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#### Should 'Risk Syndrome of Psychosis' Be Included in DSM V as a Diagnosis? A Road towards Preventive Psychiatry

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## Should 'Risk syndrome of Psychosis' be included in DSM V as a diagnosis? A road towards preventive psychiatry"

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#### **Faculties**

- 1. Amresh Shrivastava: introduction
- 2. Ming Tsuang. 'An Overview of the Current Status of Risk Syndrome for Psychosis'
- 3. Barbara Cornblatt Ph.D. 'Inclusion of the psychosis atrisk category in DSM-V: Is it premature?'
- 4. Scott Woods 'Risk syndrome for psychosis": A reliable &valid diagnosis'
- 5. Cheryl Corcoran 'Inclusion of the psychosis risk syndrome in DSM-V: an argument for placing it in the appendix'
- 6. Discussion by Will Carpenter

### Psychiatric diagnosis

- Clinical
- A quasi-legal document.
- Significant advancement has been made in phenomenology, diagnostic criteria, classification, & neurobiology.

### Risk syndrome of schizophrenia

- The science of risk syndrome has apparently matured and
- Its proponents are ready for its inclusion in DSM V as a diagnosis.
- This may happen or may not happen.
- However it is a welcome agenda for discussion.
- All the stakeholders are curiously watching
- Interest of the 'patient' should not be left out.

The symposia will reflect, discuss and provide synthesis of data to frame an opinion based upon not only evidence but also on experience and expectations of consumers.

# Risk Syndrome of Psychosis as a diagnosis in DSM V: Is the question legitimate?

Amresh Shrivastava

#### Schizophrenia – disability and burden

- Economics and mortality
- Prevention of schizophrenia
- approximately 80-85% patients report experiencing long lasting sub-syndromal symptoms
- Much of functional decline occurs during this prodromal phase.
- Identification of individuals at prodromal stage of illness would offer an opportunity for preventive interventions.

#### At-risk & prodrome

- Evidence for specific intervention is not very strong,
- At-risk or subthreshold symptoms,
  - feel subjective distress
  - disability
  - Morbidity
- It is recognized that data available is insufficient
- full of 'non-specificities'.
- Concern of inappropriate prescribing and stigmatizing
- For prevention of schizophrenia there is no other route but to identify earliest,

## Valid question?

- The present debate presents an opportunity to examine value of a diagnosis.
- Is a diagnostic category necessary for prevention?
- A position in classification system is a move forward
- opportunity is now
- Significant research progress enough to contest dismissing the argument.
- research needs to reach clinics.
- In that sense the question appears legitimate.