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Letter to the Editor

Brief Comments on Classification of Externalizing Disorders

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The authors have presented a thought provoking article on this difficult subject. As far as attention deficit hyperactivity disorder is concerned, I fully agree with the suggestion that the hyperkinetic disorder (HD) category of ICD 10 requires to be reviewed. Its criteria should be more distinct. Attention deficit hyperactivity disorder (ADHD) often brings to mind the qualities of a developmental disorder and the comorbidities associated with ADHD are mostly from the hyperkinetic group. Emphasis on the inattentive subtype is worthy of consideration since these children are often left unattended because they do not evidence externalizing behaviors.

Conduct disorder is more enduring of the disruptive disorders by virtue of its relatively severe genetic, neurobiologic and the family pathology. In ICD 10, the diagnosis of conduct disorder subtypes include conduct disorder in the family context and oppositional defiant disorder. These are areas of interest which can be considered when further modifications of the classification systems are due. Oppositional defiant disorder may develop in relation to acute environmental problems; the behavior may be due to another psychiatric illness; or it can be a forerunner to the development of a full fledged conduct disorder. Giving a distinct status to the oppositional defiant disorder will help the clinician clarify these areas of concern.

REFERENCES

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