

## Major Depressive Disorder (MDD)

### Changes in DSM and ICD-10?

- The changes in diagnostic criteria for major depressive disorder (MDD) from the fourth to the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) may appear small but had important consequences for how the diagnosis is used when determining if a Level II PASRR is needed.
- Before ICD-10, a diagnosis of *Major Depressive Disorder* was a reliable differentiator between a person with a likely SMI and a person who was experiencing a mild or situational depression.
- After ICD-10 in 2015, conditions that would have been diagnosed as *Unspecified Depressive Disorder* are now called *Major Depressive Disorder*.
- Because of this change, Maximus must understand the level of impairment and impact a MDD diagnosis has on someone. Specifiers from ICD-10 are imperative for Maximus to know when looking at the impact a MDD diagnosis has on someone.
- Remember, a suspected or confirmed diagnosis is only one piece of the puzzle to understanding if someone potentially meets PASRR SMI criteria.

## Depression vs Major Depression

Depression	Major Depressive Disorder
A common experience of sadness, low mood, or loss of interest that can be temporary or situational.	A more severe and persistent form of depression that meets specific diagnostic criteria.
Typically lasts for less than two weeks.	<p>Characterized by at least five of the following symptoms for at least two weeks:</p> <ul style="list-style-type: none"> <li>• Depressed mood most of the day, nearly every day</li> <li>• Loss of interest or pleasure in activities previously enjoyed</li> <li>• Changes in appetite or weight</li> <li>• Sleep disturbances (insomnia or excessive sleeping)</li> <li>• Psychomotor agitation or retardation</li> <li>• Fatigue or loss of energy</li> <li>• Feelings of worthlessness or guilt</li> <li>• Difficulty concentrating or making decisions</li> <li>• Recurrent thoughts of death or suicide</li> </ul>
May be caused by stressful events, life changes, or underlying medical conditions.	MDD is a more serious condition that can significantly impact daily functioning and quality of life. It requires professional treatment, such as therapy, medication, or a combination of both.

## Level I Screen Diagnoses Options

<p><i>Diagnosis is essential to understand the severity</i></p>	<ul style="list-style-type: none"> <li>• Major Depressive Disorder, Single Episode, Mild or Moderate</li> <li>• Major Depressive Disorder, Single Episode, Severe, With or Without Psychotic Features</li> <li>• Major Depressive Disorder, Single Episode in Partial or Full Remission</li> <li>• Other Depressive Episode</li> <li>• Premenstrual Dysphoric Disorder</li> <li>• Other Specified Depressive Episode</li> <li>• Major Depressive Disorder Recurrent, Mild or Moderate</li> <li>• Major Depressive Disorder, Recurrent, Severe, With or Without Psychotic Features</li> <li>• Major Depressive Disorder, Recurrent, in Partial or Full Remission</li> <li>• Other Recurrent Depressive Disorders</li> <li>• Major Depressive Disorder, Recurrent, Unspecified</li> <li>• Cyclothymic Disorder</li> <li>• Dysthymic Disorder</li> <li>• Other Persistent mood Affective Disorder</li> </ul>
<p><i>We also need to look at</i></p>	<ul style="list-style-type: none"> <li>• How long have they been having these symptoms? Are there known periods of remission?</li> <li>• Severity – do they have self-injurious behaviors, Suicidal talk, History of suicide attempts, Appetite changes, loss of interest of once pleasurable activities due to mental health condition, excessive tearfulness, and/or excessive irritability</li> <li>• History – If no current symptoms, what are potential indicators of prior depressive episodes?</li> </ul>
<p><i>Is there evidence, based on documentation, observations, interviews, and history of the individual with noted difficulties in these areas:</i></p>	<ul style="list-style-type: none"> <li>• Interpersonal Functioning – difficulty interacting with others, altercations, evictions, unstable employment, frequently isolating or avoiding others</li> <li>• Completing Tasks – serious difficulty completing tasks, requires assistance with task; difficulty with concentration; persistence and pace</li> <li>• Adaptation to Change – self injurious or self-mutilation; suicidal, physical violence or threats, appetite disturbance, serious loss of interest, tearfulness, irritability; withdrawal</li> </ul>
<p><i>What help or support have they needed?</i></p>	<ul style="list-style-type: none"> <li>• Have they been psychiatrically hospitalized? Have they received PHP or residential treatment? Do they utilize crisis or mobile services? When were these services: once in a lifetime (recently or over 5 years ago) or ongoing.</li> </ul>
<p><i>How has depression impacted their lives?</i></p>	<ul style="list-style-type: none"> <li>• Have they dropped out of school, had disruptive relationships, loss job(s), or had legal charges due to their mental health issues?</li> </ul>
<p><i>What resources and supports has the individual needed?</i></p>	<ul style="list-style-type: none"> <li>• Have they ever been in psychiatric hospital, Inpatient, outpatient treatment, used crisis services?</li> <li>• Have they eve had legal intervention because of their mental health diagnosis?</li> <li>• Have they had trouble maintaining stable housing or been without a home of their own due to their mental health diagnosis?</li> </ul>
<p><i>Medications</i></p>	<ul style="list-style-type: none"> <li>• What is their current medication? Include dosage per day and the corresponding diagnosis.</li> <li>• One quick note about PRN medications and mental health medications prescribed for medical needs. We provide a space for you to write some narrative. Let us know in the text field if a person is prescribed psychotropic medications for any diagnosis other than mental health. We don't want to delay finalizing reviews, but we will have to verify information if it's not included in the referral.</li> </ul>