

Classification and Epidemiology of Mood Disorders

Mood Disorders

- sad blue or down in the dumps
- So hyper that people thought you weren't normal self
- **Emotional disturbance such as severe depression or depression alternating with manias**
- **~19% of adults have suffered from mood disorders**

Classification

- psycho or psychiatric disturbance
- Mood disturbance is a predominant feature
- **Clinically significant distress or impairment**
 - **Are you distressed enough**
 - **Are you impaired enough**

Symptoms of Mood Disorders

- affective: emotion: bad mood or easily angered
- Cognitive: thoughts: what are you thinking
- Behavioral: behavior: withdrawn from things or social groups you used to enjoy
- Physical: physic/physical: staying in sleep REM and having mer more restless patterns
- **Many combinations lead to a "mood disorder"**

DSM-V Mood Disorders

- **Depressive: uni-polar- downs only**
 - MDD
 - PDD (dysthymia)
 - Depressive disorder (NOS)
- **Bipolar- can, but do not have to include both ups and downs**
 - Bipolar I
 - Bipolar II
 - Cyclothymic
 - Bipolar disorder (NOS)

Other disorders

- Premenstrual dysphoric disorder: not pms!
- Disruptive mood dysregulation disorder: adult temper tantrums

MDD: The Common Cold of Psychopathology

- mainly because it's the first assumption
- Criteria for MDD: MUST KNOW ALL
 - **Depressed mood and Anhedonia: must have one or the other to be diagnosed**
 - Weight loss or gain (appetite change)
 - Sleep disturbance (insomnia or hypersomnia)
 - Psychomotor agitation or retardation
 - Fatigue or loss of energy
 - Feelings of worthlessness or self-guilt
 - Difficulty concentration or indecisiveness: cant make a decision so you don't do anything at all -----> CLINICALLY SIGNIFICANT
 - Obsession with suicide or recurrent thoughts of death: varies by degree
- More Criteria for MDD
 - At least **5** symptoms
 - Must last at least 2 weeks
 - Must be clinically significant -----> distress or impairment
 - Not accounted for by another disorder

Manic Episodes

- **Criteria for Manic Episodes**
 - **Elevated, expansive irritable mood: way more than what you normally feel like** *****Constant/rapid talking*****
 - **Increased goal directed activities** *****Very annoying and everything you do is grandiose******
 - Inflated self-esteem or grandiosity
 - Decreased need for sleep
 - Talkativeness or pressure to speak
 - Flight of ideas
 - Distractability
 - Reckless pursuit of pleasure
- More Criteria of manic episodes
 - First two symptoms above lasting **AT LEAST 1 WEEK**
 - **AT LEAST 3 OTHER SYMPTOMS**
 - Not accounted for by another disorder, medical condition or substance

Hypomanic Episodes: The milder version of manic episodes

- usually never seek treatment making it hard to diagnose because they simply don't need it.
- **Criteria for Hypo**
 - **Elevated, expansive or irritable mood**
 - **Increased goal directed activity or energy**
 - Inflated self-esteem or grandiosity
 - Decreased need for sleep
 - Talkativeness or pressure to speak
 - Flight of ideas
 - Distractibility
 - Reckless pursuit of pleasure
- More Criteria
 - Mood disturbance last **at least 4 days**
 - At least three other symptoms
 - Not just "usual self"
 - Observable by others
 - Does not cause impairment or hospitalization
 - Not due to medical or substance

*** NEVER CAUSES
DISTRESS

*** HIGHLY PLEASANT
AND NEVER SHOWS UP
FOR THERAPY

Persistent Depressive Disorder PDD: or Dysthymia

- **Criteria for PDD**
 - MUST HAVE A DEPRESSED MOOD
 - Two or more of the following
 - Poor appetite/overeating
 - Sleep disturbance
 - Low energy or fatigue
 - Low self-esteem
 - Poor concentration/indecisiveness
 - Feelings of hopelessness
- More Criteria
 - **Last at least 2 years with no period of remission greater than 2 months**
 - **Causes distress or impairment**
 - Not accounted for by another disorder
 - Not due to medical or substance problem

***double depression
- you have PDD then fall into a
major depressive episode