

This Week's Citation Classic®

Spitzer R L, Endicott J & Robins E. *Research diagnostic criteria (RDC)*. New York: Biometrics Research, New York State Psychiatric Institute, 1975. 34 p. [Biometrics Research, New York State Psychiatric Institute, New York, NY]

A crucial problem in psychiatry, affecting clinical work as well as research, is the generally low reliability of current psychiatric diagnostic procedures. This article describes the development and initial reliability studies of a set of specific diagnostic criteria for a selected group of functional psychiatric disorders, the research diagnostic criteria (RDC). The RDC are being widely used to study a variety of research issues, particularly those related to genetics, psychobiology of selected mental disorders, and treatment outcome. [The SSC[®] and SC[®] indicate that this book has been cited in over 570 publications.]

The Development of Diagnostic Criteria in Psychiatry

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In the 1960s many studies, often performed by psychologists, indicated the sorry state of psychiatric diagnosis—clinicians and researchers consistently were unable to agree on the psychiatric diagnoses that they assigned to patients. In the 1970s a small group of psychiatrists associated with the Department of Psychiatry at Washington University in St. Louis developed what became known as the "Feighner criteria" (because J.P. Feighner was the senior author): specific diagnostic criteria for 15 mental disorders that they believed had been validated by research.¹ These criteria filled a void, since the American Psychiatric Association's official *Diagnostic and Statistical Manual of Mental Disorders* (at that time, the second edition, *DSM-II*) only contained general and often vague descriptions of the clinical features of the various mental disorders. In contrast, the Feighner criteria explicitly indicated which symptoms needed to be present to make the diagnosis, and, in many cases, which symptoms, if present, precluded making the diagnosis.

The Feighner criteria were widely adopted by research investigators, but while participating in a collaborative project on the psychobiology of depressive disorders, I worked with Jean Endicott, a psychologist, and Eli Robins, one of the original authors of the Feighner criteria, on an elaboration and modification of the Feighner criteria. We changed the criteria for several of the disorders, added categories that were not included in the original criteria, and showed that the reliability of these new criteria, called the research diagnostic criteria (often called the RDC), was considerably better than had been obtained for psychiatric diagnoses in previous studies.

As we noted in the conclusion section of our paper, "The use of operational criteria for psychiatric diagnosis is an idea whose time has come!" The true historical significance of our article was that it heralded the way for the inclusion of specified diagnostic criteria for virtually all of the over 200 specific mental disorders included in the third revision of the *DSM (DSM-III)*, published in 1980.² I had the honor and exciting task of coordinating the development of *DSM-III* and will forever be grateful that I had the opportunity to play such a significant role in the history of American psychiatry. *DSM-III* not only changed American psychiatry, but with the inclusion of diagnostic criteria in the mental disorders chapter of the next revision of the World Health Organization's International Classification of Diseases, psychiatry throughout the world has been changed. The inclusion of diagnostic criteria in *DSM-III*, its major innovation, was only possible because this article tested the water, and clinicians and researchers saw the advantages of replacing vague descriptions of psychiatric disorders with precise definitions using specified criteria.

Many psychiatric researchers continue to use the RDC although most switched eventually to the criteria included in *DSM-III*, and, more recently, the revision of *DSM-III*, *DSM-III-R*, published in 1987.³ Work has now started on the next revision in psychiatry's official classification, and *DSM-IV* is expected to be published in 1993. Fortunately, with each revision in our official classification, there is an increasing database and clinical experience upon which to draw as the basis for the changes.

1. Feighner J P, Robins E, Guze S B, Woodruff R A, Winokur G & Munoz R. Diagnostic criteria for use in psychiatric research. *Arch. Gen. Psychiat.* 26:57-63, 1972. (Cited 3,925 times.)
2. American Psychiatric Association. *Diagnostic and statistical manual of mental disorders, third edition*. Washington, DC: American Psychiatric Association, 1980. 494 p. (Cited 8,220 times.)
3. ————. *Diagnostic and statistical manual of mental disorders; DSM-III-R*. Washington, DC: American Psychiatric Association, 1987. 567 p.

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