

JBRF Expert Diagnostic Workshop

Definitions of Proposed Phenotypes

Narrow Phenotype (elated mood)

This phenotype is characterized by abnormal mood states that are elated.

Criteria A requires a distinct episode of hypomania or mania of at least four days duration during which time the child had elevated, elated mood. In addition, at least three other DSM-IV B Criteria must be met for diagnosis.

Criteria B includes all 7 DSM-IV B criteria; inflated self-esteem or grandiosity, decreased need for sleep, more talkative than usual or pressure to keep talking, flight of ideas or subjective experience that thoughts are racing, increase in goal-directed activity, or psychomotor agitation, and excessive involvement in pleasurable activities that have a high potential for painful consequences. If the child also meets criteria for ADHD, the “B” criteria of distractibility, psychomotor agitation etc. only count toward the diagnosis of mania if they are increased beyond the child’s usual ADHD

Broad Phenotype (angry, irritable mood, chronic hyperarousal, explosiveness)

This phenotype is designed to capture children who have chronic irritability and hyperarousal. It is also called severe mood and behavioral dysregulation, and it differs from the narrow phenotype in that the child has no euphoria or grandiosity and no discernable episodes

The criteria are chronic irritability i.e. the child exhibits marked reactivity to negative emotional stimuli on average, at least 3 times a week. For example the child’s response to frustration is associated with extended temper tantrums, verbal rages, and/or displays aggression toward people or property. 2) The child has a baseline abnormal mood (i.e. even between outbursts they’re angry or sad; and 3) there is chronic hyperarousal. To meet this criterion they must have; distractibility, racing thoughts or flight of ideas, and pressured speech intrusiveness, agitation, and insomnia nearly every day. In addition to the absence of elated mood or grandiosity, the presence of irritable mood distinguishes the broad phenotype from the narrow phenotype

Core Phenotype (Episodic and abrupt transitions in mood state, and poor modulation of at least one drive state)

Episodic and abrupt transitions in mood state, and poor modulation of at least one drive (aggressive, sexual, appetitive, acquisitive) resulting in behaviors that are excessive or inappropriate for age and/or context (e.g. low threshold for anger, and the expression of aggressive behaviors in situations that elicit frustration) are both hallmark features of this phenotype, and must be present on most days for at least 12 months to make the diagnosis. These criteria distinguish the core phenotype from both DSM-IV and DSM-IV-modified criteria for Broad and Narrow phenotypes by eliminating episode duration criteria, and by specifying daily, abrupt mood fluctuations, as well as poor modulation of drive states as cardinal features.

Descriptive definitions of mania/hypomania, depression, and mixed states remain essentially unchanged from DSM-IV.

Compared to his/her peers the child has; difficulties in the postponement of immediate gratification (is impulsive, acts before thinking, is relentless in pursuit of needs); poor self-esteem regulation (prone to self-aggrandizement, exaggeration of abilities, and feelings of omnipotence, or, alternatively, is pessimistic, self-critical, and overly sensitive to criticism or rejection); a tendency to react with excessive anxiety and fearfulness to novel or stressful situations; to over-react to environmental stimuli and become over-aroused, easily-excited, irritated, angry, anxious or fearful. Can display, protracted periods of resentment, sudden anger and/or rage for greater than 15 minutes that is unresponsive to reason, discussion, or soothing, and can become progressively unrestrained or silly, goofy, giddy, or elated.

To diagnose the core phenotype the child must meet all A-E criteria and 3 of 5 of F-K criteria. Criteria K requires a score of 20/33 or more core syndromal symptoms, and at least 40/65 general items on the Child Bipolar Questionnaire.