
How to Determine the DSM-5 Diagnosis of Patients with Psychosis

Last updated April 2024

Introduction

Psychosis is common, and there are many varieties. This fact sheet guides you through the process of thinking through the main DSM-5 diagnoses that apply to psychotic disorders. For help with how to ask the right questions to discover psychosis in patients, see the How to Interview for Psychosis Fact Sheet.

I. Assess for the presence of the Big 5 key psychotic symptoms

Big 5 mnemonic: Delusions Herald Schizophrenic Bad News

- **Delusions** (fixed false beliefs)
- **Hallucinations** (usually auditory, but can be visual, tactile, olfactory)
- **Disorganized Speech** (looseness of associations, tangential)
- **Disorganized Behavior** (Illogical, irrational, odd behaviors)
- **Negative symptoms** (paucity of speech, isolation, lack of activities, lack of thought)

II. Based on presence and time course of the Big 5, sort through the differential diagnosis

A. Psychosis without significant depression or mania

- *Schizophrenia*: 1 month of at least 2 major symptoms (one of which must be D, H, or S), plus 5 months of prodrome (total duration at least 6 months)
- *Schizophreniform disorder*: Similar to schizophrenia, except the total duration is less, from 1 to 6 months. About 2/3rds eventually develop schizophrenia.
- *Brief Psychotic disorder*: At least one major psychotic symptom lasting from 1 day to 1 month. About 50% of these patients will have another psychotic episode within 3 years.
- *Delusional disorder*: At least one delusion for 1 month or more, but without schizophrenia, and without markedly impaired functioning, and without obviously odd or bizarre behavior. Subtypes include erotomanic, grandiose, jealous, persecutory, somatic, mixed, and unspecified.
- *Unspecified psychotic disorder*: Psychosis is present, but symptoms or time course don't quite fit into above categories, or you just don't have enough information to decide yet.

B. Psychosis with a major mood component

- *Schizoaffective disorder* (specify either depressed type or bipolar type—use bipolar type if there is a history of mania)
 - Depression or mania in addition to 2 or more of the Big 5 psychotic symptoms
 - At least a two week period of only psychotic symptoms without mood symptoms
 - Mood symptoms are present a majority of the time
- *Bipolar disorder*
 - A history of at least one lifetime episode of mania, in addition to one or more episodes of depression
 - Psychosis is present only during mood episodes
- *Major depression with psychotic features*
 - An episode of major depression with psychosis
 - Psychosis is present only during the depression (disappears completely once the depression resolves)
- *Schizophrenia with comorbid depression*

- An established diagnosis of schizophrenia
- Discrete episodes of major depression that come and go

C. Algorithm for deciding on diagnosis

- Are there more than one psychotic symptom?
 - If no: Cannot be schizophrenia, schizoaffective, or schizophreniform
 - If yes: Can be any psychotic disorder
- Is the patient having a significant mood episode?
 - If yes
 - Is there mania?
 - If yes, can be bipolar or schizoaffective
 - Is psychosis present only during mania?
 - If yes, then bipolar disorder
 - If psychosis present for 2 weeks without mania, then schizoaffective disorder, bipolar type