



Definition & Diagnosis of PTSD

DSM -V

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The National Council of Integrative
Psychotherapists



DSM-V Criteria

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Criteria

- a. Exposure to actual or threatened death, serious injury or sexual violence in one (or more) of the following ways:
 - 1. Directly experiencing the traumatic event(s).
 - 2. Witnessing, in person, the event(s) as it occurred to others.



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1. Learning that the traumatic event(s) occurred to a close family member or a close friend. In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental.



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Criteria

1. Experiencing repeated or extreme exposure to aversive details of the traumatic event(s), (e.g. first responders collecting human remains; police officers repeatedly exposed to details of child abuse).*

** Note: Criterion A4 does not apply to exposure through electronic media, television, movies or pictures, unless this exposure is work related.*



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Criteria

- a. Presence of one (or more) of the following intrusion symptoms associated with the traumatic event(s), beginning after the traumatic event(s) occurred:



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1. Recurrent, involuntary and intrusive distressing memories of the traumatic event(s). Note: In children older than 6 years, repetitive play may occur in which themes or aspects of the traumatic event(s) are expressed.



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1. Recurrent distressing dreams in which the content and/ or affect of the dream are related to the traumatic event(s). Note, in children, there may be frightening dreams without recognisable content.



1. Dissociative reactions (e.g. flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring (such reactions may occur on a continuum, with the most extreme expression being a complete loss of awareness of the present surroundings).

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Note:

In children, trauma-specific re-enactment may occur in play.



1. Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).

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1. Marked psychological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).



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a. Persistent avoidance of stimuli associated with the traumatic event(s), beginning after the traumatic event(s) occurred, as evidenced by one or both of the following:



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1. Avoidance of or efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s).
2. Avoidance of or efforts to avoid external reminders (people, places, conversations, activities objects, situations) that arouse distressing memories, thoughts or feelings about, or closely associated with, the traumatic event(s).



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- a. Negative alterations in cognitions and mood associated with the traumatic events(s), beginning or worsening after the traumatic event(s) occurred, as evidenced by two (or more) of the following:



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1. Inability to remember an important aspect of the traumatic event(s) (typically due to dissociative amnesia, and not to other factors such as head injury, alcohol or drugs).



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1. Persistent and exaggerated negative beliefs or expectations about oneself, others or the world (e.g. “I am bad”, “No one can be trusted”, “The world is completely dangerous”, “My whole nervous system is permanently ruined”).



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1. Persistent, distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame himself/herself or others.



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1. Persistent negative emotional state (e.g. fear; horror; anger; guilt or shame).
2. Markedly diminished interest or participation in significant activities.



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Criteria

1. Feelings of detachment or estrangement from others.
2. Persistent inability to experience positive emotions (e.g. inability to experience happiness, satisfaction or loving feelings).



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Criteria

- a. Marked alterations in arousal and reactivity associated with the traumatic event(s), beginning or worsening after the traumatic event(s) occurred, as evidenced by two (or more) of the following:



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1. Irritable behaviour and angry outbursts (with little or no provocation), typically expressed as verbal or physical aggression towards people or objects.
2. Reckless or self-destructive behaviour.
3. Exaggerated startle response.
4. Problems with concentration.
5. Sleep disturbance (e.g. difficulty falling or staying asleep or restless sleep).



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- a. Duration of the disturbance (Criteria B, C, D and E) is more than 1 month.
- b. The disturbance causes clinically significant distress or impairment in social, occupational or other important areas of functioning.
- c. The disturbance is not attributable to the physiological effects of a substance (e.g. medication, alcohol) or other medical condition.



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Dissociative Symptoms: The individual's symptoms meet the criteria for post traumatic stress disorder, and in addition, in response to the stressor, the individual experiences persistent or recurrent symptoms of either of the following:



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Derealisation: Persistent or recurrent experiences of unreality of surroundings (e.g. the world around the individual is experienced as unreal, dreamlike, distant or distorted).

Note: To use this subtype, the dissociative symptoms must not be attributable to the physiological effects of a substance (e.g. blackouts; behaviour during alcohol intoxication) or another medical condition (e.g. complex partial seizures).





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