

DSM 5 Criteria for Intermittent Explosive Disorder

The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM 5) is the standard classification of mental disorders used by mental health professionals in the United States.

The following are the diagnostic criteria for intermittent explosive disorder according to DSM 5:

- ♦ Recurrent behavioral outbursts representing a failure to control aggressive impulses as manifested by either of the following:
 - ♦ Verbal aggression (e.g. - temper tantrums, tirades, verbal arguments or fights) or physical aggression toward property, animals, or other individuals, occurring **twice** weekly, on average, for a period of **3** months. The physical aggression does not result in damage or destruction of property and does not result in physical injury to animals or other individuals.
 - ♦ Behavioral outbursts involving damage or destruction of property and/or physical assault involving physical injury against animals or other individuals occurring within a **12**-month period.
- ♦ The magnitude of aggressiveness expressed during the recurrent outbursts is grossly out of proportion to the provocation or to any precipitating psychosocial stressors.
- ♦ The recurrent aggressive outbursts are not premeditated (i.e. - they are impulsive and/or anger-based) and are not committed to achieve some tangible objective (e.g. - money, power, intimidation).
- ♦ The recurrent aggressive outbursts cause either marked distress in the individual or impairment in occupational or interpersonal functioning, or are associated with financial or legal consequences.
- ♦ Chronological age is at least **6** years (or equivalent developmental level).
- ♦ The recurrent aggressive outbursts are not better explained by another mental disorder (e.g. - major depressive disorder, bipolar disorder, disruptive mood dysregulation disorder, a psychotic disorder, antisocial personality disorder, borderline personality disorder) and are not attributable to another medical condition (e.g. - head trauma, Alzheimer's disease) or to the physiological effects of a substance (e.g. - a drug of abuse, a medication).
- ♦ For children ages 6 to 18 years, aggressive behavior that occurs as part of an adjustment disorder should not be considered for this diagnosis.

Note:

This diagnosis can be made in addition to the diagnosis of attention-deficit/hyper-activity disorder, conduct disorder, oppositional defiant disorder, or autism spectrum disorder when recurrent impulsive aggressive outbursts are in excess of those usually seen in these disorders and warrant independent clinical attention.

References

- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders. Diagnostic and Statistical Manual of Mental Disorders, 5(5).
<https://doi.org/10.1176/appi.books.9780890425596>
- Substance Abuse and Mental Health Services Administration. (2016). *Table 3.18, DSM-IV to DSM-5 Intermittent Explosive Disorder Comparison*. Nih.gov; Substance Abuse and Mental Health Services Administration (US).
<https://www.ncbi.nlm.nih.gov/books/NBK519704/table/ch3.t18/>