**2 Types of Moods**

**2 Types of Mood Disorders**

Major Depressive Episode

When an individual experiences a discrete episode of persistent and pervasive emotional [depression](http://www.behavenet.com/taxonomy/term/7285), this term may be applied. The individual may be diagnosed with one of the [Mood Disorders](http://www.behavenet.com/taxonomy/term/7360), either [Major Depressive Disorder](http://www.behavenet.com/taxonomy/term/7362) or a [Bipolar Disorder](http://www.behavenet.com/taxonomy/term/7203).

**Diagnostic criteria for Major Depressive Episode**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. Five (or more) of the following [symptoms](http://www.behavenet.com/symptom) have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either

(1) [depressed mood](http://www.behavenet.com/depression) or
(2) loss of interest or pleasure.

**Note:** Do not include symptoms that are clearly due to a general medical condition, or [mood-incongruent](http://www.behavenet.com/mood-incongruent) [delusions](http://www.behavenet.com/delusion) or [hallucinations](http://www.behavenet.com/hallucination).

(1) depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad or empty) or observation made by others (e.g., appears tearful). **Note:** In children and adolescents, can be [irritable](http://www.behavenet.com/irritable-mood) mood.
(2) markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others)
(3) significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. **Note:** In children, consider failure to make expected weight gains.
(4) [Insomnia](http://www.behavenet.com/primary-insomnia) or [Hypersomnia](http://www.behavenet.com/hypersomnia) nearly every day
(5) [psychomotor agitation](http://www.behavenet.com/psychomotor-agitation) or [retardation](http://www.behavenet.com/psychomotor-retardation) nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down)
(6) fatigue or loss of energy nearly every day
(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)
(8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)
(9) recurrent thoughts of death (not just fear of dying), recurrent [suicidal](http://www.behavenet.com/suicidal) ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide

C. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

D. The symptoms are not due to the direct physiological effects of a [substance](http://www.behavenet.com/drug) (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hypothyroidism).

E. The symptoms are not better accounted for by [Bereavement](http://www.behavenet.com/bereavement), i.e., after the loss of a loved one, the symptoms persist for longer than 2 months or are characterized by marked functional impairment, morbid preoccupation with worthlessness, suicidal ideation, psychotic symptoms, or psychomotor retardation. Use clinical judgment.

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**Manic depressive** or **bipolar** [Mood Disorders](http://www.behavenet.com/taxonomy/term/7360) are characterized by dramatic "mood swings" or episodes of [Mania](http://www.behavenet.com/taxonomy/term/7351), [Hypomania](http://www.behavenet.com/taxonomy/term/7336), or [Major Depression](http://www.behavenet.com/taxonomy/term/7357).

**Manic Episode**

* [mental disorder](http://www.behavenet.com/mental-disorder)

When an individual experiences a discrete period of persistent and pervasive [manic](http://www.behavenet.com/taxonomy/term/7365) (elated, irritable or euphoric) [mood](http://www.behavenet.com/taxonomy/term/7359), this term may be applied. The individual may be diagnosed with one of the [bipolar disorders](http://www.behavenet.com/taxonomy/term/7203).

**Diagnostic criteria for Manic Episode**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. A distinct period of abnormally and persistently elevated, expansive, or irritable [mood](http://www.behavenet.com/mood), lasting at least 1 week (or any duration if hospitalization is necessary).

B. During the period of mood disturbance, three (or more) of the following symptoms have persisted (four if the mood is only [irritable](http://www.behavenet.com/irritable-mood)) and have been present to a significant degree:

(1) inflated self-esteem or [grandiosity](http://www.behavenet.com/grandiosity)
(2) decreased need for sleep (e.g., feels rested after only 3 hours of sleep)
(3) more talkative than usual or [pressure](http://www.behavenet.com/pressured-speech) to keep talking
(4) [flight of ideas](http://www.behavenet.com/flight-ideas) or subjective experience that thoughts are [racing](http://www.behavenet.com/racing-thoughts)
(5) [distractibility](http://www.behavenet.com/distractibility) (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)
(6) increase in goal-directed activity (either socially, at work or school, or sexually) or [psychomotor agitation](http://www.behavenet.com/psychomotor-agitation)
(7) excessive involvement in activities that have a high potential for painful consequences (e.g., engaging in unrestrained buying sprees, sexual indiscretions, or foolish business investments)

D. The mood disturbance is sufficiently severe to cause marked impairment in occupational functioning or in usual social activities or relationships with others, or to necessitate hospitalization to prevent harm to self or others, or there are psychotic features.

E. The symptoms are not due to the direct physiological effects of a [substance](http://www.behavenet.com/drug)(e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g., hyperthyroidism).

Note: Manic-like episodes that are clearly caused by somatic [antidepressant](http://www.behavenet.com/antidepressant) treatment (e.g., medication, electroconvulsive therapy, light therapy) should not count toward a diagnosis of [Bipolar I Disorder](http://www.behavenet.com/bipolar-i-disorder).

Criteria for Severity/Psychotic/Remission Specifiers for current (or most recent) Manic Episode

Note: Code in fifth digit. Can be applied to a Manic Episode in Bipolar I Disorder only if it is the most recent type of mood episode.

**.x1--Mild:** Minimum symptom criteria are met for a Manic Episode.

**.x2--Moderate:** Extreme increase in activity or impairment in judgment.

**.x3--Severe Without Psychotic Features:** Almost continual supervision required to prevent physical harm to self or others.

**.x4--Severe With Psychotic Features:** [Delusions](http://www.behavenet.com/delusion) or [hallucinations](http://www.behavenet.com/hallucination). If possible, specify whether the psychotic features are mood-congruent or mood-incongruent:

[**Mood-Congruent**](http://www.behavenet.com/mood-congruent) **Psychotic Features:** Delusions or hallucinations whose content is entirely consistent with the typical manic themes of inflated worth, power, knowledge, identity, or special relationship to a deity or famous person.
[**Mood-Incongruent**](http://www.behavenet.com/mood-incongruent) **Psychotic Features:** Delusions or hallucinations whose content does not involve typical manic themes of inflated worth, power, knowledge, identity, or special relationship to a deity or famous person. Included are such symptoms as[persecutory delusions](http://www.behavenet.com/persecutory-delusions) (not directly related to [grandiose](http://www.behavenet.com/grandiosity) ideas or themes), [thought insertion](http://www.behavenet.com/thought-insertion), and delusions of being controlled.

**.x5--In Partial Remission:** Symptoms of a Manic Episode are present but full criteria are not met, or there is a period without any significant symptoms of a Manic Episode lasting less than 2 months following the end of the Manic Episode.

**.x6--In Full Remission:** During the past 2 months no significant signs or symptoms of the disturbance were present.

**.x0--Unspecified.**

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**Diagnostic criteria for Hypomanic Episode**

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([cautionary statement](http://www.behavenet.com/node/19583))

A. A distinct period of persistently elevated, expansive, or [irritable](http://www.behavenet.com/irritable-mood) [mood](http://www.behavenet.com/mood), lasting throughout at least 4 days, that is clearly different from the usual non depressed mood.

B. During the period of mood disturbance, three (or more) of the following symptoms have persisted (four if the mood is only irritable) and have been present to a significant degree:

(1) inflated self-esteem or [grandiosity](http://www.behavenet.com/grandiosity)
(2) decreased need for sleep (e.g., feels rested after only 3 hours of sleep)
(3) more talkative than usual or [pressure](http://www.behavenet.com/pressured-speech) to keep talking
(4) [flight of ideas](http://www.behavenet.com/flight-ideas) or subjective experience that thoughts are [racing](http://www.behavenet.com/racing-thoughts)
(5) [distractibility](http://www.behavenet.com/distractibility) (i.e., attention too easily drawn to unimportant or irrelevant external stimuli)
(6) increase in goal-directed activity (either socially, at work or school, or sexually) or [psychomotor agitation](http://www.behavenet.com/psychomotor-agitation)
(7) excessive involvement in pleasurable activities that have a high potential for painful consequences (e.g., the person engages in unrestrained buying sprees, sexual indiscretions, or foolish business investments)

C. The episode is associated with an unequivocal change in functioning that is uncharacteristic of the person when not symptomatic.

D. The disturbance in mood and the change in functioning are observable by others.

E. The episode is not severe enough to cause marked impairment in social or occupational functioning, or to necessitate hospitalization, and there are no psychotic features.

F. The [symptoms](http://www.behavenet.com/symptom) are not due to the direct physiological effects of a [substance](http://www.behavenet.com/drug)(e.g., a drug of abuse, a medication, or other treatment) or a general medical condition (e.g., hyperthyroidism).

**Note:** Hypomanic-like episodes that are clearly caused by somatic[antidepressant](http://www.behavenet.com/antidepressant) treatment (e.g., medication, [electroconvulsive therapy](http://www.behavenet.com/electroconvulsive-therapy), [light therapy](http://www.behavenet.com/phototherapy)) should not count toward a diagnosis of [Bipolar II Disorder](http://www.behavenet.com/bipolar-ii-disorder).

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**Diagnostic criteria for 296.5x Bipolar I Disorder**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. Criteria have been met for at least one manic episode (criteria A – D under Manic episode).

C. The occurrence of the manic and major depressive episodes is not better accounted for by [Schizoaffective Disorder](http://www.behavenet.com/schizoaffective-disorder), [Schizophrenia](http://www.behavenet.com/schizophrenia), [Schizophreniform Disorder](http://www.behavenet.com/schizophreniform-disorder), [Delusional Disorder](http://www.behavenet.com/delusional-disorder), or other specified or unspecified schizophrenia spectrum and other Psychotic Disorder.

*Specify/coding* (for current or most recent episode):

manic
hypomanic
depressed

unspecified

Mild

Moderate

Severe

With Psychotic features

In partial remission

In full remission

Unspecified

*Specify*:

With anxious distress

With mixed features

With rapid cycling

With melancholic features

With atypical features

With mood congruent psychotic features

With mood incongruent psychotic features

With catatonic features

With peripartum onset

With seasonal pattern

**Diagnostic criteria for 296.89 Bipolar II Disorder**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. Criteria have been met for at least one hypomanic episode, and at least one Major Depressive Episode.

B. There has never been a [Manic Episode](http://www.behavenet.com/manic-episode).

C. The [mood](http://www.behavenet.com/mood) [symptoms](http://www.behavenet.com/symptom) in Criteria A and B are not better accounted for by[Schizoaffective Disorder](http://www.behavenet.com/schizoaffective-disorder) and are not superimposed on [Schizophrenia](http://www.behavenet.com/schizophrenia),[Schizophreniform Disorder](http://www.behavenet.com/schizophreniform-disorder), [Delusional Disorder](http://www.behavenet.com/delusional-disorder), or Psychotic Disorder Not Otherwise Specified.

E. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

*Specify* current or most recent episode:

**Hypomanic:** if currently (or most recently) in a Hypomanic Episode
**Depressed:** if currently (or most recently) in a Major Depressive Episode

*Specify* (for current or most recent Major Depressive Episode only if it is the most recent type of mood episode):

With anxious distress

With mixed features

With rapid cycling

With mood congruent psychotic features

With mood incongruent psychotic features

With catatonic features

With peripartum onset

With seasonal pattern

*Specify*:

Mild

Moderate

Severe

With Psychotic features

In partial remission

In full remission

Unspecified

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**Diagnostic criteria for 301.13 Cyclothymic Disorder**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. For at least 2 years, the presence of numerous periods with [hypomanic](http://www.behavenet.com/hypomania) [symptoms](http://www.behavenet.com/symptom) (see p. 338) that do not meet the criteria for a hypomanic episode and numerous periods with [depressive](http://www.behavenet.com/depression) [symptoms](http://www.behavenet.com/symptom) that do not meet criteria for a [Major Depressive Episode](http://www.behavenet.com/major-depressive-disorder). **Note:** In children and adolescents, the duration must be at least 1 year.

B. During the above 2-year period (1 year in children and adolescents), the person has not been without the symptoms in Criterion A for more than 2 months at a time.

C. No [Major Depressive Episode](http://www.behavenet.com/major-depressive-disorder), [Manic Episode](http://www.behavenet.com/manic-episode), or [Hypomanic Episode](http://www.behavenet.com/mixed-episode) has been present.

D. The symptoms in Criterion A are not better accounted for by [Schizoaffective Disorder](http://www.behavenet.com/schizoaffective-disorder) and are not superimposed on [Schizophrenia](http://www.behavenet.com/schizophrenia), [Schizophreniform Disorder](http://www.behavenet.com/schizoaffective-disorder), [Delusional Disorder](http://www.behavenet.com/delusional-disorder), or Psychotic Disorder Not Otherwise Specified.

E. The symptoms are not due to the direct physiological effects of a [substance](http://www.behavenet.com/drug) (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hyperthyroidism).

F. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

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**Diagnostic criteria for 296.3x Major Depressive Disorder**

([DSM](http://www.behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://www.behavenet.com/node/19583))

A. Five (or more) of the following [symptoms](http://www.behavenet.com/symptom) have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either

(1) [depressed mood](http://www.behavenet.com/depression) or
(2) loss of interest or pleasure.

**Note:** Do not include symptoms that are clearly due to a general medical condition, or [mood-incongruent](http://www.behavenet.com/mood-incongruent) [delusions](http://www.behavenet.com/delusion) or [hallucinations](http://www.behavenet.com/hallucination).

(1) depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad or empty) or observation made by others (e.g., appears tearful). **Note:** In children and adolescents, can be [irritable](http://www.behavenet.com/irritable-mood) mood.
(2) markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others)
(3) significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. **Note:** In children, consider failure to make expected weight gains.
(4) [Insomnia](http://www.behavenet.com/primary-insomnia) or [Hypersomnia](http://www.behavenet.com/hypersomnia) nearly every day
(5) [psychomotor agitation](http://www.behavenet.com/psychomotor-agitation) or [retardation](http://www.behavenet.com/psychomotor-retardation) nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down)
(6) fatigue or loss of energy nearly every day
(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)
(8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)
(9) recurrent thoughts of death (not just fear of dying), recurrent [suicidal](http://www.behavenet.com/suicidal) ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide

B. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

C. The symptoms are not due to the direct physiological effects of a [substance](http://www.behavenet.com/drug) (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hypothyroidism).

Note: The symptoms are not better accounted for by [Bereavement](http://www.behavenet.com/bereavement), i.e., after the loss of a loved one, the symptoms persist for longer than 2 months or are characterized by marked functional impairment, morbid preoccupation with worthlessness, suicidal ideation, psychotic symptoms, or psychomotor retardation. Use clinical judgment.

D. The Major Depressive Episodes are not better accounted for by [Schizoaffective Disorder](http://www.behavenet.com/schizoaffective-disorder) and are not superimposed on [Schizophrenia](http://www.behavenet.com/schizophrenia), [Schizophreniform Disorder](http://www.behavenet.com/schizophreniform-disorder), [Delusional Disorder](http://www.behavenet.com/delusional-disorder), or Psychotic Disorder Not Otherwise Specified.

E. There has never been a [Manic Episode](http://www.behavenet.com/manic-episode), or a [Hypomanic Episode](http://www.behavenet.com/hypomanic-episode).

*Specify* (for current or most recent Major Depressive Episode only if it is the most recent type of mood episode):

With anxious distress

With mixed features

With melancholic features

With mood congruent psychotic features

With mood incongruent psychotic features

With catatonic features

With peripartum onset

With seasonal pattern

*Specify*:

Mild

Moderate

Severe

With Psychotic features

In partial remission

Single Episode

Recurrent Episode

[**With Seasonal Pattern**](http://www.behavenet.com/seasonal-pattern-specifier-mood-disorders)

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**Diagnostic criteria for 300.4 Persistent Depressive (Dysthymic) Disorder**

([DSM](http://behavenet.com/diagnostic-and-statistical-manual-mental-disorders-fourth-edition-text-revision) 5)

([cautionary statement](http://behavenet.com/node/19583))

A. Depressed mood for most of the day, for more days than not, as indicated either by subjective account or observation by others, for at least 2 years. Note:In children and adolescents, mood can be [irritable](http://behavenet.com/irritable-mood) and duration must be at least 1 year.

B. Presence, while depressed, of two (or more) of the following:

(1) poor appetite or overeating
(2) [Insomnia](http://behavenet.com/primary-insomnia) or [Hypersomnia](http://behavenet.com/hypersomnia)
(3) low energy or fatigue
(4) low self-esteem
(5) poor concentration or difficulty making decisions
(6) feelings of hopelessness

C. During the 2-year period (1 year for children or adolescents) of the disturbance, the person has never been without the [symptoms](http://behavenet.com/symptom) in Criteria A and B for more than 2 months at a time.

D. Criteria for a [Major Depressive Episode](http://behavenet.com/major-depressive-episode) may be continuously present for 2 years.

E. There has never been a [Manic Episode](http://behavenet.com/manic-episode), [Hypomanic Episode](http://behavenet.com/hypomanic-episode), and criteria have never been met for [Cyclothymic Disorder](http://behavenet.com/cyclothymic-disorder).

F. The disturbance does not occur exclusively during the course of a chronic Psychotic Disorder, such as [Schizophrenia](http://behavenet.com/schizophrenia) or [Delusional Disorder](http://behavenet.com/delusional-disorder).

G. The [symptoms](http://behavenet.com/symptom) are not due to the direct physiological effects of a [substance](http://behavenet.com/drug)(e.g., a drug of abuse, a medication) or a general medical condition (e.g., hypothyroidism).

H. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

*Specify* if:

**Early Onset:** if onset is before age 21 years
**Late Onset:** if onset is age 21 years or older

*Specify* (for most recent 2 years of Dysthymic Disorder):

**With Atypical Features**

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