Proposed DSM-5 revisions to personality disorder criteria need further scrutiny

The announced 2013 publication date for the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders draws closer. DSM-5 has been greatly anticipated, but also heavily criticized. The process has been said to lack transparency, many of the proposed changes have been criticized for lacking an evidence base, and the field trials are behind schedule. I recently participated in a discussion with Mark Zimmerman, MD, which will be published in an upcoming issue of Current Psychiatry, regarding the personality disorder (PD) category. Dr. Zimmerman points out the committee offers no evidence their proposed criteria—which will eliminate 4 of the 10 PDs—perform better than the current criteria. Disturbingly, Dr. Zimmerman also points out there is no plan to directly compare the proposed criteria against current criteria. There is a push to include an overly complex dimensional rating system that likely will be ignored by all but the most scrupulous practitioners, and risks further marginalizing the category. Can you imagine another medical specialty that simply eliminates diagnoses by committee fiat? This is not the way to go about revising such an important diagnostic system.

We feature many interesting articles in this issue of Annals. Jose de Leon, MD, and colleagues failed to replicate the link between low serum cholesterol and attempted suicide. The link has long been assumed, but the relationship clearly is more complex than once thought. Amy H. Farabaugh, PhD, and colleagues test 4 definitions of depression in patients with Parkinson’s disease and confirm just how common it is. Russell Noyes, Jr., MD, and colleagues surveyed 300 family medicine patients and found continuity of care and having a longer physician-patient relationship were important to the therapeutic quality of the relationship. Therefore, despite technologic advances in medicine, something as simple as a human relationship may help determine the quality of care. Sergio A. Strejilevich, MD, and colleagues examine the relationship between the frequency of antidepressant exposure and worse long-term course of bipolar disorder. Consistent with the literature, they found antidepressant exposure was a risk factor for polarity changes and mood instability. William V. Bobo, MD, and colleagues pit orally disintegrating olanzapine tablets against the regular tablets in bipolar disorder patients and show both formulations behave similarly in terms of weight gain and metabolic side effects. Betty Pfefferbaum, MD, JD, and colleagues report children of Oklahoma City bombing survivors may experience physiologic reactivity 7 years after the event. Mark Zimmerman, MD, has developed a new scale to measure dimensions relevant to assessing remission that better captures treatment outcome than a pure symptom measure.

Finally, I want to give readers an early preview of the upcoming American Academy of Clinical Psychiatrists/Current Psychiatry meeting scheduled for March 29 to 31, 2012 in Chicago, IL. We will provide updates on mood and anxiety disorders, sleep disorders, psychoses, and bipolar disorder. We selected these topics based on feedback from attendees. The speaker list is being developed and will include nationally known faculty. Mark your calendars now.