Disruptive Dysregulation Disorder for Primary Care Physicians

This diagnosis was first implemented in 2013 after many children were being misdiagnosed with Bipolar Disorder when children and adolescents were experiencing significant irritability and difficulties with sleep.

Diagnosis

- A clinical diagnosis where there are severe temper outbursts (either physical or verbal aggression) that occur at least 3 times a week.
- Often have chronic angry moods for long periods of time that leads to the outburst.
- Children younger than 6 years of age or older than 18 years of age do not qualify for the diagnosis

Differential Diagnosis

- Bipolar Disorder
    - Extremely rare to be diagnosed before the age of 15.
    - Look for specific manic symptoms over a period of days
        - Insomnia with increased energy which leads to goal directed activities
        - Euphoric or severe irritability that leads to reckless and impulsive behavior
        - Hyper religious behavior that may include special messages from a higher power
        - Marked increase in talkativeness with grandiose statements
        - Must not be diagnosed if substance use precipitated this episode lasted over a period of days
- Substance Use Disorder
    - Specific substances that can cause increase in behavioral dysregulation include methamphetamine, synthetic marijuana, prescription pain pills, and cough syrup products.
- Trauma Disorders
- Major Depressive Disorder
- Anxiety Disorder
- Oppositional Defiant Disorder
- Conduct Disorder

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Treatment

There are no FDA approved medications to treat Disruptive Mood Dysregulation Disorder. However you can see potential medication options on the next page.

Treatment can be broken down to child and parent oriented modalities.

Child

- Individual Psychotherapy which focuses on finding rewarding ways for the child to manage anger and aggression

- School Age Children
  - Behavioral Management Training
  - School based Interventions (I.e. 504 plan or social skills groups)
  - Individual therapy that focuses on problem solving

- Adolescents
  - Behavioral Management Training
  - Individual Training

Parent

- Always use positive praise and keep praising early and often.
- When using timeout.
  - Be consistent with the use.
  - No interaction when child is in timeout.
- Always try to maintain a calm presence to avoid reinforcing attention seeking behavior.
- Focus on changing on behavior at a time.
- Schedule child directed play every day
  - Encourage parents to spend 15-30 mins at least 3 times a week on an activity of the Childs choosing.
  - This would include playing with their favorite toy.
  - Make sure to have Child Directed Play even when chid is having a poor behavior day.
- Extinction Burst
  - An increase in frequency or intensity of an unwanted behavior when attempting to extinguish this behavior.
  - Must be consistent and not succumb to the attempt by the child to resist the change in behavior.

EXAMPLE - A parent would pick up a toy that the child drops on the ground. The chid begins to throw the toy on the ground on purpose. Because of this, the parent is advised to not pick up the toy. The child will start to throw tantrums because the parent is no longer picking up the toy.

Medications

The use of medication needs to be concurrent with psychotherapy.

Consider first line medication to be SSRI

- Identify treatment goals and monitor frequency/severity of behaviors.
- Be aware of black box warnings of using SSRI

If symptoms continue to persist, atypical antipsychotics such as aripriprazole (Abilify) and Risperdal have the most evidence to reduce severe symptom severity.

- Important to note that there are no FDA approved medications.
- risperidone (Risperdal) and aripriprazole (Abilify) requires frequent therapeutic lab monitoring if used.
- Therapeutic lab monitoring includes Complete Blood Count, Comprehensive Metaboilic Panel, and Hemoglobin A1C.

Useful Links

https://www.nimh.nih.gov/health/topics/disruptive-mood-dysregulation-disorder-dmdd/disruptive-mood-dysregulation-disorder.shtml

https://www.clarkcountynv.gov/residents/family_services/services/parenting_project.php

https://nvpep.org/resources-faq/

https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Disruptive-Mood-Dysregulation-Disorder-_DMDD_-110.aspx