

# *CLASSIFICATION OF MENTAL DISORDER*

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# INTRODUCTION

- ONE MUST REALISE THAT PERSONS SUFFERING FROM A MENTAL HEALTH PROBLEM ARE NOT ALL SUFFERING FROM THE SAME MENTAL ILLNESS OR DISORDER
- THERE ARE VARIOUS FORMS OF MENTAL ILLNESSES AND EACH HAVE THEIR OWN CHARACTERISTICS
- THERE ARE ALSO VARIOUS TYPES OF CLASSIFICATIONS OF MENTAL DISORDER

# CLASSIFICATIONS

- INTERNATIONAL CLASSIFICATION OF DISEASE (ICD)
- DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDER (DSM)
- TRADITIONAL CLASSIFICATION

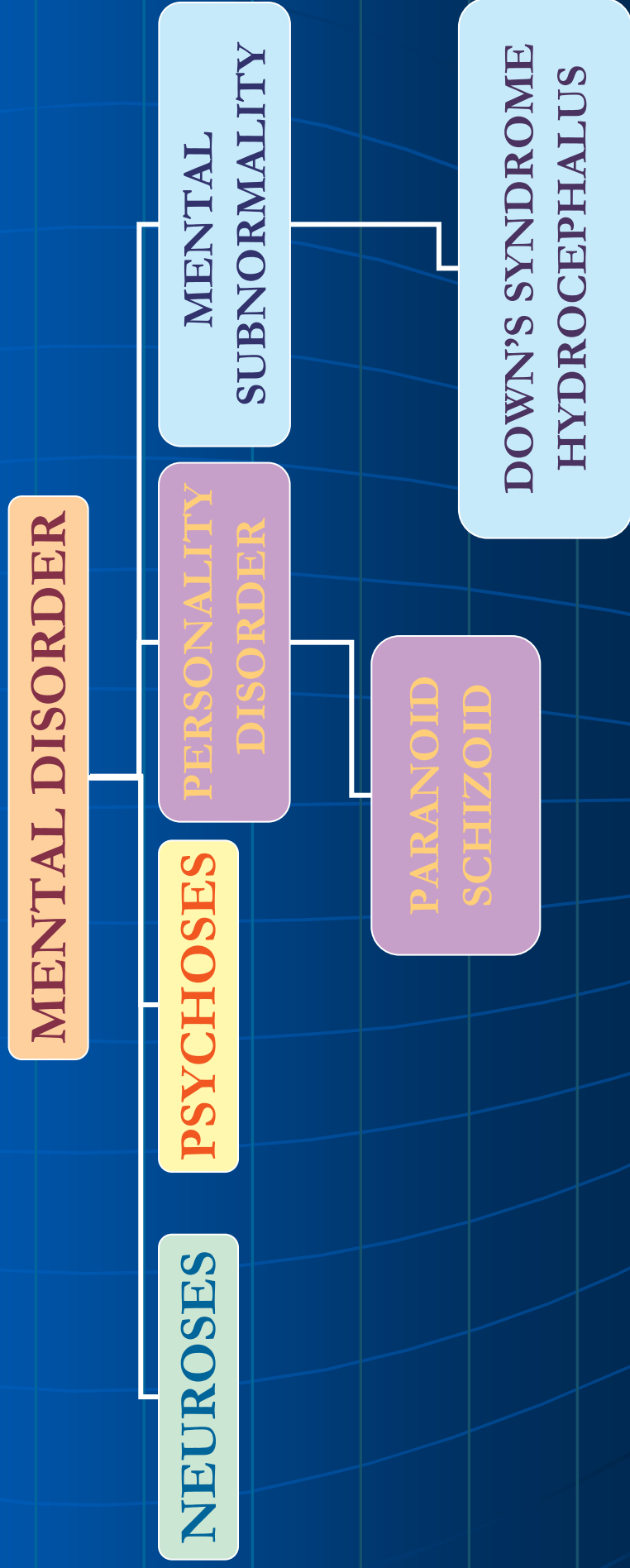
# INTERNATIONAL CLASSIFICATION OF DISEASE (ICD)

- THE TRADITIONAL DIVISION BETWEEN NEUROSES AND PSYCHOSES IS MAINTAINED
- NUMERIC CODES ARE USED TO DIFFERENTIATE DISORDERS WITH MANY SUB-DIVISIONS FOR EACH DISORDER
- ICD IS USED AT MOUNT CARMEL HOSPITAL
- DSM IS THE CLASSIFICATION TAUGHT AT IHC AND MOST TEXTBOOKS REFER TO THE DSM WHEN CLASSIFYING MENTAL DISORDER

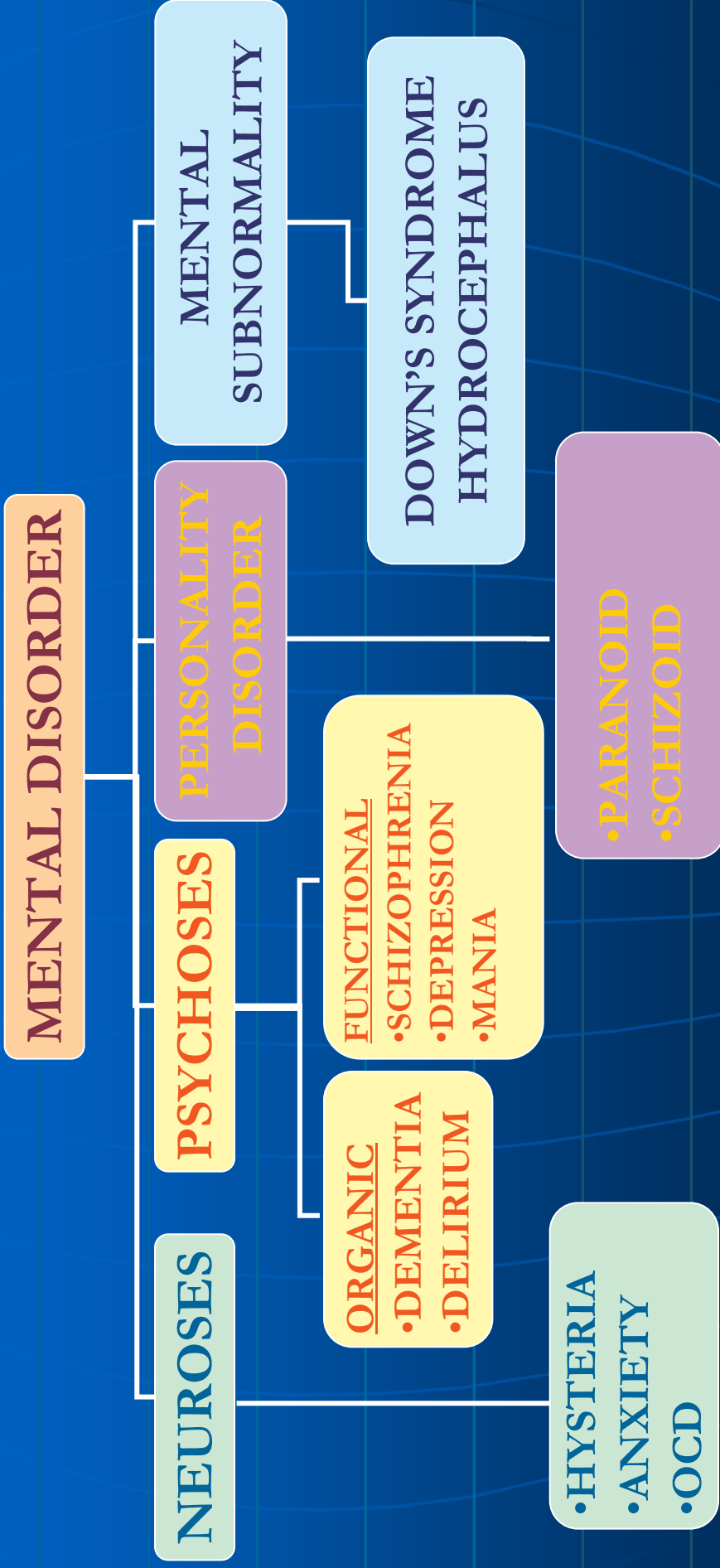
# DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDER (DSM)

- **DSM DIVIDES MENTAL DISORDER INTO THE FOLLOWING CATEGORIES**
  - **ORGANIC MENTAL DISORDER**
  - **AFFECTIVE MENTAL DISORDER**
  - **SCHIZOPHRENIC DISORDER**
  - **OTHER PSYCHOTIC DISORDERS**
  - **ANXIETY DISORDERS**
  - **DISSOCIATIVE DISORDERS**
  - **SOMATOFORM DISORDERS**
  - **PERSONALITY DISORDERS**
  - **SUBSTANCE ABUSE DISORDERS**
  - **DEVELOPMENTAL DISORDERS**

# TRADITIONAL CLASSIFICATION



# TRADITIONAL CLASSIFICATION



# CONTRASTS BETWEEN NEUROSES AND PSYCHOSES

	NEUROSES	PSYCHOSES
<b>PERSONALITY</b>	REMAINS INTACT	CONSIDERABLE FRAGMENTATION
<b>INSIGHT</b>	RETAINED	LITTLE OR NO INSIGHT
<b>INTEREST IN ENVIRONMENT</b>	RETAINED	FREQUENTLY LOST
<b>CONTACT WITH REALITY</b>	RETAINED	LOSS OF CONTACT
<b>REGRESSION</b>	RARE	REGRESSION SEVERE
<b>AFFECT</b>	UNCHANGED	INAPPROPRIATE, LABILITY, ↑ OR ↓
<b>SECONDARY GAINS</b>	FREQUENT GAINS	NO SECONDARY GAINS.