

## Table 1. Diagnostic Criteria for Generalized Anxiety Disorder

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- A. Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
- B. The individual finds it difficult to control the worry.
- C. The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms having been present for more days than not for the past 6 months):

**Note:** Only one item is required in children.

1. Restlessness or feeling keyed up or on edge.
  2. Being easily fatigued.
  3. Difficulty concentrating or mind going blank.
  4. Irritability.
  5. Muscle tension.
  6. Sleep disturbance (difficulty falling or staying asleep, or restless, unsatisfying sleep).
- D. The anxiety, worry, or physical symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
  - E. The disturbance is not attributable to the physiological effects of a substance (e.g., a drug of abuse, a medication) or another medical condition (e.g., hyperthyroidism).
  - F. The disturbance is not better explained by another mental disorder (e.g., anxiety or worry about having panic attacks in panic disorder, negative evaluation in social anxiety disorder [social phobia], contamination or other obsessions in obsessive-compulsive disorder, separation from attachment figures in separation anxiety disorder, reminders of traumatic events in posttraumatic stress disorder, gaining weight in anorexia nervosa, physical complaints in somatic symptom disorder, perceived appearance flaws in body dysmorphic disorder, having a serious illness in illness anxiety disorder, or the content of delusional beliefs in schizophrenia or delusional disorder).

## DSM-5 Criteria: Major Depressive Disorder

### Box 3.

#### DSM-5 Diagnosis: Major Depressive Disorder

##### **Major Depressive Episode:**

- ◆ Five (or more) of the following symptoms have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure.

*Note: Do not include symptoms that are clearly attributable to another medical condition.*

- ◇ Depressed most of the day, nearly every day as indicated by subjective report (e.g., feels sad, empty, hopeless) or observation made by others (e.g., appears tearful)
  - ◇ Markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by subjective account or observation)
  - ◇ Significant weight loss when not dieting or weight gain (e.g., change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day
  - ◇ Insomnia or hypersomnia nearly every day
  - ◇ Psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down)
  - ◇ Fatigue or loss of energy nearly every day
  - ◇ Feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick).
  - ◇ Diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)
  - ◇ Recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide
- ◆ The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.
  - ◆ The episode is not attributable to the physiological effects of a substance or to another medical condition.

*Note: The above criteria represent a major depressive episode.*

- ◆ The occurrence of the major depressive episode is not better explained by schizoaffective disorder, schizophrenia, schizophreniform disorder, delusional disorder, or other specified and unspecified schizophrenia spectrum and other psychotic disorders.
- ◆ There has never been a manic episode or a hypomanic episode.

*Note: This exclusion does not apply if all of the manic-like or hypomanic-like episodes are substance-induced or are attributable to the physiological effects of another medical condition.*

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## Table 1. Somatic Symptom Disorder

### Diagnostic criteria:

- A. One or more somatic symptoms that are distressing or result in significant disruption of daily life.
- B. Excessive thoughts, feelings, or behaviors related to the somatic symptoms or associated health concerns as manifested by at least one of the following
  1. Disproportionate and persistent thoughts about the seriousness of one's symptoms.
  2. Persistently high level of anxiety about health or symptoms.
  3. Excessive time and energy devoted to these symptoms or health concerns.
- C. Although any one somatic symptom may not be continuously present, the state of being symptomatic is persistent (typically more than 6 months).

### Specify if:

With **predominant pain** (previously pain disorder): This specifier is for individuals whose somatic symptoms predominantly involve pain.

### Specify if:

**Persistent:** A persistent course is characterized by severe symptoms, marked impairment, and long duration (more than 6 months).

### Specify current severity:

**Mild:** Only one of the symptoms specified in Criterion B is fulfilled.

**Moderate:** Two or more of the symptoms specified in Criterion B are fulfilled.

**Severe:** Two or more of the symptoms specified in Criterion B are fulfilled, plus there are multiple somatic complaints (or one very severe somatic symptom).

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