

# Information Handout

Professional Version | US English

## Recognizing Depersonalization / Derealization Disorder (DPD)



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## Description

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Psychiatric diagnostic frameworks serve multiple purposes. Classification of mental disorders enables clinicians and researchers to speak a common language when describing patterns of experience and behavior, guides appropriate treatment interventions, and acts as a coding system for insurance purposes. The success of these classification frameworks has varied across diagnoses but in the best cases has led to improved understanding and treatment of conditions, and has helped many service users who find such classification helpful (Perkins et al, 2018).

Diagnostic frameworks are not without controversy. They have been criticized on grounds of reliability, validity, and distortions due to commercial interests (Zigler & Phillips, 1961; Frances & Widiger, 2012; Bell, 2017). Most importantly, there are instances where they have had, and continue to have, extremely negative effects upon service users (Perkins et al, 2018). Diagnosis is not the only way of understanding people and their experiences. Many clinicians and their clients find that attending to our personal stories and narratives is a helpful approach, and psychological formulation is one technique for bringing together information about what has happened to an individual and the sense that they have made of it (British Psychological Society, 2018).

Depersonalization / Derealization Disorder (DPD) is characterized by experiences of unreality and detachment from oneself and the world. People suffering from DPD are aware that their symptoms are subjective experiences, but they are distressing nevertheless. *Recognizing Depersonalization / Derealization Disorder (DPD)* compares the DSM-5 and ICD-10 criteria for experiences of depersonalization and derealization, and the *Depersonalization / Derealization Checklist* is an assessment tool for clinicians.

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## Instructions

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The 'Recognizing...' series from Psychology Tools is designed to help clinicians understand the similarities and differences in the way that the two primary psychiatric diagnostic systems classify mental health problems.

Their formatting for aid of comparison means that some detail has been purposefully excluded, and clinicians are encouraged to refer to the original source material for formal diagnostic purposes. In particular, it has been assumed that symptoms cause clinically significant distress or impairment unless otherwise stated.

Information for the 'Recognizing ...' series was drawn from:

- The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*.
- The *International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10)*. The ICD-10 is available in two versions: (1) The Clinical Descriptions and Diagnostic Guidelines (CDDG) or 'blue book' is intended for general clinical, educational and service use; (2) The Diagnostic Criteria for Research (DCR) or 'green book' was designed to facilitate research.

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## References

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Frances, A. J., & Widiger, T. (2012). Psychiatric diagnosis: lessons from the DSM-IV past and cautions for the DSM-5 future. *Annual Review of Clinical Psychology*, 8, 109-130.

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World Health Organization. (1992). *The ICD-10 classification of mental and behavioural disorders: clinical descriptions and diagnostic guidelines*. Geneva, World Health Organization.

World Health Organization. (1993). *The ICD-10 classification of mental and behavioural disorders: diagnostic criteria for research*. Geneva, World Health Organization.

Zigler, E., & Phillips, L. (1961). Psychiatric diagnosis: A critique. *The Journal of Abnormal and Social Psychology*, 63(3), 607.

# Recognizing Depersonalization / Derealization Disorder (DPD)

	DSM-5	ICD-10
<b>Symptoms</b>	<b>1 of:</b>	<b>1 of:</b>
<b>Depersonalization:</b> experiences of unreality and detachment from oneself. Depersonalization can include detachment from one's own thoughts, feelings, body sensations, and actions. Common reports include a feeling as if watching oneself from a tunnel, behind glass or through a window, feeling as if one is not real or 'not really there', or feeling like a robot or an automaton.	✓	✓
<b>Derealization:</b> experiences of unreality and detachment from the world. Common reports include feeling as if the world is unfamiliar, artificial, flat or two dimensional, dreamlike, foggy, or visually distorted.	✓	✓

<b>Insight</b>	<b>1 of:</b>	<b>1 of:</b>
The individual is aware that their symptoms are subjective and not imposed by outside forces or other people.	✓	✓

<b>Duration</b>	<b>1 of:</b>	
Symptoms are persistent or recurrent.	✓	

<b>Impact</b>	<b>1 of:</b>	
1. The experiences of depersonalization / derealization cause significant distress.	✓	
2. Symptoms cause impairment in day to day functioning.	✓	

<b>Exclusions</b>		
1. Symptoms are not attributable to physiological effects of drugs / medication.	✓	
2. Symptoms are not attributable to another medical condition (e.g. seizures).	✓	
3. Symptoms are not better explained by another mental disorder (e.g. psychosis, panic, depression, PTSD).	✓	

<b>Associated symptoms</b>	
<b>Desomatization:</b> experiences of estrangement from– or change in– body sensations. Common reports include dizziness, partial or total physiological numbing, feeling weightless or hollow, lack of a sense of the physical boundaries of the body, loss of recognition of one's face/reflection and voice, changed perceptions of the size of different body parts, impaired touch or taste.	
<b>Deaffectualization:</b> experiences where emotional responses feel numbed, flattened, or superficial. Common reports include a disconnect between intellectually knowing what one should be feeling and a lack of experience of emotion, lack of empathy or affection, or loss of motivation.	
<b>Cognitive symptoms:</b> experiences of altered time perception, difficulty recalling episodic memories, rumination on the nature of reality and the self, worry about "going crazy".	

# Depersonalization / Derealization Disorder (DPD) Checklist

	DSM-5	ICD-10
<b>Symptoms</b>	<b>1 of:</b>	<b>1 of:</b>
<b>Depersonalization:</b> experiences of unreality and detachment from oneself. Depersonalization can include detachment from one's own thoughts, feelings, body sensations, and actions. Common reports include a feeling as if watching oneself from a tunnel, behind glass or through a window, feeling as if one is not real or 'not really there', or feeling like a robot or an automaton.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Derealization:</b> experiences of unreality and detachment from the world. Common reports include feeling as if the world is unfamiliar, artificial, flat or two dimensional, dreamlike, foggy, or visually distorted.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Insight</b>	<b>1 of:</b>	<b>1 of:</b>
The individual is aware that their symptoms are subjective and not imposed by outside forces or other people.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Duration</b>	<b>1 of:</b>
Symptoms are persistent or recurrent.	<input type="checkbox"/>

<b>Impact</b>	<b>1 of:</b>
1. The experiences of depersonalization / derealization cause significant distress.	<input type="checkbox"/>
2. Symptoms cause impairment in day to day functioning.	<input type="checkbox"/>

<b>Exclusions</b>	
1. Not attributable to physiological effects of drugs / medication.	<input type="checkbox"/>
2. Not attributable to another medical condition (e.g. seizures).	<input type="checkbox"/>
3. Not better explained by another mental disorder (e.g. psychosis, panic, depression, PTSD).	<input type="checkbox"/>

<b>Associated symptoms</b>
<b>Desomatization:</b> experiences of estrangement from– or change in– body sensations. Common reports include dizziness, partial or total physiological numbing, feeling weightless or hollow, lack of a sense of the physical boundaries of the body, loss of recognition of one's face/reflection and voice, changed perceptions of the size of different body parts, impaired touch or taste.
<b>Deaffectualization:</b> experiences where emotional responses feel numbed, flattened, or superficial. Common reports include a disconnect between intellectually knowing what one should be feeling and a lack of experience of emotion, lack of empathy or affection, or loss of motivation.
<b>Cognitive symptoms:</b> experiences of altered time perception, difficulty recalling episodic memories, rumination on the nature of reality and the self, worry about "going crazy".

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