

LMU Department of Psychology • Project Team Adler



**PsyCris**



# Psycho-social Support in Crisis Management

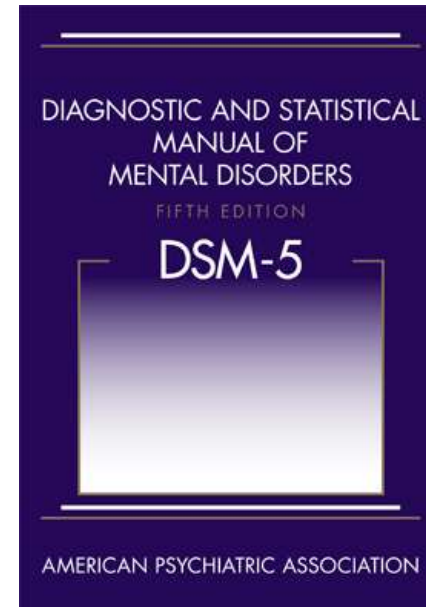
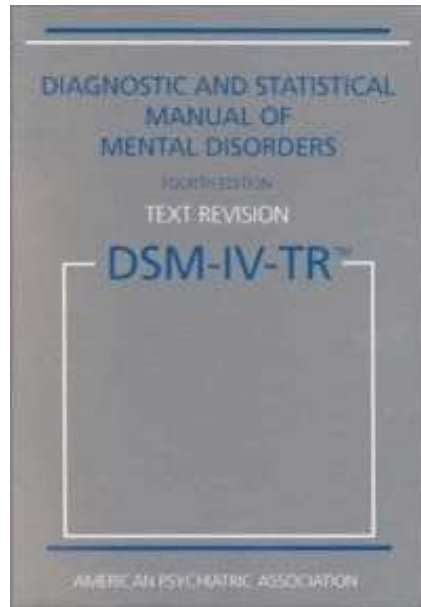
Trauma in DSM-IV-TR vs. DSM-V

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# Trauma in DSM-IV-TR vs. DSM-V





### DSM-IV

#### A. Exposure to a traumatic event

- (1) Person experienced, witnessed, was confronted with event(s) that involved actual or threatened death or serious injury, or a threat of physical integrity of self or others
- (2) Reaction involved intense fear, helplessness, or horror

### DSM-V

#### A. Exposure to actual or threatened death, serious injury, or sexual violence

- (1) Direct experience
- (2) Witnessing (in person) as event(s) occurred to others
- (3) Learning that the event(s) occurred to a close family member or close friend
- (4) Experiencing repeated or extreme exposure to aversive details of the event(s)  
(e.g., first responders or police officers)



### DSM-IV

#### B. Persistent reexperience (1/5)

- (1) Recurrent and intrusive recollections
- (2) Recurrent distressing dreams
- (3) Acting or feeling as if the event were recurring
- (4) Intense psychological distress at exposure to trauma-related internal or external cues
- (5) Physiological reactivity on exposure to cues

#### C. Persistent avoidance (3/7)

- (1) Avoidance of trauma-related thoughts, feelings
- (2) Avoidance of activities, places, or people
- (3) Inability to recall important aspect of the trauma
- (4) Diminished interest or participation in activities
- (5) Feeling of detachment or estrangement
- (6) Restricted range of effects
- (7) Sense of foreshortened future

### DSM-V

#### B. Intrusion symptoms (1/5)

- (1) Recurrent, involuntary, and intrusive memories
- (2) Recurrent distressing dreams
- (3) Dissociative reactions (e.g. flashbacks)
- (4) Intense, or prolonged psychological distress at exposure to trauma-related internal or external cues
- (5) Physiological reactivity on exposure to cues

#### C. Persistent avoidance

- (1) Avoidance of trauma-related thoughts, feelings
- (2) Avoidance of external reminders (people, places, conversations, activities, objects, situations)



### DSM-IV

#### D. Persistent symptoms of increased arousal (2/5)

- (1) Difficulty falling or staying asleep
- (2) Irritability or outbursts of anger
- (3) Difficulty concentrating
- (4) Hypervigilance
- (5) Exaggerated startle response

### DSM-V

#### D. Negative alterations in cognitions and mood (2/7)

- (1) Inability to remember aspect of trauma
- (2) Persistent and exaggerated negative beliefs or expectations about oneself, others, or the world
- (3) Persistent distorted cognitions about the cause or consequences of the trauma that lead the individual to blame himself/herself or others
- (4) Persistent negative emotional state (e.g. fear, horror, anger, guilt, or shame)
- (5) Diminished interest or participation in activities
- (6) Feelings of detachment or estrangement
- (7) Persistent inability to experience positive emotions



**DSM-IV**

**E. Duration of the disturbance**

> 1 month

**F. Clinically significant distress or impairment in social, occupational, or other important areas of functioning**

**DSM-V**

**E. Alterations in arousal and reactivity (2/6)**

- (1) Irritable behavior and angry outbursts
- (2) Reckless or self-destructive behavior
- (3) Hypervigilance
- (4) Exaggerated startle response
- (5) Problems with concentration
- (6) Sleep disturbance

**F. Duration of the disturbance**

> 1 month

**G. Clinically significant distress or impairment in social, occupational, or other important areas of functioning**

**H. Disturbance is not attributable to the physiological effects of a substance or another medical condition**



### DSM-IV

- A. Exposure to a traumatic event**
- B. Dissociative Symptoms (3/5)**
  - (1) Sense of numbing, detachment, or absence of emotional reactivity
  - (2) Reduction in awareness of his or her surroundings
  - (3) Derealization
  - (4) Depersonalization
  - (5) Dissociative amnesia
- C. Persistent reexperience**
- D. Persistent avoidance**
- E. Persistent symptoms of increased arousal**

### DSM-V

- A. Exposure to actual or threatened death, serious injury, or sexual violence**
- B. Presence of symptoms of any of the following categories (9/14)**
  - Intrusion symptoms*
    - (1) Recurrent, involuntary, and intrusive memories
    - (2) Recurrent distressing dreams
    - (3) Dissociative reactions (e.g. flashbacks)
    - (4) Intense, or prolonged psychological distress at exposure to trauma-related internal or external cues
  - Negative symptoms*
    - (5) Persistent inability to experience positive emotions
  - Dissociative Symptoms*
    - (6) altered sense of the reality of one`s surroundings or oneself
    - (7) Inability to remember aspect of trauma



### DSM-IV

- D. Clinically significant distress or impairment**
- E. The disturbance lasts for a minimum of 2 days and maximum of 4 weeks and occurs within 4 weeks of the traumatic event**
- H. Disturbance is not attributable to the physiological effects of a substance or another medical condition**

### DSM-V

#### *Avoidance Symptoms*

- (8) Avoidance of trauma-related thoughts, feelings
- (9) Avoidance of external reminders (people, places, conversations, activities, objects, situations)

#### *Arousal Symptoms*

- (10) Sleep disturbance
- (11) Irritable behavior and angry outbursts
- (12) Hypervigilance
- (13) Problems with concentration
- (14) Exaggerated startle response

- C. Duration of the disturbance is 3 days to 1 month after the trauma exposure**
- D. Clinically significant distress or impairment**
- E. Disturbance is not attributable to the physiological effects of a substance or another medical condition**





### DSM-IV

- D. Clinically significant distress or impairment**
- E. The disturbance lasts for a minimum of 2 days and maximum of 4 weeks and occurs within 4 weeks of the traumatic event**
- H. Disturbance is not attributable to the physiological effects of a substance or another medical condition**

### DSM-V

- B. Presence of symptoms of any of the following categories II (9/14)**

#### *Avoidance Symptoms*

- (8) Avoidance of trauma-related thoughts, feelings
- (9) Avoidance of external reminders (people, places, conversations, activities, objects, situations)

#### *Arousal Symptoms*

- (10) Sleep disturbance
- (11) Irritable behavior and angry outbursts
- (12) Hypervigilance
- (13) Problems with concentration
- (14) Exaggerated startle response

- C. Duration of the disturbance is 3 days to 1 month after the trauma exposure**