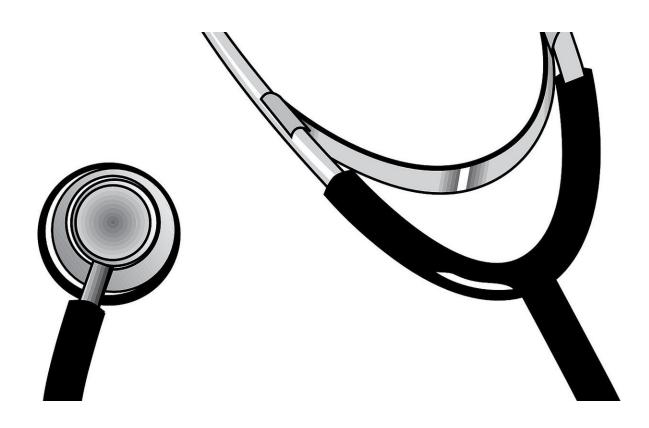


Study finds psychiatric diagnosis to be 'scientifically meaningless'

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A new study, published in *Psychiatry Research*, has concluded that psychiatric diagnoses are scientifically worthless as tools to identify discrete mental health disorders.

The study, led by researchers from the University of Liverpool, involved



a detailed analysis of five key chapters of the latest edition of the widely used Diagnostic and Statistical Manual (DSM), on 'schizophrenia', 'bipolar disorder', 'depressive disorders', 'anxiety disorders' and 'traumarelated disorders'.

Diagnostic manuals such as the DSM were created to provide a common diagnostic language for mental health professionals and attempt to provide a definitive list of mental health problems, including their symptoms.

The main findings of the research were:

- Psychiatric diagnoses all use different decision-making rules
- There is a huge amount of overlap in symptoms between diagnoses
- Almost all diagnoses mask the role of trauma and adverse events
- Diagnoses tell us little about the individual patient and what treatment they need

The authors conclude that diagnostic labelling represents 'a disingenuous categorical system'.

Lead researcher Dr. Kate Allsopp, University of Liverpool, said: "Although diagnostic labels create the illusion of an explanation they are scientifically meaningless and can create stigma and prejudice. I hope these findings will encourage mental health professionals to think beyond diagnoses and consider other explanations of mental distress, such as trauma and other adverse life experiences."

Professor Peter Kinderman, University of Liverpool, said: "This study provides yet more evidence that the biomedical diagnostic approach in psychiatry is not fit for purpose. Diagnoses frequently and uncritically reported as 'real illnesses' are in fact made on the basis of internally



inconsistent, confused and contradictory patterns of largely arbitrary criteria. The diagnostic system wrongly assumes that all distress results from disorder, and relies heavily on subjective judgments about what is normal."

Professor John Read, University of East London, said: "Perhaps it is time we stopped pretending that medical-sounding labels contribute anything to our understanding of the complex causes of human distress or of what kind of help we need when distressed."

More information: Kate Allsopp et al, Heterogeneity in psychiatric diagnostic classification, *Psychiatry Research* (2019). DOI: 10.1016/j.psychres.2019.07.005

Provided by University of Liverpool

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