Prevalence of substance use disorder. A question of definition?

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Abstract

Background. The introduction of the 5th edition of the DSM has changed the dimensionality of addiction from a two- to a one-dimensional structure, leading to changes in the classification of individuals and the prevalence of disorders. The symptom-oriented view has been criticized for dramatic changes over the past 40 years, inflation of psychiatric diagnoses and lack of precision in distinguishing between normal and diseased. Most recently, it has been challenged by arguing that it formulates an explanation rather than a description, and that a redefinition in terms of "heavy use over time" better fits the epidemiological data, would reduce stigmatization and help initiating early lifestyle changes and interventions. This study aims at (1) investigating changes in substance-use disorders between DSM-IV and -5; (2) analysing the link between the current criteria definition (DSM-5) and various indicators of consumption; and (3) using established definitions for at risk consumers in order to assess the extent of concordance and discordance with DSM-5 diagnoses. Methods. Data from the German Epidemiological Survey of Substance Abuse on 12-month DSM-IV and -5 criteria for substance use disorders (alcohol, tobacco, illicit drugs and analgesics) and various consumption indicators were used. Cut-off values were taken from the literature. Results. Concordance between DSM-IV and -5 vary depending on the substance. Among 12 months consumers the change from DSM-IV to DSM-5 increased the prevalence of alcohol use and tobacco use disorder by 40% and 60 %, respectively; the prevalence of disorder related to the use of analgesics decreased by 22 %. The correlations between number of DSM-5 criteria and use indicators were substantial. DSM diagnoses miss a large part of heavy consumers but include a number of individuals with low consumption. Conclusions. The inconsistency of substance use disorder diagnoses due to changes in DSM diagnostic criteria question the validity of the symptom-oriented concept of addiction. Implications of heavy use as an alternative concept are discussed in terms of measurement, intervention and treatment.

Declaration of interest

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Keywords

Substance use disorder, addiction concept, psychiatric diagnoses