

APPENDIX VII

DIAGNOSTIC CRITERIA FOR SCHIZOPHRENIA

Frequently employed criteria for the diagnosis of schizophrenia are presented in Tables I-V in chronological order of their development.

Table I

FUNDAMENTAL OR BASIC SYMPTOMS	PRIMARY SYMPTOMS
1. Disorder (loosening) of associations 2. Disorder (inappropriateness) of affect 3. Ambivalence (simple functioning) 4. Autism (complex function) 5. 6.	Disturbance of associations Clouded States Affective changes Possibly hallucinations Possibly stereotypy Physical changes

Bleuler's (1911) fundamental (basic) and primary symptoms of schizophrenia. (Based on Bleuler E: Dementia Praecox **Oder** Gruppe der Schizophrenien. Deuticke, Leipzig, 1911).

Table II

-
1. The hearing of one's thoughts spoken aloud one's head (Gedankenlautwerden)
 2. The hearing of voices that comment on what one is doing at the time
 3. Experiences of bodily influence
 4. Thought withdrawal and other forms of thought interference
 5. Thought diffusion (Gedankenansbreitung)
 6. Delusional perception
 7. Everything is the spheres of feeling, drive, and volition which the patient experiences as imposed on him or influenced by others

Schneider's (1957) first rank symptoms of schizophrenia, (Based on Schneider K: Primare und sekundare symptomen bei Schizophrenie, Fortschr. Neurol. Psychiat. 25: 487-490, 1957).

Table III

-
1.
 - a. Delusions (not specified or other than depressive)
 - b. Hallucinations (auditory)
 - c. Hallucinations (visual)
 - d. Hallucinations (other)
 2. Crazy thinking and/or thought disorder. Any of the following:
 - a. Bizarre thinking
 - b. Autism or grossly unrealistic private thoughts
 - c. Looseness of associations, illogical thinking, overinclusion
 - d. Blocking
 - e. Concreteness
 - f. Derealization
 - g. Depersonalization
 3. Inappropriate
 4. Confusions
 5. Paranoid ideation
 6. Catatonic behavior
 - a. Excitement
 - b. Stupor
 - c. Waxy flexibility
 - d. Negativism
 - e. Mutism
 - f. Echolalia
 - g. Stereotyped motor activity

The New Haven Schizophrenia Index developed by Astrachan et al. (1972).

To be considered as part of the schizophrenic group, the patient must score on either item 1 or items 2a, 2b, 2c and must attain a total score of at least four points.

He can achieve a maximum of four points on item 1: two for the presence of delusions, two for hallucinations.

On item 2 he can score two points for any of symptoms a through c, one point for either or both symptoms d through e and one point each for f and g. He can thus score a maximum of five points on items 2.

Items 3, 4, 5 and 6 each receive one point.

Note: Where the fourth point necessary for inclusion in the sample is provided by 2d or 2e, these symptoms are not scored.

(Based on Astrachan BM, Harrow M, Adler D, Brauer L, Schwartz A and Schwarz C: A checklist for the diagnosis of schizophrenia. Br. J. Psychiatry 121: 529-539, 1972).

Table IV

-
1. Restricted affect
 2. Poor insight
 3. Poor rapport
 4. Incoherent speech
 5. No walking early
 6. No depressed **facies**
 7. Thought aloud/thought broadcasting
 8. Widespread delusions
 9. Bizarre delusions
 10. Nihilistic delusions
 11. No elation
 12. Unreliable information
-

The Flexible System Criteria for the Diagnosis of Schizophrenia, also referred to as the CSB System (Carpenter, Strauss and Bartko, 1973). The presence of five of the 12 items qualifies for a wider concept of schizophrenia and the presence of six for a narrower concept. (Based on Carpenter WT, Strauss JS and Bartko JJ: Flexible system for the diagnosis of schizophrenia. Report from the WHO international Pilot Study of Schizophrenia. Science 182: 1275-1278, 1973).

Table V

A through E are necessary

A. Age of onset 40 or below

B. Onset: acute (first episode with a diagnosis of “bouffee delirante”) or progressive with or without abnormal premorbid personality and/or abnormal psycho social adjustment.

C. Chronicity: active phases are followed by residual phase marked by permanent deficit of variable severity

D. Characteristic symptoms (at least two of the following four symptom groups):

1. Markedly illogical: unrealistic, bizarre, and/or magical thinking
2. Inappropriate affect: blunted, flat, and/or discordant affect and/or ambivalence
3. Formal thought disorder: loosening of associations, inefficient thinking, incoherent speech
4. Delusional ideas: fragmented and do not develop into delusional system

E. Not due to an organic psychosis, alcoholism or drug abuse

The French Empirical Diagnostic Criteria for Schizophrenia by Pull, Pull and Pichot (1981). (Based on Pull CB, Pull CM and Pichot P: Empirical diagnostic criteria for schizophrenia on related non-affective psychoses in France. Paper presented at the Conference “Concepts of Schizophrenia,” 4-6 October 1981, Cologne, FRG. Adapted from Berner G, Gabriel E, Katschnig H, Kieffer W, Koehler K, Lenz G and Simhandl Ch: Diagnostic Criteria for Schizophrenic and Affective Psychoses. World Psychiatric association, 1983).