

THE WETC PSYCHOLOGY NEWSLETTER

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Psychological Factors Affecting Medical Condition

Whether a medical-legal doctor is working on a personal injury case or a workers' compensation case, the first question that a physician examining a patient asks is, "Is the patient's presentation credible?" If the answer to the first question is "Yes," the next question is, "Do they have a psychological disorder?" In fact, in the workers' compensation area in California, Labor Code Section 3208.3 specifies that in order for the conclusion to be drawn that the person has had a psychiatric injury their disorder must be found in the DSM-IV-TR, the current diagnostic manual of the American Psychiatric Association that has been in use since May, 2000.

Having worked with personal injury claimants and workers' compensation applicants, on both sides of the fence as well as in the middle, for some 25 years, I have encountered a wide variety of psychiatric diagnoses in reviewing other physician's reports. One of the most frequently seen diagnoses is Psychological Factors Affecting Medical Condition (316.00). This condition is "coded" or presented on Axis I, the first of the five DSM-IV-TR axes. However, the DSM-IV-TR is clear in indicating that Psychological Factors Affecting Medical Condition is not a psychological disorder but a condition that may become a focus of clinical attention like some other conditions found in the DSM-IV-TR such as a Partner Relational Problem, an Occupational Problem, a Phase of Life Problem or even Malingering.

As discussed on page 731 of the DSM-IV-TR, the essential feature of Psychological Factors Affecting Medical Condition is the presence of one or more specific psychological or behavioral factors that adversely affect a medical condition found in the patient. These factors can influence the course of the medical condition, interfere with treatment, constitute an additional health risk, or exacerbate a physical symptom. The DSM-IV-TR goes on to state that psychological factors or variables may affect the course of almost every major category of disease. Essentially, the DSM-IV-TR is stating that, for

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example, if a person is depressed that depression could adversely affect their physical condition in a variety of ways in a wide variety of physical disorders.

However, keep in mind that Psychological Factors Affecting Medical Condition is **not** a mental or psychological disorder and its specification as a "condition" will never make it a psychological disorder. Similarly while its presentation on Axis I implies that it is a disorder, in no manner shape or form can this placement be taken to indicate that it is a disorder. Thus, if the criterion that is being applied is, "Does the patient have a psychological disorder?" the answer is definitively "No" if the doctor has diagnosed Psychological Factors Affecting Medical Condition.

The above discussion notwithstanding, as we have seen, Psychological Factors Affecting Medical Condition is specified correctly when one or more psychological or behavioral factors have affected a general medical condition found in the patient. In order to specify this condition correctly, and please note that I did not say "diagnose," there must be information in the form of medical records and psychological data showing that the individual's signs and/or symptoms are indicative of a specific medical condition and are not completely understandable in terms of the underlying physical pathology and/or an attempt simulate symptoms or complain about things that do not exist. There also must be some history presented by the patient indicating that some psychological variables or factors affect their medical condition. That is, the doctor must present data showing that the psychological factors are adversely affecting the medical condition.

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For example, if an internist indicates that they are unable to account for the severity of the patient's coronary artery symptoms or their asthma from just the underlying physical variables and they have reason to suspect that the patient's environment and/or way of viewing themselves and the situation is worsening their situation, that situation would qualify for considering the specification of Psychological Factors Affecting Medical Condition. Then, if the psychologist or psychiatrist examining the patient can obtain history indicating, for example, that whenever the patient has a fight with his wife he gets chest pains or an increase in his asthmatic breathing problems it is reasonable to specify Psychological Factors Affecting Medical Condition. However, it is not reasonable to specify Psychological Factors Affecting Medical Condition just because the patient tells the psychologist or psychiatrist that they think their symptoms are worse because of their wife. There must be definitive and trustworthy data supporting the connection between the psychological factor and the increase in symptoms in each and every case.

Finally, "What kinds of psychological factors or variables can affect a physical condition?" Well, almost anything adverse, such as a mental disorder in the form of a Depressive Disorder or an Anxiety Disorder, a Personality Disorder, Personality Traits, inadequate styles of behavior used by the individual to cope with everyday problems, maladaptive lifestyles such as a sedentary lifestyle, overeating, and excessive alcohol and drug use. Virtually anything aversive in the patient's life. However, the bottom line here is that even when these variables affect their physical condition, they still do not have a DSM-IV-TR psychological disorder.

This is the eleventh of a series of monthly newsletters aimed at providing information about psychological evaluations and treatment that may be of interest to attorneys and insurance adjusters working in the areas of workers' compensation and personal injury. If you have not received some or all of our past newsletters, and would like copies, send us an email requesting the newsletter(s) that you would like forwarded to you.

2009 Newsletters

February, 2009 – Litigation problems with the GAF

March, 2009 – Common flaws in psych reports

April, 2009 – The Minnesota Multiphasic Personality Inventory (MMPI)

May, 2009 – Apportioning psychiatric disability in workers' compensation cases and assessing aggravation in personal injury cases

June, 2009 - Subjectively interpreted projective psychological tests

July, 2009 – Sleep disorders and psychiatric injuries

August, 2009 – Posttraumatic Stress Disorder

September, 2009 – Computer Use Disorder

October, 2009 – Major Depressive Disorder

November, 2009 – The Millon Tests