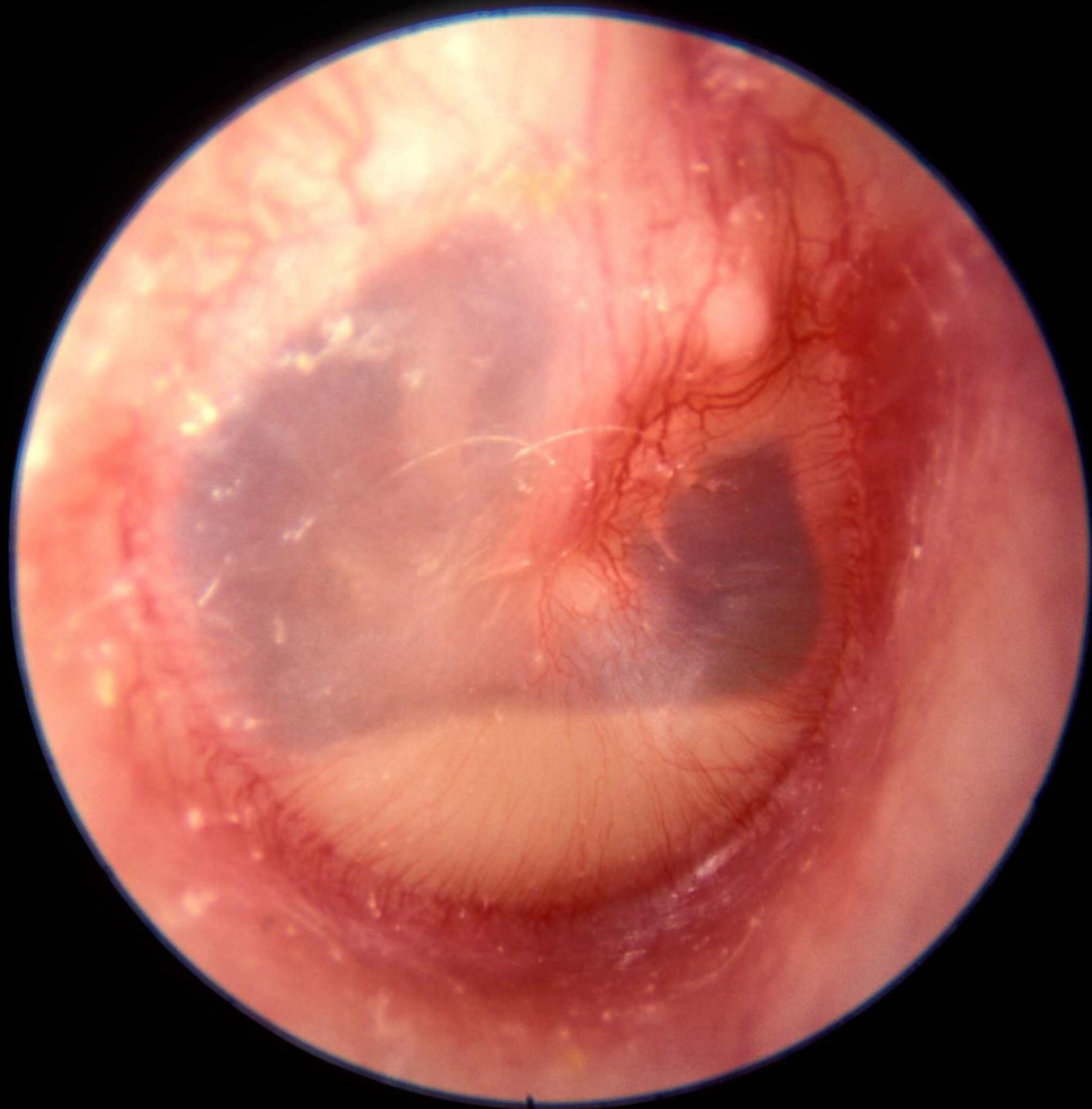


ASD

DSM-IV TR to DSM-V





DSM IS A GUIDE.

It is supposed to reflect a consensus of current formulations or hypothesis of mental health disorders based on the evolving knowledge in the field of psychiatry.

The purpose of the DSM is to help clinicians and investigators to diagnose, communicate about, study, and treat people with various mental disorders

**What is the significance of the DSM
changes for ASD?**

#1 Diagnosis for Treatment planning.

#2 Diagnosis for services/resources.

**What is the scientific rational for the
DSM changes for ASD?**

- #1 The failure of studies to find meaningful distinctions among the DSM-IV-TR PPD conditions.
- #2 The demonstration that various DSM-IV-TR conditions are genetically similar (monozygotic twins have different PDD subtypes)
- #3 The observation that an individual may move from one category to another over time.

DSM-IV TR carries the category of pervasive developmental disorders that in turn includes 5 separate disorders.

➤ **Autistic disorder**

Characterized by marked impairment in nonverbal communication

Marked impairment of verbal communication

Restricted repetitive and stereotyped patterns of behavior, interests, and activities.

➤ **Rett's disorder**

Characterized by normal development prenatally, peri-natally, and through the first 5 months after birth, then significant regression occurs with expressive and receptive language development, social engagement, and neurologically. There is severe psychomotor retardation.

➤ **Childhood disintegrative disorder**

Characterized by normal development for at least the first 2 years after birth then clinically significant loss of previously acquired skills (before age 10 years) and abnormal functioning in social interaction, communication, and restricted repetitive and stereotyped patterns of behavior, interests, and activities.

➤ **Asperger's disorder**

Characterized by qualitative impairment in social interaction and

Restricted, repetitive and stereotyped patterns of behavior, interests, and activities.

➤ **Pervasive developmental disorder, NOS**

When there is a severe and pervasive impairment in the development of reciprocal social interaction, impairment in either verbal or nonverbal communication skills, or the presence of stereotyped behavior, interest, and activities, but specific criteria are not met for a specific disorder.

DSM-V restructured the diagnostic classification of autism spectrum disorders into a single category.

Mahjouri S., and Lord CE in a December, 2012 article in current psychiatry stated “proposed changes in DSM–V aim is to better reflect the current state of research by consistently identifying the core features in social/communication and restrictive and repetitive behaviors that are specific to ASD’s”.

DSM-V has 1 category,
Autism Spectrum Disorder.

There are 5 criteria: A – E.

- A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following, currently or by history:
 - 1) Deficits in social–emotional reciprocity.
 - 2) Deficits in nonverbal communicative behaviors used for social interaction.
 - 3) Deficits in developing, maintaining, and understanding relationships.

B. Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least 2 of the following, currently or by history:

- 1) stereotyped or repetitive motor movements, use of objects, or speech.
- 2) insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior.

- 3) highly restricted, fixated interest that are abnormal in intensity or focus.
- 4) hyper or hypomanic reactivity to sensory input or unusual interest in sensory aspects of the environment.

C. Symptoms must be present in the early developmental period.

- D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.
- E. These disturbances or not better explained by intellectual disability or global developmental delay.

Severity is based on social communication impairments and restricted, repetitive patterns of behavior.

There are 3 severity levels:

Level 3 - “requiring very substantial support”

Level 2 - “requiring substantial support”

Level 1 – “requiring support”

The question that everyone is asking is what are the implications for individuals with autism spectrum disorder.

Young RL, Rodi ML September 22, 2013 *Journal of Autism and Developmental Disorders.*

Diagnostic assessment comparing DSM-IV TR criteria to DSM-V criteria.

Only 57.1% met DSM-V criteria for autism spectrum disorder.

High functioning individuals were less likely to meet DSM-V criteria.

Matson JL, Hattier MA, Williams LW August 2012 *Journal of Autism and Developmental Disorders*.

Looked at how the prevalence rates for autism will change with DSM-V.

They predicted that the prevalence of ASD diagnoses will dramatically decrease with the adoption of the proposed DSM-V criteria.

Take-home message

Remember that individuals already diagnosed with a DSM-IV PDD diagnosis