Saving PTSD from itself in DSM-V

Robert L. Spitzer a, Michael B. First b and Jerome C. Wakefield c

aColumbia University, United States

bNew York University, United States

Available online 1 December 2006.

Abstract

Papers in this special issue of the Journal of Anxiety Disorders concern critical issues and core assumptions that underlie the diagnostic construct of posttraumatic stress disorder. Rather than addressing specific points raised in these papers, we consider the issues and their implications for redefining PTSD and associated disorders in the DSM-V. Specific proposals are advanced to tighten definitional criteria for traumatic events and posttraumatic symptoms. We believe the more stringent criteria express the intent of the PTSD category and will promote more effective research on whether that intent was legitimate or based on misconceptions.

Keywords: Posttraumatic stress disorder; DSM-V; Trauma; Acute stress disorder

Article Outline

1. Tightening the definition of trauma in PTSD
2. Non-specificity of PTSD syndrome
3. Ruling out malingering and an exacerbation of a pre-existing mood, anxiety, or personality disorder
4. Deleting acute stress disorder and adding a new V code for acute non-pathological reactions to stress
5. Delayed onset
6. Closing thoughts

References

Corresponding author at: 1051 Riverside Drive, New York, NY 10032, United States.