

DSM-IV Personality Disorder Criteria (shorthand with commentary)

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Cluster A. (Odd)			Cluster B. (Dramatic)
Paranoid PD (4 or more) suspects exploitation doubts trust/loyalty reluctance to confide threats, hidden meanings grudges, unforgiving perceives attack on self suspects spouse cheating <i>(no mention of projection)</i>	Schizoid PD (4 or more) no desire relationships chooses solitary acts no interest in sex few pleasures lacks close friends, family indifference to praise/criticism emotional coldness <i>(note: theoretically linked to AvPD)</i> <i>(no mention of need-fear dilemma)</i> <i>(dynamic: need for contact buried)</i>	Schizotypal PD (5 or more) ideas of reference odd beliefs/magical thinking unusual perceptual experience odd thinking/speech suspicious/paranoid ideation inappropriate constricted affect odd, eccentric behavior no close friends paranoid-based social anxiety <i>(theoretically linked to SzPD)</i> <i>(linked to schizi spectrum)</i>	Antisocial PD (3 or more) failure conform social norms deceitfulness (lying) impulsivity irritability/aggression disregard for safety consistent irresponsibility lack of remorse [conduct disorder present before 15 y.o.] <i>(overly focused on criminal behavior)</i> <i>(missing sociopathy concept:: failure to develop conscience; omnipotent control defenses)</i>
Cluster B. (Dramatic)			Cluster C. (Anxious)
Borderline PD (5 or more) avoid real/imagined abandonment unstable relations, based on idealization/devaluation identity/self image disturbance self-destructive impulsivity recurrent suicidal behavior reactive affective instability chronic emptiness intense, disproportionate anger transient paranoia/dissociation <i>(Discrete PD disorder or developmental concept? - > 90% comorbid with other PDs!)</i> <i>(Kernberg definition: 1 ID diffusion, 2 Primitive defenses (splitting, acting out, projection), 3 traumatic Object relations)</i>	Histrionic PD (5 or more) uncomfortable, not center attention seductive/provocative rapid/shallow mood physical appearance to draw attention to self impressionistic speech dramatic, exaggerated expression suggestibility sees more intimacy than is real <i>(missing motivational concepts: Uncls anxiety, repressed anger)</i> <i>(Oedipal dynamics not mentioned)</i>	Narcissistic PD (5 or more) grandiose self-importance idealized success fantasies belief in specialness/unique requires excessive admiration sense of entitlement interpersonally exploitative lacks empathy intense envy arrogant, haughty behavior <i>(missing depressed anaclitic NPD presentation)</i> <i>(idealization/devaluation removed: empirically but not clinically sensible)</i>	Avoidant PD (4 or more) avoids jobs, fear criticism no involvement unless certain liked shows restraint relations, fears shame preoccupied w criticism/rejection inhibits relations b/c of inadequacy views self socially inept, inferior risks will lead to embarrassment <i>(Millon's diagnosis: obscures dynamic link with Schizoid phenomena)</i> <i>(Represents a cross between SZPD and older phobic PD?)</i>
Cluster C. (Anxious)		Research Criteria (can include traits in PD NOS)	
Dependent PD (5 or more) difficult solo decision making needs others to be responsible fear: express disagreement difficulty initiating activities excess efforts: gain nurturance intolerance of aloneness urgently replaces lost relations preoccupied w loss fear <i>(½ DepPD, ½ attachment style?)</i>	Obsess/Comp PD (4 or more) preoccupied: order/rules excessive perfectionism excessive work devotion overconscientious, inflexible doesn't discard items reluctance: delegating tasks miserly; hoardes \$ rigidity/stubborn <i>(distinguish between classic introjective vs shame-based OC types)</i>	Depressive PD (5 or more) mood: dejection, gloom self-concept: inadequate, worthless critical, blaming, derogatory brooding, prone to worry others: seen negatively, judged pessimistic prone: guilt, remorse self-concept: inadequate, worthless <i>(Represents a cross between anaclitic and introjective depressive types?)</i>	Passive/Agress PD (4 or more) passively resists tasks complaints: unappreciated sullen, argumentative criticizes, scorns authority envies, resents: fortunate complaints: misfortune hostile defiance vs contrition <i>(clinically valid but poor discriminant validity sent this out of the DSM-III-R)</i>

I designed this 'quick and dirty' reference sheet for myself and my colleagues at our Personality Disorder treatment program, who often have to develop rapid diagnostic ideas about PD diagnoses. I also included my empirical and theoretical commentary on DSM PD diagnoses, which have many conceptual problems. If you find it helpful, tack it up! Please contact me with feedback: info@jacobsmallphd.com. You can find more helpful information like this at www.jacobsmallphd.com.

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