DSM-5 (ICD-10) and Sex Offender Treatment

Can we communicate more with a more definitive diagnosis?
PURPOSE

1) Overview the DSM-5 (and ICD-10) coding and changes that are specific to Sex Offender Treatment Diagnosis

2) Review the Diagnostic groups and determine the basic structure and criteria of each group as it applies to sex offender treatment.

3) Determine if additional diagnosis or additional r/o diagnosis can aid in the development of treatment intervention.
Using the DSM-IV it was easy to list a person who sexually abused a child as:
- V61.21 Sexual Abuse of a Child

Consider Additional information such as one of these diagnosis:
- 301.82 Narcissistic Personality Disorder
- 301.82 Avoidant Personality Disorder
- 312.34 Intermittent Explosive Disorder
- 295.70 Schizoaffective Disorder

Would this impact on your group placement decisions and/or treatment decisions?
What is the point of the diagnosis?

- If the diagnosis is viewed as a summary of treatment direction then the summary must be as complete as possible. Diagnosis differs inside the group members, covering individualized treatment protocol.

- If the diagnosis is viewed as a summary of deficiencies without determining strengths then the summary must still be as complete as possible. Diagnosis summary would be individual-specific toward weaknesses, but not a complete treatment protocol, which would include encouragement of strengths.

- If the diagnosis is viewed as a requirement of this specific treatment program (i.e. we only treat sex offenders), then one might view the diagnosis only as justification for treatment in general, all could be the same diagnosis.
Specific Sex Offender Diagnosis DSM-IV and DSM-5 What is New

Former DSM-IV system V61.21 (Slide One of two)

Primary diagnosis of Child Sexual Abuse, Confirmed 995.53
  1) Initial Encounter (T74.22XA) {patient active treatment}
  2) Subsequent Encounter (T74.22XD) {routine care}

Primary Diagnosis of Child Sexual Abuse, Suspected 995.53
  1) Initial Encounter (T76.22XA)
  2) Subsequent Encounter (T76.22XD)
Specific Sex Offender Diagnosis DSM-IV and DSM-5 What is New

- Former DSM-IV system V61.21 (Slide Two of two)

Other Circumstance Related to Child Sexual Abuse

  V61.21 (Z69.010) Encounter for mental health services for victim of child sexual abuse by parent.

  V61.21 (Z62.020) Encounter for mental health services for victim of nonparental child sexual abuse.

  V15.41 (Z62.010) Personal history (past history) of sexual abuse in childhood

  V61.22 (Z69.011) Encounter for mental health services for perpetrator of parental child sexual abuse.

  V62.83 (Z69.021) Encounter for mental health services for perpetrator of nonparental child sexual abuse.
Specific Sex Offender Diagnosis DSM-IV and DSM-5 What is New

- DSM-IV system V61.12  Sexual Abuse of an Adult (by partner) {Slide one of two}

- Spouse or Partner Violence, Sexual, Confirmed
  - Initial Encounter 995.83 (T74.21XA)
  - Subsequent Encounter 995.83 (T74.21XD)

- Spouse or Partner Violence, Sexual, Suspected
  - Initial Encounter 995.83 (T76.21XA)
  - Subsequent Encounter 995.83 (TX76.21XD)
Specific Sex Offender Diagnosis DSM-IV and DSM-5 What is New

- DSM-IV system V61.12 Sexual Abuse of an Adult (by partner) {Slide two of two}
- Other Circumstances Related to Spouse or Partner Violence, Sexual
  - Encounter for mental health services for victim of spouse or partner abuse V61.11 (Z69.81)
  - Personal history (past history) of spouse or partner violence, sexual V15.41 (Z91.410)
  - Encounter for mental health services for perpetrator of spouse or partner violence, sexual V61.12 (Z69.12)
Specific Sex Offender Diagnosis DSM-IV and DSM-5 What is New

- DSM-IV system V62.83
- Adult Sexual Abuse by Nonspouse or Nonpartner, Confirmed
  - Initial Encounter 995.83 (T74.21XA)
  - Subsequent Encounter 995.83 (T74.21XD)
- Adult Sexual Abuse by Nonspouse or Nonpartner, Suspected
  - Initial Encounter 995.83 (T76.21XA)
  - Subsequent Encounter 995.83 (T76.21XD)
Looking at the New System

<table>
<thead>
<tr>
<th></th>
<th>Sexual Abuse of Child DSM-IV V61.21</th>
<th>Sexual Abuse of Adult (Partner) DSM-IV V61.12</th>
<th>Sexual Abuse of Adult non Partner DSM-IV V61.83</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DSM 5 ICD9</td>
<td>DSM-5 ICD 10</td>
<td>DSM 5 ICD9</td>
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<td>Confirmed Initial</td>
<td>995.53</td>
<td>T74.22XA</td>
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Other Circumstances Related to Child Sexual Abuse

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<tr>
<th>Encounter Services for Victim from Parent or Partner</th>
<th>V61.21</th>
<th>Z69.010</th>
<th>V61.11</th>
<th>Z69.81</th>
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<td>Z69.810</td>
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<tr>
<td>Personal Past History</td>
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<td>Z62.810</td>
<td>V15.41</td>
<td>Z91.410</td>
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<tr>
<td>Encounter services for perpetrator parent or partner</td>
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NOTES:
1) Chart is adopted from pages 717, 719, and 720 of DSM-5.
2) DSM-5 ICD-9 codes are effective until 10/01/2014 after which the DSM-5 ICD-10 codes are to be used.
What information, if any, is gained when asking about comorbidity?

- Question whether comorbidity are excuses or are apart of the puzzle in the development of the environment where checks and balances for abuse are not well formed or perhaps not present.
- Psychosis, Major Depression, Poor Childhood Development, Drug and Alcohol abuse; perhaps these result in poor development of individual internal boundaries.
- Involvement with sub-social or cultural groups which encourage the breaking of boundaries (i.e. gangs, clicks, clubs that encourage illegal behavior).
- Presence of Sexual Dysfunctions or the presence of Paraphilic Disorders
- Does an additional diagnosis aid in communication of treatment decisions?
Does an additional diagnosis aid in communication of treatment decisions?

- a. Neurodevelopmental Disorders
- b. Schizophrenia Spectrum and Other Psychotic Disorders
- c. Depressive Disorders
- d. Anxiety Disorders
- e. Trauma-and stressor Related Disorders
- f. Dissociative Disorders
- g. Somatic Symptom and related Disorders
- h. Feeding and Eating Disorders
Does an additional diagnosis aid in communication of treatment decisions?

- i. Sleep-Wake Disorders
- j. Sexual Dysfunctions
- k. Gender Dysphoria
- l. Disruptive, Impulse Control, and Conduct Disorders
- m. Substance Related and Addictive Disorders
- n. Neurocognitive Disorders
- o. Personality Disorders
- p. Paraphilic Disorders
- q. Other Mental Disorders
Source:


- www.psychiatry.org/dsm5