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The Most Important Book Of The Year Is Out -- And You Likely Won't Read It

You won't find this book on *The New York Times* Best Sellers list or find it making an appearance in Oprah's Book Club, but this one book will have a direct impact on your insurance, employees, pharmaceutical companies and doctors. In fact, there's a better than 25 percent chance it will effect you personally.

I'm talking about the fifth edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM -5)*, which was released earlier this month. This book is to help classify, describe and diagnose mental disorders and provides those little codes you see on insurance forms. It's these codes that insurance companies use to determine the rate they will reimburse. If you suffer from something that is not given a diagnosis—such as sex addiction, which was debated but ultimately excluded from diagnosis in this edition—most likely your insurance company won't cover it.

While this book is used primarily by mental health professionals it's important for the public to understand what's included (and excluded) since it could have a direct impact on your health and treatment. [The National Institute of Mental Health](#) (NIMH) estimates that 26.2 percent of Americans ages 18 and older suffer from a diagnosable mental disorder.

One such newly classified disorder in the DSM-5 is grief. Bereavement turning into depression is one scenario you may have seen play out in your own workplace. It's understandable and normal that losing a loved one will require a time for grief, which is why many businesses offer paid days off for that process. Unfortunately, that process of grief can devolve into a depression.

Several months back, I spoke with [Dr. Noelle Nelson](#), a psychologist, author, speaker and regular contributor to Hitched, about the upcoming changes being made in this fifth edition.

“There is a normal grief process, which lasts a certain amount of time,” says Dr. Nelson, “and what this category addresses is people who have gone through that time of the grief process and were not able to let go and sank lower and lower into depression.”

Previous DSM editions specifically excluded grief from being diagnosed a major depressive disorder. However, Kenneth S. Kendler, M.D., Director of the Virginia Institute for Psychiatric and Behavioral Genetics and member of the DSM-5 Mood Disorder Work Group explained the inclusion in a paper published on the [DSM-5 website](#).

“A broad range of evidence agreed to by both sides of this debate shows that there are little to no systematic differences between individuals who develop a major depression in response to bereavement and in response to other severe stressors—such as being physical assaulted and raped, being betrayed by a trusted spouse whom you learn has been unfaithful or a beloved child whom you are told is dealing drugs...” wrote Dr. Kendler. Adding, “diagnosis in psychiatry as in the rest of medicine provides the possibility but by no means the requirement that treatment be initiated.”

This diagnosis may help employees who wish to resume work, but find it impossible to get going to seek professional help. Dr. Nelson points out that depression is treatable.

Other new inclusions in the DSM-5 are binge eating, hoarding disorder and a nuanced look at other previously included items such as Autism, Posttraumatic Stress Disorder (PTSD) and Attention Deficit Hyperactivity Disorder(ADHD).

Many critics worry about over-diagnosis, but as Dr. Nelson points out and mentioned by Dr. Kendler, classifying a problem and treating it are two different things. Only time will tell the full impact of the DSM-5, but it looks like new competition for diagnosis is coming.

At the end of April, Thomas Insel, M.D., Director of NIMH [announced](#) they will re-orient research away from DSM categories for their [Research Domain Criteria \(RDoC\)](#) project, which will research and explore diagnosis by incorporating genetics, imaging, cognitive science, and other levels of information to lay the foundation for a new classification system.

It's important to note that the DSM is an evolving publication. While the DSM-IV was published in 1994, a revision DSM-IV-TR was published in 2000. Thirteen years later we now have the DSM-5, which is expected to have multiple revisions as new research is completed. For the time being, however, it looks like the DSM-5 will continue to be the most important book published this year.

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