

Psychiatric Disorders Across the Life Span: A Unitary Psychopathology Factor Best Fits the Data

A 45-year longitudinal study shows that mental illness is astonishingly common and that it's better to be a "lumper" than a "splitter" when thinking diagnostically.

Cross-sectional epidemiological surveys have documented high rates of lifetime psychiatric disorders (about 40%–50%) and substantial comorbidity, causing critics to question the nosologic validity of individual DSM diagnoses. These researchers analyzed data from a New Zealand birth cohort (N=1013); DSM disorders were assessed nine times between ages 11 and 45; cognitive function or brain health was assessed five times.

Diagnoses spanned externalizing (conduct, substance use, attention-deficit/hyperactivity), internalizing (mood, anxiety, eating), and cognitive (obsessive-compulsive, schizophrenia, bipolar) types of disorders. Overall, 86% of participants met criteria for a disorder at some point; of this group, 85% had multiple disorders, and >70% had a disorder of a second type. Early onset (by age 18), found in 59%, was linked to comorbidity and having more than one type of disorder. "Pure" disorders (i.e., never any comorbidity) were extremely rare, often occurring at only a single time point. The data on symptoms were best fit by a general psychopathology factor; highest scores were related to early onset, more time ill, greater diversity of diagnoses (i.e., >1 type), diminishing cognitive scores, and older brain "age" determined on MRI at age 45.

COMMENT

This study's rates of psychiatric disorders and comorbidity are astonishingly higher than in cross-sectional studies, suggesting that enduring mental health is rare and that individual DSM diagnoses have questionable validity. The findings are also highly consistent with studies revealing common genetic factors across diverse disorders (*NEJM JW Psychiatry* Feb 2020 and *Cell* 2019; 179:1469) and with the usefulness of individual medications for multiple disorders. Early onset is more common than generally thought and probably more important than individual diagnoses since it predicts worse psychopathology and steeper declines in cognition. A "life-course" perspective on mental disorders may hold the keys to both improved understanding of their nature and the development of better transdiagnostic treatments. — *Peter Roy-Byrne, MD*

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Caspi A et al. Longitudinal assessment of mental health disorders and comorbidities across 4 decades among participants in the Dunedin birth cohort study. JAMA Netw Open 2020 Apr 21; 3:e203221. (<https://doi.org/10.1001/jamanetworkopen.2020.3221>)