

# **Disruptive Mood Dysregulation Disorder (DMDD)**



PLAY PICMONIC

### **Unknown Etiology**

**Question Mark** 

DMDD usually presents in children less than 10 years of age and is typically more common in males. The current etiology is unknown. However, there are studies examining the neurological, physiological (e.g., malnutrition), and psychological (e.g., abuse) etiologies.

### **Diagnosis**

## Age 6-18 Years

(6) Sax and (18) ID and Year-calendar

DMDD can only be diagnosed if the patient is between the ages of 6-18. DMDD specifically pertains to pediatric patients with mood dysregulation. DMDD is often misclassified as bipolar disorder, so careful attention must be paid.

# **Anger and Irritability**

Angry and Irritated

DMDD involves continuous anger, irritability, or both between potential eruptions. These eruptions are often observed by parents, peers, or teachers and can often involve difficulty functioning in various social situations (e.g., school or home).

#### > 1 Year

Greater-than (1) Wand Calendar-year

Anger and irritability must be consistently present at least three times per week, over three months, and for one year.

#### **Treatment**

# **Cognitive Behavioral Therapy**

Cog Behavioral Therapist

Either individual or family cognitive behavioral therapy (CBT) is a treatment consideration in those with DMDD.

# Medications

Med-Bottle

Pharmacotherapy can be used in those with DMDD and can aid with mood, anger, and irritability. The use of atypical antipsychotics, antidepressants, or stimulants can be considered.

#### Associations

#### **Increased Risk of Major Depression**

Risk-arrow with Major-league Depressed-emo

Those with DMDD are at an increased risk of developing anxiety disorders, major depressive disorder, or both later in life. Depression and oppositional defiant disorder are often common comorbidities seen with DMDD.