Book Reference

Perkinson, R. R. (2012). *Chemical dependency counseling: A practical guide* (4th ed.). Thousand Oaks, CA: SAGE.

Chemical Dependency Counseling A PRACTICAL GUIDE

Robert R. Perkinson

Appendix 3

DSM-IV-TR Psychoactive Substance Use Disorder

- I. Diagnostic Criteria for Psychoactive Substance Abuse
 - A. A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one (or more) of the following occurring within a 12-month period:
 - 1. Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home (e.g., repeated absences or poor work performance related to substance use; substance-related absences, suspensions, or expulsions from school; neglect of children or household)
 - 2. Recurrent use in situations in which it is physically hazardous (e.g., driving while intoxicated or operating a machine when impaired by substance use)
 - 3. Recurrent substance-related legal problems (e.g., arrests for substance-related disorderly conduct)
 - 4. Continued use despite knowledge of having persistent or recurrent social or interpersonal problems caused or made worse by the effects of the substance (e.g., arguments with spouse about consequences of intoxication, physical fights)
 - B. Never met the criteria for psychoactive substance dependence for this substance
- II. Diagnostic Criteria for Psychoactive Substance Dependence
 - A. A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by three (or more) of the following occurring at any time in the same 12-month period:
 - 1. Tolerance, as defined by either of the following:
 - a. A need for markedly increased amounts of the substance to achieve intoxication or desired effect
 - b. Markedly diminished effect with continued use of the same amount of the substance
 - 2. Withdrawal, as manifested by either of the following:
 - a. Characteristic withdrawal syndrome of the substance
 - b. The same (or a closely related) substance taken to relieve or avoid withdrawal symptoms

Source: Used with permission. American Psychiatric Association. (2000). Diagnostic and statistical manual of mental disorders (text revision). Washington, DC: Author.

- 3. Substance often taken in larger amounts or over a longer period of time than was intended
- 4. A persistent desire or unsuccessful efforts to cut down on or control substance use
- 5. A great deal of time spent in activities necessary to get the substance (e.g., visiting multiple doctors, driving long distances), use the substance (e.g., chain smoking), or recover from its effects
- 6. Important social, occupational, or recreational activities given up or reduced because of substance use
- 7. Substance use continued despite knowledge of having a persistent or recurrent social, psychological, or physical problem that is likely to have been caused or were made worse by the use of the substance (e.g., keeps using heroin despite family arguments about it, cocaineinduced depression, having an ulcer made worse by drinking)

Specify if:

With physiological dependence: Evidence of tolerance or withdrawal

Without physiological dependence: No evidence of tolerance or withdrawal