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Understanding Multiaxial Diagnosis in Mental Health: A Comprehensive Approach

Ren Daiki*

Department of Medical Sciences, Doshisha University, Japan

INTRODUCTION

Multiaxial diagnosis is a comprehensive system used in mental health assessment to provide a holistic understanding of an individual's psychological well-being. Developed by the American Psychiatric Association (APA), this approach aims to capture the complexity of mental health conditions by considering multiple factors that contribute to an individual's overall functioning. The multiaxial system involves the assessment of five distinct axes, each providing valuable information to guide treatment planning and intervention. The first axis of multiaxial diagnosis focuses on clinical disorders, encompassing a wide range of mental health conditions such as mood disorders, anxiety disorders, psychotic disorders, and substance-related disorders. This axis helps clinicians identify the primary psychiatric condition that an individual may be experiencing, forming the foundation for subsequent axes. Axis II is dedicated to personality disorders and intellectual disabilities. Personality disorders, such as borderline personality disorder or narcissistic personality disorder, are enduring patterns of inner experience and behavior that deviate markedly from societal expectations. Intellectual disabilities are assessed here to recognize limitations in cognitive functioning. This axis aids in understanding long-term patterns of behavior that may impact an individual's overall functioning and treatment response. The third axis considers medical conditions that may influence or exacerbate mental health symptoms. It includes both acute and chronic physical illnesses, as well as any medications or medical treatments the individual is undergoing.

DESCRIPTION

Understanding the interplay between physical health and mental well-being is crucial for comprehensive treatment planning. Psychosocial and environmental factors, including life stressors, support systems, and cultural influences, are assessed on Axis IV. This axis recognizes that external factors play a significant role in an individual's mental health. Stressful life events, such as loss of a loved one, financial difficulties, or major life changes, can contribute to the onset or exacerbation of mental health symptoms. Identifying these factors helps clinicians develop interventions that address the root causes of distress. The fifth and final axis, the Global Assessment of Functioning (GAF), provides an overall rating of an individual's psychological, social, and occupational functioning. GAF scores range from 1 to 100, with lower scores indicating more severe impairment. This axis helps clinicians track changes in functioning over time and assess the impact of treatment interventions. Multiaxial diagnosis allows clinicians to consider the interplay of biological, psychological, and social factors in a person's mental health, providing a more holistic understanding of the individual. By addressing specific axes, clinicians can tailor treatment plans to target the root causes of an individual's distress, whether they are psychiatric, personality-related, medical, or environmental. The multiaxial system supports ongoing assessment, allowing clinicians to track changes in an individual's functioning and adjust treatment strategies accordingly [1-4].

CONCLUSION

The standardized axes facilitate communication and collaboration among mental health professionals, ensuring a comprehensive approach to care across different settings and disciplines. Despite its advantages, multiaxial diagnosis has faced criticisms. Some argue that it may oversimplify complex cases, and the reliability and validity of the system have been questioned. Additionally, the introduction of the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders

(DSM-5) in 2013 moved away from the multiaxial system, integrating some axes into a single assessment. This shift has sparked ongoing discussions about the most effective and accurate ways to diagnose and treat mental health conditions.

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CONFLICT OF INTEREST

None.

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