

# ENTITLEMENT ELIGIBILITY GUIDELINE

## ADJUSTMENT DISORDER

**MPC**            03000  
**ICD-9**           309  
**ICD-10**         F43.2

### DEFINITION

### ADJUSTMENT DISORDERS

An Adjustment Disorder is a psychological response to an identifiable stressor or stressors. The stressor(s) may be of any severity.

Adjustment Disorders are specified as acute or chronic.

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders 4<sup>th</sup> edition Text Revision (DSM-IV-TR) states an Acute Adjustment Disorder resolves within six months. A Chronic Adjustment Disorder persists for longer than six months. Chronic Adjustment Disorder occurs in response to a chronic stressor ( e.g., chronic illness ) or to a stressor with enduring consequences ( e.g., financial and emotional difficulties resulting from a divorce ).

Chronic Adjustment Disorder is the condition for which entitlement may be granted.

### Criteria Set for Adjustment Disorder

The Adjustment Disorder criteria set is derived from the DSM-IV-TR. The diagnosis of an Adjustment Disorder may include a subtype which characterizes the predominant symptoms.

### ADJUSTMENT DISORDERS:

#### Criterion A

The development of emotional or behavioral symptoms in response to an identifiable stressor(s) occurring within 3 months of the onset of the stressor(s).

**Criterion B**

These symptoms or behaviors are clinically significant as evidenced by either of the following:

- (1) marked distress that is in excess of what would be expected from exposure to the stressor
- (2) significant impairment in social or occupational (academic) functioning

**Criterion C**

The stress-related disturbance does not meet the criteria for another specific Axis I disorder and is not merely an exacerbation of a preexisting Axis I or Axis II disorder.

**Criterion D**

The symptoms do not represent Bereavement.

**Criterion E**

Once the stressor (or its consequences) has terminated, the symptoms do not persist for more than an additional 6 months.

**DIAGNOSTIC STANDARD**

A diagnosis from a qualified medical practitioner (family physician or psychiatrist) or a registered/licensed psychologist is required. The diagnosis is made clinically. Supporting documentation should be as comprehensive as possible and should satisfy the requirements for diagnosis as outlined in the DSM-IV-TR diagnostic criteria.

**NOTE:** Entitlement should be granted for a chronic condition only. For Veterans Affairs Canada (VAC) purposes, "chronic" means the condition has existed for at least six months. Signs and symptoms are generally expected to persist despite medical attention, although they may wax and wane over the six month period and thereafter.

**ENTITLEMENT CONSIDERATIONS****A. CAUSES AND /OR AGGRAVATION**

**NOTE:** The onset of symptoms of an Adjustment Disorder occur within three months of an identifiable stressor(s). The documentation of the symptoms and / or the formal diagnosis of an Adjustment Disorder may not occur until after the three month period has elapsed. Each case should be adjudicated on the medical evidence provided and its own merits.

**NOTE:** The following list of factors is not all inclusive. Factors, other than those listed in Section A, may be claimed to cause an Adjustment Disorder. Other factors may be considered based on the individual merits and medical evidence provided for each case. Consultation with Medical Advisory should be considered.

1. Experiencing a severe stressor\* within the three months before the clinical onset of Adjustment Disorder

\* A severe stressor is a direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity; or witnessing or being involved in an event that involves death, injury, or a threat to the physical integrity of another person. The event or events evoke intense fear, helplessness, or horror.

The list of severe stressors below is not all inclusive. Other events may qualify as severe stressors. If the medical evidence indicates other events result in the clinical onset of Adjustment Disorder consultation with Medical Advisory should be considered.

- (i) experiencing a life-threatening event
- (ii) being subject to a serious physical attack or assault including rape and sexual molestation
- (iii) being threatened with a weapon, being held captive, being kidnapped, or being tortured
- (iv) being an eyewitness to a person being killed or critically injured
- (v) viewing corpses or critically injured casualties as an eyewitness
- (vi) being an eyewitness to atrocities inflicted on another person or persons
- (vii) killing or maiming a person in a non criminal act
- (viii) being an eyewitness to, or participating in, the clearance of critically injured casualties

2. Experiencing a stressful life event\* within the three months before the clinical onset of Adjustment Disorder

\* Events which qualify as stressful life events include, but are not limited to:  
(i) being socially isolated and unable to maintain friendships or family relationships, due to physical location, language barriers, disability, or medical or psychiatric illness

- (ii) experiencing a problem with a long-term relationship including: the break-up of a close personal relationship, the need for marital or relationship counseling, marital separation, or divorce
- (iii) having concerns in the work or school environment including: on-going disharmony with fellow work or school colleagues, perceived lack of social support within the work or school environment, perceived lack of control over tasks performed and stressful work loads, or experiencing bullying in the workplace or school environment
- (iv) experiencing serious legal issues including: being detained or held in custody, on-going involvement with law enforcement concerning violations of the law, or court appearances associated with personal legal problems
- (v) having severe financial hardship including: loss of employment, long periods of unemployment, foreclosure on a property, or bankruptcy
- (vi) having a family member or significant other experience a major deterioration in their health
- (vii) being a full-time caregiver to a family member or significant other with a severe physical, mental or developmental disability

3. Having a significant other\* who experiences one of the applicable severe stressors within the three months before the clinical onset of Adjustment Disorder

Applicable severe stressors:

- (i) experiencing a life-threatening event
- (ii) being subject to a serious physical attack or assault including rape and sexual molestation
- (iii) being threatened with a weapon, being held captive, being kidnapped, or being tortured.

\* A significant other is a person who has a close family bond or a close personal relationship and is important or influential in one's life

4. Experiencing the death of a significant other within the three months before the clinical onset of Adjustment Disorder

5. Having a clinically significant psychiatric condition\* within the three months before the clinical onset of Adjustment Disorder

\*A clinically significant psychiatric condition is an Axis I or Axis II disorder as defined in the DSM-IV-TR.

6. Having a medical illness or injury which is life-threatening or which results in serious physical or cognitive disability within the three months before the clinical onset of Adjustment Disorder
7. Having chronic pain of at least three months duration at the time of clinical onset of Adjustment Disorder
8. Having a miscarriage, fetal death in-utero or stillbirth, within the three months before the clinical onset of Adjustment Disorder
9. Inability to obtain appropriate clinical management of Adjustment Disorder

**B. MEDICAL CONDITIONS WHICH ARE TO BE INCLUDED IN ENTITLEMENT / ASSESSMENT**

- Decreased Libido- if the medical information indicates decreased libido is a symptom of a psychiatric condition.
- Sleep Disorder Related to Adjustment Disorder
- Sleep Disorder Related to Another Mental Disorder
- Anxiety Disorders
- Mood Disorders
- Schizophrenia and other Psychotic Disorders
- Personality Disorders
- Alcohol Use Disorders
- Substance Use Disorders
- Dissociative Disorders
- Pain Disorders/Chronic Pain Syndrome (DSM-IV-TR Axis I Diagnosis)
- Eating Disorder

**C. COMMON MEDICAL CONDITIONS WHICH MAY RESULT IN WHOLE OR IN PART FROM ADJUSTMENT DISORDER AND / OR ITS TREATMENT**

Section C medical conditions may result in whole or in part as a direct result of Adjustment Disorder, from the treatment of Adjustment Disorder or the combined effects of Adjustment Disorder and its treatment.

Conditions listed in Section C of the Entitlement Considerations are only granted entitlement if the individual merits and medical evidence of the case determines a consequential relationship exists. Consultation with Medical Advisory should be considered.

If it is claimed a medication required to treat Adjustment Disorder resulted in whole, or in part, in the clinical onset, or clinical worsening, of a medical condition the following must be established:

1. The individual was receiving the medication at the time of the clinical onset, or clinical worsening, of the medical condition.
2. The medication was used for the treatment of the Adjustment Disorder.
3. The medication is unlikely to be discontinued or the medication is known to have enduring effects after discontinuation.
4. The individual's medical information and the current medical literature supports the medication can result in the clinical onset, or clinical worsening, of the medical condition.
5. Note: Individual medications may belong to a class, or grouping, of medications. The effects of a specific medication may vary from the grouping. The effects of the specific medication should be considered and not the effects of the group.

The list of Section C conditions is not all inclusive. Conditions, other than those listed in Section C, may be claimed to have a consequential relationship to an Adjustment Disorder and / or its treatment. Other conditions may be considered for entitlement based on the individual merits and medical evidence provided for each case.

Consultation with Medical Advisory should be considered.

- Sexual Dysfunction (e.g., Erectile Dysfunction)
- Irritable Bowel Syndrome
- Bruxism
- Xerostomia
- Periodic Limb Movement Disorder
- Restless Leg Syndrome
- Obstructive Sleep Apnea

## REFERENCES FOR ADJUSTMENT DISORDER

1. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 4<sup>th</sup> ed. Text Revision (DSM-IV-TR ) Washington: American Psychiatric Association, 2000.

2. Australia. (2008). *Statement of principles concerning adjustment disorder*. No. 37 of 2008.
3. Australia. (2008). *Statement of principles concerning adjustment disorder*. No. 38 of 2008.
4. Sadock B.J., Sadock V.A. *Kaplan & Sadock's Comprehensive Textbook of Psychiatry*, 8<sup>th</sup> ed. Philadelphia: Lippincott Williams & Wilkins, 2005.