DSM-5 and ICD-11 on personality disorder: A lawyer’s perspective

PETER BARTLETT1,2, 1Nottinghamshire Healthcare NHS Trust, Institute of Mental Health, University of Nottingham, Nottingham, UK; 2School of Law, University of Nottingham, Nottingham, UK

ABSTRACT
Medical definitions are not merely abstract categorizations. They are used in the real world, where they have social effects, and nowhere is this more true than for diagnoses of personality disorder. This article considers the relevance of personality disorder in legal contexts and questions whether meaningful analysis of how the new diagnostic structures proposed for ICD-11 and DSM-5 will play out in real, social situations has been carried out. Without such analysis, it is not possible to know whether the new criteria will be an improvement or a step backwards. Copyright © 2011 John Wiley & Sons, Ltd.

Introduction: The project of classification

The process for reform of both the ICD and the DSM are well underway, with the DSM-5 expected (perhaps optimistically) to take effect in 2012 and the ICD-11 2 years later. Debates about validity and reliability, as well as about the intersections and divergences between the new taxonomies, are already well advanced, and there are starting to be indications both as to what the new systems may look like and as to what the

Will the DSM move to a system of diagnosis by ‘dimensional ratings’ rather than by traditional diagnostic categories?

The debates about the new categorical systems, unsurprisingly, are based in a variety of clinical and biomedical discourses. Ever since Robert Spitzer endeavoured with DSM-III to give psychiatric taxonomy enhanced scientific credibility, debates about reliability and, to a lesser degree, validity of categories have figured large in these taxonomic reform projects. In addition, if reliability as articulated