

ICD-11 klassificering av Personlighetssyndrom

Så förändras utredningsprocessen

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Varför talar vi om ICD-11?

Tidplan för övergång från ICD-10-SE till ICD-11

- Den första svenska officiella versionen är tillgänglig i början på 2026 som en del i WHO:s årliga release.
- ICD-11 används i Socialstyrelsens register för dödsorsaker från och med 1 januari 2027.

Målsättningen är att ICD-11 används i Socialstyrelsens hälsodataregister från och med **1 januari 2028.**

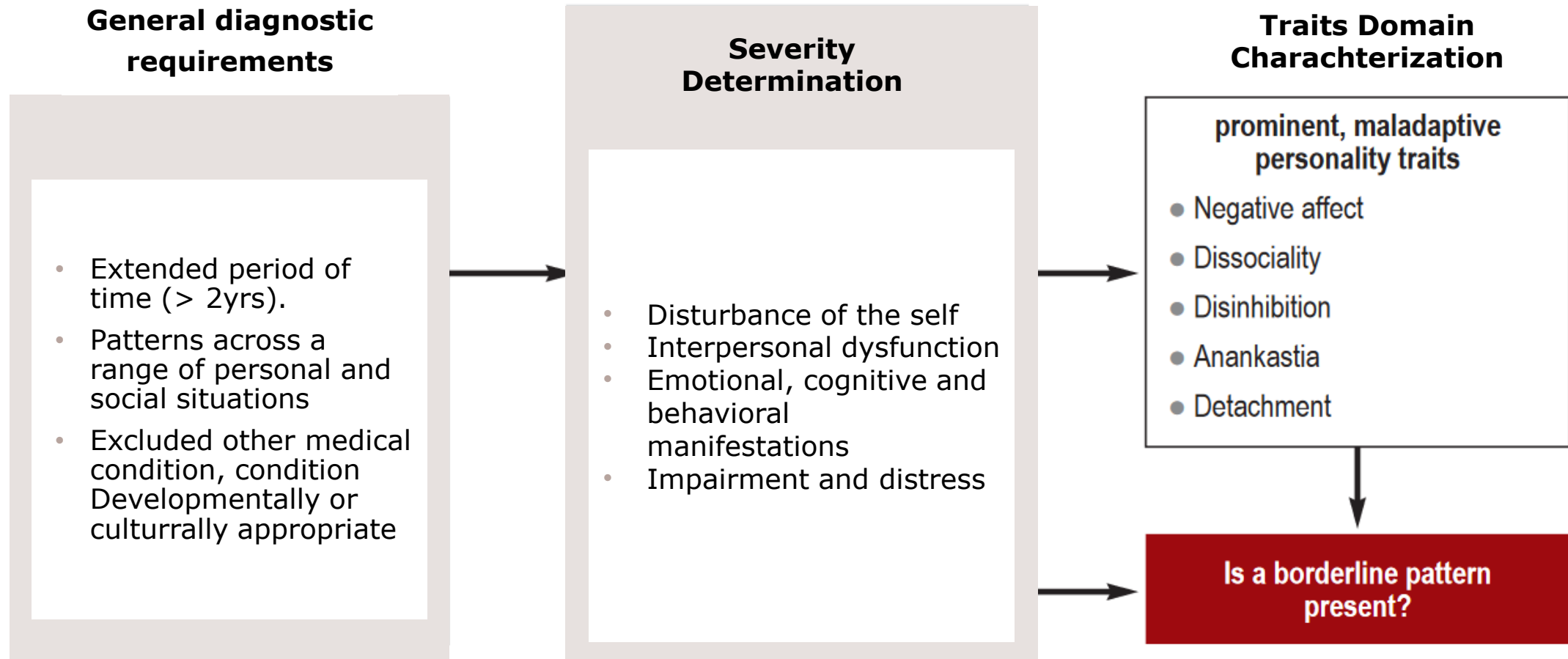
The changes in the new classification of Personality Disorders are likely the most significant shift in psychiatric diagnostics in the past forty years:

“The advent of the ICD-11 PD classification involves major changes for health care workers, researchers, administrators, and service providers as well as patients and families involved.”

ICD11PD – Översikt

<i>Diagnostic hierarchy</i>	<i>Code</i>	<i>Label</i>
Unspecified primary diagnosis	6D10.Z	Personality Disorder, Severity Unspecified
Severity classification codes	None	No Personality Disturbances
	QE50.7	Personality Difficulty
	6D10.0	Mild Personality Disorder
	6D10.1	Moderate Personality Disorder
	6D10.2	Severe Personality Disorder
Trait domain specifier codes	6D11.0	Negative Affectivity
	6D11.1	Detachment
	6D11.2	Disinhibition
	6D11.3	<u>Dissociality</u>
	6D11.4	<u>Anankastia</u>
Additional specifier code if applicable	6D11.5	Borderline Pattern

Personlighetsyndromdiagnostik enligt ICD-11



DSM och ICD-11: likheter och skillnader

Generella diagnoskriterier enligt DSM-5:

A. Ett varaktigt mönster av upplevelser och beteenden som påtagligt **avviker** från vad som allmänt sett förväntas i personens sociokulturella miljö. Mönstret kommer till uttryck inom minst två av följande områden:

- **Kognitioner (d v s sättet att uppfatta och tolka sig själv, andra personer och inträffade händelser)**
- **Affektivitet (d v s komplexiteten, intensiteten, labiliteten och rimligheten i det känslomässiga gensvaret)**
- **Mellanmänsklig funktionsförmåga**
- **Impulskontroll**

B. Det varaktiga mönstret är oflexibelt och framträdande i **många olika situationer och sammanhang**.

C. Det varaktiga mönstret orsakar kliniskt signifikant **lidande eller försämrad funktion** socialt, i arbete eller inom andra viktiga funktionsområden.

D. Mönstret är **stabil och långvarigt** och kan spåras tillbaka åtminstone till **adolescensen eller tidig vuxenålder**.

E. Det varaktiga mönstret förklaras inte bättre som ett uttryck för eller en följd av **någon annan form av psykisk ohälsa**.

F. Det varaktiga mönstret kan inte tillskrivas fysiologiska effekter av någon **substans** (t ex drog, läkemedel) eller något annat medicinskt (t ex skalltrauma).

Grunddefinition enligt ICD-11:

- An enduring disturbance characterized by problems in **functioning** of aspects of the self (e.g., identity, self-worth, accuracy of self-view, self-direction), and/or interpersonal dysfunction (e.g., ability to develop and maintain close and mutually satisfying relationships, ability to understand others' perspectives and to manage conflict in relationships).
- The disturbance has persisted over **an extended period of time** (e.g., lasting 2 years or more).
- The disturbance is manifest in **patterns of cognition, emotional experience, emotional expression, and behaviour** that are maladaptive (e.g., inflexible or poorly regulated).
- The disturbance is manifest across a **range of personal and social situations** (i.e., is not limited to specific relationships or social roles), though it may be consistently evoked by particular types of circumstances and not others.
- The symptoms are not due to the direct effects of a **medication or substance**, including withdrawal effects, and are not better accounted for by another mental disorder, a Disease of the Nervous System, or another medical condition.
- The disturbance is associated with **substantial distress or significant impairment** in personal, family, social, educational, occupational or other important areas of functioning.
- Personality Disorder should not be diagnosed if the patterns of behaviour characterizing the personality disturbance are **developmentally appropriate** (e.g., problems related to establishing an independent self-identity during adolescence) or can be explained primarily **by social or cultural factors**, including socio-political conflict.

Table 1 ICD-11 personality functioning according to the PDS-ICD-11 operationalization

	Capacities and manifestations	Healthy functioning
Identitet	<i>1. Identity</i>	Stability and coherence of one's sense of identity (e.g., extent to which identity or sense of self is variable and inconsistent or overly rigid and fixed)
	<i>2. Self-worth</i>	Ability to maintain an overall positive and stable sense of self-worth
	<i>3. Self-perception</i>	Having a good sense of own strengths and weaknesses
	<i>4. Goals</i>	Capacity for self-direction (e.g., ability to plan, choose, and implement appropriate goals)
Interpersonell funktion	<i>5. Interest in relationships</i>	An appropriate balance of seeking to be alone versus with others
	<i>6. Perspective taking</i>	Ability to understand and appreciate others' perspectives without thinking too much into how they think and feel
	<i>7. Mutuality in relationships</i>	Ability to develop and maintain close and mutually satisfying relationships
	<i>8. Disagreement management</i>	Ability to manage disagreements in relationships in a cooperative manner
Personlighetsrelaterade symptom	<i>9. Emotional control and expression</i>	Ability to control and express own emotions in an appropriate way
	<i>10. Behavioral control</i>	Ability to be spontaneous while keeping appropriate control of own actions
	<i>11. Experience of reality during stress</i>	Accurate situational and interpersonal appraisals under stress
	<i>12. Harm to self</i>	Appropriate behavioral responses to intense emotions and stressful circumstances
	<i>13. Harm to others</i>	
Funktionsnedsättning	<i>14. Psychosocial impairment</i>	Functioning in personal, family, social, educational, occupational or other important areas of life

PDS-ICD-11, Personality Disorder Severity ICD-11

Källa: Mulder, R. (2025). *Brit Med J*, doi:10.1192/bjp.2024.169

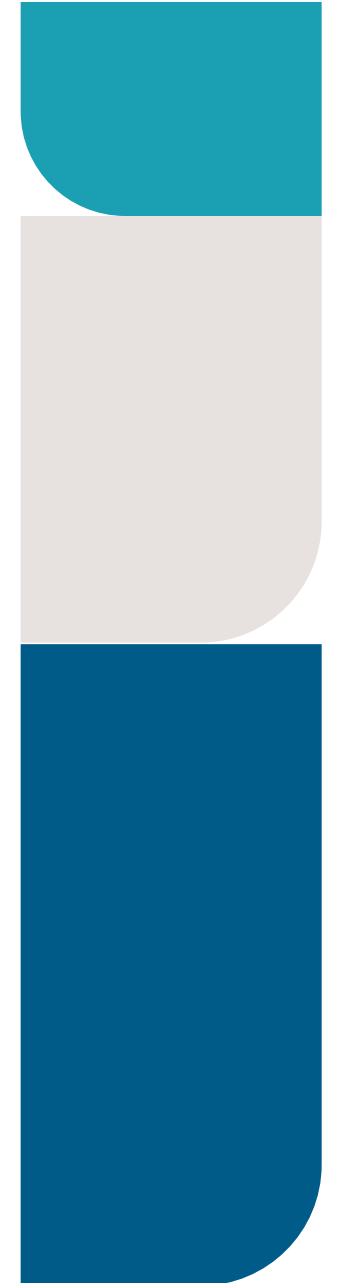
Severe Personality Disorder

Domain	Main points
Disturbance of the self	<p>Extremely unstable and/or contradictory self-view.</p> <p>Severe impairment in regulation of self-esteem.</p> <p>Inability to set or pursue realistic goals.</p>
Interpersonal dysfunction	<p>Often isolated. Relationships lack mutuality and are shallow or highly conflictual, often involving violence. Family relationships are absent or marked by severe and persistent conflict.</p>
Emotional, cognitive and behavioral manifestations	<p>Extreme difficulty recognizing or tolerating unwanted emotions.</p> <p>Severe impulse and behavior dysregulation.</p> <p>Under stress, extreme distortions in appraisal with frequent dissociative states or psychotic-like experiences.</p>
Impairment and distress	<p>Inability or unwillingness to sustain regular employment due to poor performance, interpersonal difficulties, or inappropriate behavior.</p> <p>Severe and pervasive distress across domains.</p>



Moderate Personality Disorder

Domain	Main points
Disturbance of the self	<p>Sense of self is highly unstable to stress or crisis.</p> <p>Marked instability of self-esteem, either chronically low or unrealistically inflated and resistant to correction.</p>
Interpersonal dysfunction	<p>Major limitations in perspective-taking.</p> <p>Relationships are persistently problematic, with frequent, intense, or volatile conflicts, or markedly unbalanced patterns (dominance or submission).</p>
Emotional, cognitive and behavioral manifestations	<p>Poor emotion regulation with strong reactions to setbacks.</p> <p>Either rapid disengagement from goals or rigid, unrealistic persistence.</p> <p>Under stress, marked distortions in appraisal, with possible dissociative states or psychotic-like experiences.</p>
Impairment and distress	<p>Occupational functioning significantly compromised, with limited engagement in sustained employment.</p> <p>Distress and functional impairment are moderate and pervasive across contexts.</p>



Mild Personality Disorder

Domain	Main points
Disturbance of the self	Vulnerable sense of self and self-esteem with difficulty recovering from minor slights or failures; mismatch between self-view and others' perceptions.
Interpersonal dysfunction	Limited capacity to understand others' perspectives. Relationships marked by minor recurrent conflicts, dependency, or conflict avoidance , affecting emotional closeness.
Emotional, cognitive and behavioral manifestations	Problems with goal-setting and persistence, especially when facing small setbacks . Under stress, mild distortions in situational or interpersonal interpretation, with reality testing intact.
Impairment and distress	Occupational functioning largely preserved , though conflicts at work may occur. Overall impairment and distress are mild.



Personality Difficulty

Domain	Main points
Disturbance of the self	Slight instability in self-view or self-esteem; more sensitive to criticism than typical individuals.
Interpersonal dysfunction	Minor problems in perspective-taking or maintaining relationships; occasional but recurrent conflicts or dependency patterns.
Emotional, cognitive and behavioral manifestations	Some difficulty regulating emotions or pursuing goals under stress; mild distortions in thinking, less adaptive than usual.
Impairment and distress	Daily functioning generally intact, but small struggles may occur in work, school, or social life; distress is mild compared with normal variation.



Personality trait	Definition	Common manifestations (ex.)
Negative affectivity	A tendency to experience a broad range of negative emotions with a frequency and intensity out of proportion to the situation.	Emotional lability (over-reactivity, low tolerance) Poor emotion regulation (relationship-dependent) Negativistic attitudes Distrust
Detachment	A tendency to maintain interpersonal distance (social detachment) and emotional distance (emotional detachment)	Avoidance of social interactions (lack of enjoyment) Avoidance of intimacy (proximity avoidance) Limited emotional expression (emotional numbness) Reservedness Aloofness
Dissociality	Disregard for the rights and feelings of others, encompassing both self-centeredness and lack of empathy	Sense of entitlement (deserving) Recklessness in achieving own goals Manipulation (e.g. cold mentalization) Positive or negative attention-seeking behaviors (manipulation) Indifference to other's reactions and emotional states (cynicism)
Disinhibition	A tendency to act rashly based on immediate external or internal stimuli (i.e., sensations, emotions, thoughts), without consideration of potential negative consequences.	Impulsivity (difficulty in delaying) Distractibility Irresponsibility Recklessness Lack of planning
Anankastia	A narrow focus on one's rigid standard of perfection and of right and wrong, and on controlling one's own and others' behaviour and controlling situations to ensure conformity to these standards.	Perfectionism (concern with social rules, obligations, and norms of right and wrong) Inflexibility Emotional constrain Risk-avoidance Perseveration

Personality trait	Definition
Borderline pattern	<p>The Borderline pattern descriptor may be applied to individuals whose pattern of personality disturbance is characterised by a pervasive pattern of instability of interpersonal relationships, self-image, and affects, and marked impulsivity, as indicated by many of the following:</p> <ul style="list-style-type: none">- Frantic efforts to avoid real or imagined abandonment- A pattern of unstable and intense interpersonal relationships- Identity disturbance, manifested in markedly and persistently unstable self-image or sense of self- A tendency to act rashly in states of high negative affect, leading to potentially self-damaging behaviours- Recurrent episodes of self-harm- Emotional instability due to marked reactivity of mood- Chronic feelings of emptiness- Inappropriate intense anger or difficulty controlling anger- Transient dissociative symptoms or psychotic-like features in situations of high affective arousal.

Personlighetsspektrum

Funktioner

- Att etablera, utveckla och behålla ömsesidiga mellanmännsliga relationer
- Att uppleva sig själv som integrerad, koherent och konsekvent
- Att skaffa sig och fungera i samhällets förväntade roller

Dimensioner

Interpersonell störning

Identitetsstörning

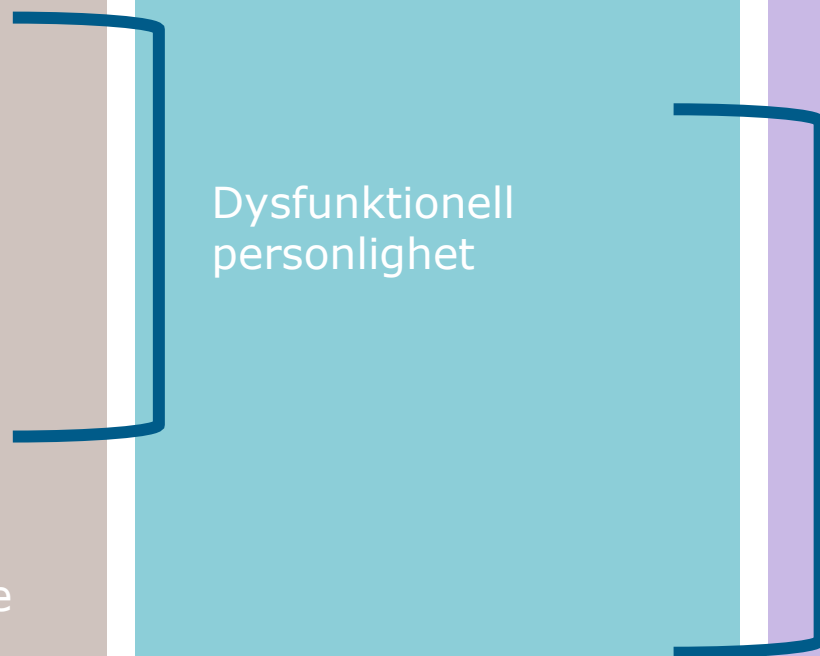
Maladaptivt beteende

Subkliniskt/ Prekliniskt

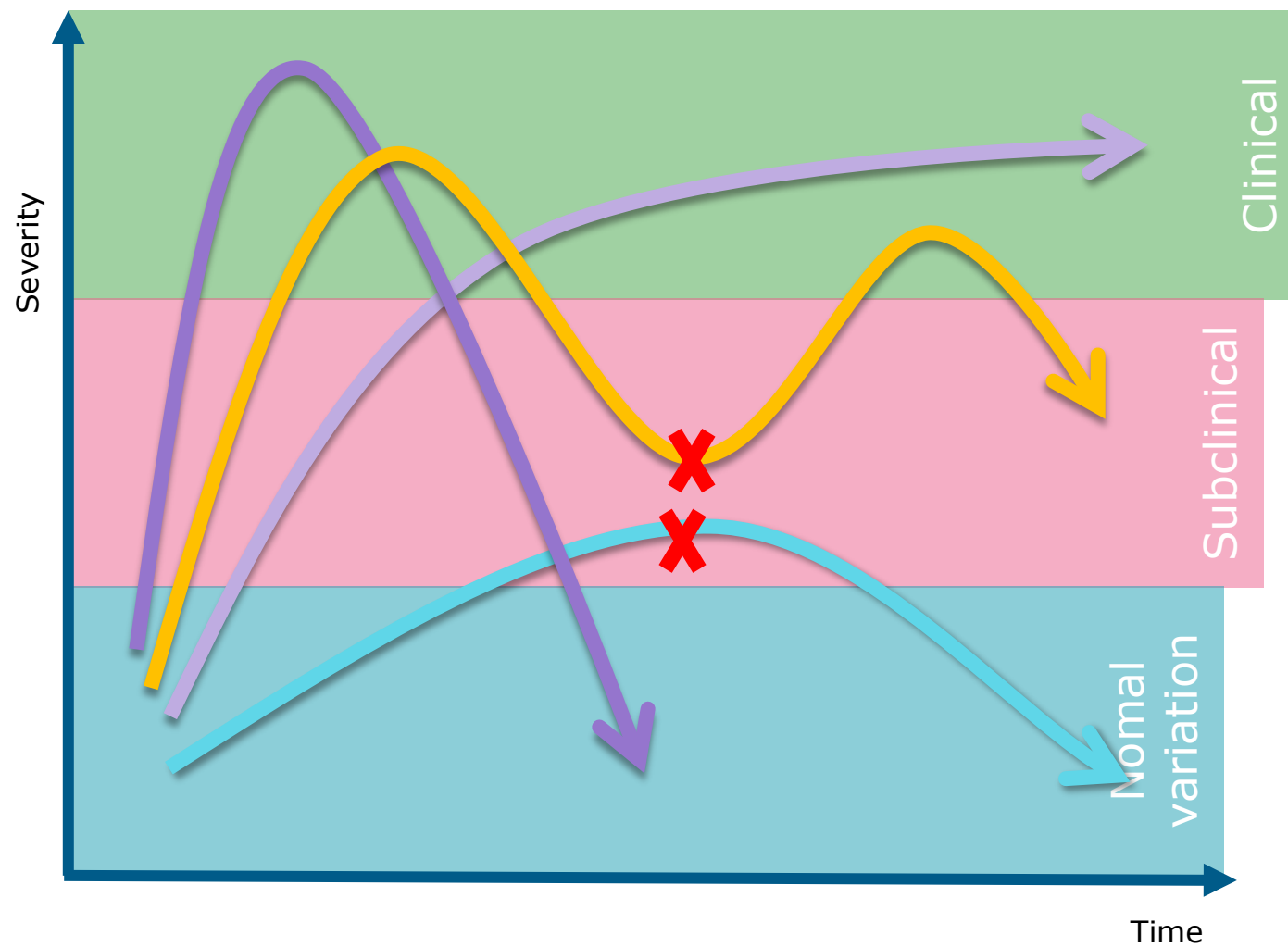
Dysfunktionell personlighet

Psykiatrisk Diagnos

Personlighets-
syndrom



"Är det en störning – eller bara en svårighet?"



Vårdplanering baserad på ICD-11

- Alla med PS kan hamna i allvarlig kris – risken gäller alla nivåer!
- Svårighetsgrad = återhämtningsförmåga, inte risknivå.

Svårighetsgrad	Typ av kris	Fokus i vårdplan
Personlighets-svårighet	Kortvarig, självupplösande kris	Anpassning till utlösande faktorer
Mild PS	Avgränsade episoder, söker hjälp efteråt	Autonomi, coping, självhjälp
Måttlig PS	Upprepade kriser, söker hjälp i akutskede	Krisstöd, förebygg eskalation
Svår PS	Kontinuerlig kris, låg tröskel, ambivalens	Proaktiv hantering, samordnat stöd

Behöver det verkligen vara en personlighetsutredning?

Standardised Assessment of Personality (SAP) -Abbreviated Scale (Moran)

Please ask your patients the following questions. Only tick a response if the patient thinks that the description applies most of the time and in most situations.

- 1. In general, do you have difficulty making and keeping friends?** Yes No
- 2. Would you normally describe yourself as a loner?** Yes No
- 3. In general, do you trust other people?** Yes No
- 4. Do you normally lose your temper easily?** Yes No
- 5. Are you normally an impulsive sort of person?** Yes No
- 6. Are you normally a worrier?** Yes No
- 7. In general, do you depend on others a lot?** Yes No
- 8. In general, are you a perfectionist?** Yes No

Responses in bold should be scored as 1, those not in bold as 0.

A total score of 3/8 or more indicates personality disorder is likely. (A score of 3 or more on this tool correctly identified 90% of psychiatric patients with DSM-IV personality disorder. Sensitivity 0.94 and specificity 0.85).

Instrument för PS diagnostik enligt ICD-11

Typ	Instrument	Format / Poängsättning	Kommentar
Svårighetsgrad (Severity inventories)	PDS-ICD-11 – Självrapport	14 frågor, bedöms av patient/klient	Bedömer svårighetsgrad av personlighetssyndrom
	PDS-ICD-11 – Klinikers version	14 frågor, bedöms av kliniker	Samma som ovan men för professionell bedömning
Draginventarier (Trait inventories)	Personality Inventory for ICD-11 (PiCD)	60 frågor, 5 dragdomäner	Självrapport, mäter personlighetsdrag enligt ICD-11
	Informant Personality Inventory for ICD-11 (IPiC)	60 frågor, 5 dragdomäner	Bedöms av närstående/informant
	Five-Factor Inventory for ICD-11 (FFiCD)	121 frågor, 5 domäner, 20 facetter, 47 nyanser	Omfattande dragbedömning
	Personality Assessment Questionnaire – ICD-11 traits, Revised (PAQ-11R)	17 frågor, 5 dragdomäner	Kort och lättanvänt
	Personality Inventory for DSM-5 & ICD-11 – Kort form, Modifierad	36 frågor, 6 dragdomäner, 18 facetter	Kombinerad DSM-5/ICD-11-version
	Personality Inventory for ICD-11 – Kort form, Modifierad	30 frågor, 5 dragdomäner, 15 facetter	Kort form för endast ICD-11
Fullständiga intervjuer (Full interviews)	DIPP-11 – Diagnostic Interview for Personality Pathology in ICD-11	Kommande diagnostiskt intervju (under utveckling)	Standardiserad intervju för klinisk bedömning

Alla dessa instrument finns tillgänglig på personlighet.dk

Principer för Differentialdiagnostik enligt ICD-11-PS

Personlighetssyndrom är en exklusionsdiagnos:

Personlighetssyndrom utesluter inte andra diagnoser.

Men andra tillstånd kan ibland utesluta ett personlighetssyndrom.

Anpassad från: WHO (2023). *Clinical descriptions and diagnostic requirements for ICD-11 mental, behavioural and neurodevelopmental disorders (CDDR)*

- Psykisk ohälsa förändrar personlighetens uttryck!
- Personlighetsvariationer finns på ett spektrum = påverkas av livsomständigheter och omgivningsstöd!

Och DSM-5-AMPD då?

"We recommend that the APA aligns the DSM-5 with the ICD-11 without losing any important aspects of the AMPD that have been empirically validated over the last decade or of the current categorical model."

Sharp, C. et al., 2025

DSM-6?

- *Hybrid diagnosen tas bort – ersätts av valfria mönsterspecifikationer*
- *Svårighetsgrad (LPF) blir linjär och inkluderar mild nivå*
- *4-gradig skala för personlighetsdrag (Kriterium B)*
- *Ny dragdomän: Tvångsmässighet (Anankastia)*



Save the date!

18
Sep
2026

ICD-11 Personlighetsstörning: Konceptuella frågor för dimensionell diagnos och introduktion till DIPP-11

UTBILDNING

VÅRD



Martin Sellbom är professor i psykologi vid Monash University i Melbourne. Hans forskning fokuserar på personlighetssyndrom, modern psykopatologi och personlighetsbedömning, särskilt med MMPI-instrument. Han har publicerat över 350 vetenskapliga arbeten, inklusive fyra böcker, mottagit flera internationella utmärkelser och är chefredaktör för *Journal of Personality Assessment*. Sellbom är legitimerad klinisk psykolog i Australien och Nya Zeeland och specialiserar sig kliniskt på rättspsykologiska utredningar.

Tack!

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