DSM-V AND SUBSTANCE RELATED DISORDERS

The DSM-V combined the DSM-IV categories of substance dependence (addiction marked by a pattern of compulsive use or loss of control) and substance abuse disorders (using in a manner that causes problems but does not have a pattern of compulsive use) into one broad category of substance related disorder.

CLASSES:

The DSM-V recognizes substance related disorders resulting from the use of ten separate classes of

- drugs: 1. alcohol 2. caffeine
 - 4. hallucinogens (phencyclidine or similarly acting arylcyclohexylamines), other hallucinogens such as LSD
 - 5. inhalants

3. cannabis

- 6. opioids
- 7. sedatives
- 8. hypnotics
- 9. anxiolytics
- 10. stimulants (including amphetamine-type substances, cocaine, and other stimulants), tobacco, and
- 11. other or unknown substances.

Some major grouping of psychoactive substances are specifically identified. Use of other or unknown substances can also form the basis of a substance related or addictive disorder.

GROUPS:

There are two groups of substance-related disorders: substance use disorders and substance-induced disorders.

Substance use disorders are patterns of symptoms resulting from use of a substance which the individual continues to take, despite experiencing problems as a result.

Substance-induced disorders include intoxication, withdrawal, substance induced mental disorders, including substance induced psychosis, substance induced bipolar and related disorders, substance induced depressive disorders, substance induced anxiety disorders, substance induced obsessive-compulsive and related disorders, substance induced sleep disorders, substance induced sexual dysfunctions, substance induced delirium and substance induced neurocognitive disorders.

CRITERIA FOR SUBSTANCE USE DISORDER:

Substance use disorders span a wide variety of problems arising from substance use, and cover 11 different criteria:

- 1. Taking the substance in larger amounts or for longer than you meant to
- 2. Wanting to cut down or stop using the substance but not managing to
- 3. Spending a lot of time getting, using, or recovering from use of the substance
- 4. Cravings and urges to use the substance
- 5. Not managing to do what you should at work, home or school, because of substance use
- 6. Continuing to use, even when it causes problems in relationships
- 7. Giving up important social, occupational or recreational activities because of substance use
- 8. Using substances again and again, even when it puts you in danger
- 9. Continuing to use, even when you know you have a physical or psychological problem that could have been caused or made worse by the substance
- 10. Needing more of the substance to get the effect you want (tolerance)
- 11. Development of withdrawal symptoms, which can be relieved by taking more of the substance.

The DSM-V allows clinicians to specify how severe the substance use disorder is, depending on how many symptoms are identified:

MILD: Two or three symptoms indicate a mild substance use disorder.

MODERATE: Four or five symptoms indicate a moderate substance use disorder.

SEVERE: Six or more symptoms indicate a severe substance use disorder.

Clinicians can also add "in early remission," "in sustained remission," "on maintenance therapy," and "in a controlled environment."