

Appendix 2

Diagnostic criteria for alcohol use disorders

This appendix contains two sets of diagnostic criteria for alcohol use disorders, namely:

- ICD-10 Criteria
- DSM-IV-R Criteria

ICD-10 Criteria for the Alcohol Dependence Syndrome

Three or more of the following manifestations should have occurred together for at least one month or, if persisting for periods of less than one month, should have occurred together repeatedly within a 12-month period:

- A strong desire or sense of compulsion to consume alcohol.
- Impaired capacity to control drinking in terms of its onset, termination, or levels of use, as evidenced by:
 - alcohol being often taken in larger amounts or over a longer period than intended, or
 - by a persistent desire to or unsuccessful efforts to reduce or control alcohol use.
- A physiological withdrawal state when alcohol is reduced or ceased, as evidenced by:
 - the characteristic withdrawal syndrome for alcohol, or
 - by use of the same (or closely related) substance with the intention of relieving or avoiding withdrawal symptoms.
- Evidence of tolerance to the effects of alcohol, such that:
 - there is a need for significantly increased amounts of alcohol to achieve intoxication, or
 - the desired effect, or a markedly diminished effect with continued use of the same amount of alcohol.
- Preoccupation with alcohol, as manifested by:
 - important alternative pleasures or interests being given up or reduced because of drinking, or
 - a great deal of time being spent in activities necessary to obtain, take, or recover from the effects of alcohol.
- Persistent alcohol use despite clear evidence of harmful consequences, as evidenced by continued use when the individual is actually aware, or may be expected to be aware, of the nature and extent of harm.

Source: WHO 1992, *The ICD-10 Classification of Mental and Behavioural Disorders: Clinical descriptions and diagnostic guidelines, F10–F19 Mental and behavioural disorders due to psychoactive substance use*, World Health Organization, Geneva, available at <http://www.who.int/substance_abuse/terminology/ICD10ClinicalDiagnosis.pdf>.

DSM-IV diagnostic criteria for substance abuse

A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one (or more) of the following, occurring within a 12-month period:

- Recurrent substance use resulting in failure to fulfil major role obligations at work, school or home.
- Recurrent substance use in situations in which it is physically hazardous (such as driving while intoxicated).
- Recurrent substance-related legal problems.
- Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance.

The symptoms have not met the criteria for substance dependence.

DSM-IV diagnostic criteria for substance dependence

A maladaptive pattern of substance use, leading to clinically significant impairment or distress, as manifested by three or more of the following, occurring at any time in the same 12-month period:

- Tolerance, as defined by either:
 - a need for markedly increased amounts of the substance to achieve intoxication or the desired effect
 - markedly diminished effect with continued use of the same amount of the substance.
- Withdrawal, as manifested by either:
 - a characteristic withdrawal syndrome
 - the same or a closely related substance is used to relieve or avoid withdrawal symptoms.
- The substance is taken in larger amounts or for a longer period than intended.
- There is a persistent desire or unsuccessful efforts to cut down or control substance use.
- A great deal of time is spent in activities necessary to obtain the substance, use the substance, or recover from its effects.
- Important social, occupational or recreational activities are reduced or given up because of substance use.
- Substance use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.

Source: American Psychiatric Association 2000, *Diagnostic and Statistical Manual of Mental Disorders*, 4th edn, text revision (DSM-IV-TR), American Psychiatric Association, Washington, DC.