

IV. ročník Dní prof. V. Novotného v Bojniciach

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Klasifikácia alkoholizmu v histórii a v ICD-11

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Sekcia drogových závislostí Slovenskej psychiatrickej spoločnosti SLS

Klasifikovať (definícia a etymológia)

‘systematicky triediť; hodnotiť, známkovať (od 18. stor.)

- Podľa fr. *classifier*, vytvárať triedy; rozdeľovať (do tried), utvoreného na základe lat. *classificāre*, od lat. *classis*, (vojenská a občianska) trieda’ a *-ficāre*, robiť, urobiť

Ἐν ἀρχῇ ἦν ὁ λόγος
(Na počiatku bolo slovo...)

Víno a intoxikácia v antickom Grécku



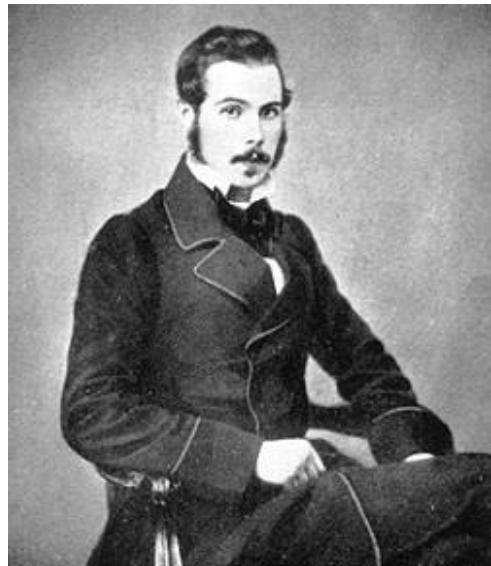
Le vin a une puissance (δύναμις)¹⁴, une ardeur (μένος)¹⁵, qui, lorsqu'on le consomme avec excès (πολλὸς ποθεῖς)¹⁶ ou lorsqu'il est bu sans être mélangé à de l'eau (ἄκρητος)¹⁷, peuvent entraîner des désordres physiologiques. De ces désordres, le premier, bien sûr, est l'ivresse¹⁸; nombreuses sont les expressions désignant cette cause première des troubles du malade chez Hippocrate (ἐκ μέθης, ἐκ πόσιος, ἐκ πότων, ἐκ κραυπάλης, ἐξ οἴνου, ἐκ θωρήξιος ou ἀπὸ οἰνοφλυγίης)¹⁹. Les effets de l'ivresse auxquels s'intéressent les médecins hippocratiques sont surtout les effets

Jacques Jouanna
(1935 -)

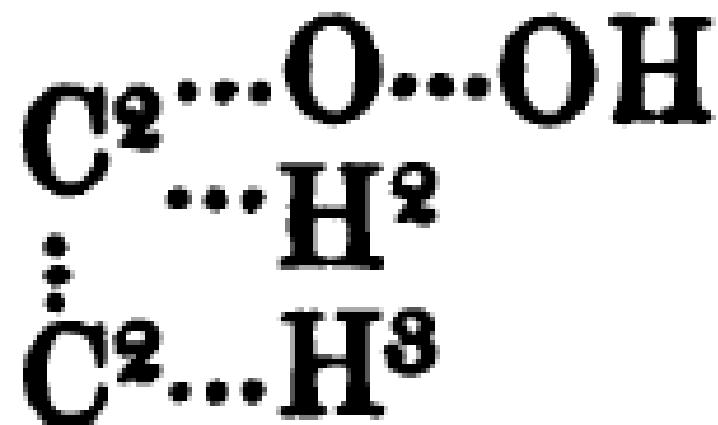
Terminológia

- *lat.* ebrietas, temulentia, crapula (gr. kraipalé)
- *nem.* Trunkenheit
- *fr.* yvrognerie, yvresse
- *angl.* (habitual) drunkenness (zo staroangl. druncennysse), intemperance, inebriety (19. stor.), addiction (20. stor.)

Couper (1858): On a new chemical theory



Archibald Scott Couper
(1831 – 1896)



Aethylic alcohol

Platter (1614): Observationum in hominis affectibus... Libri tres



Felix Platter
(1536 – 1614)

OBSERVATIONES LIBRI I. 37

Temulentia cuiusdam ebrij, qui splendorem Lunæ fluuium esse sibi imaginabatur.

Quo pacto ex nimio potu & ingurgitatione Vini, aliqui stulti & iocosi, alij irati & furibundi, alij tristes & melancholici, alij somnolenti & stupidi fiant, in Praxi nostra sub titulo temulentia ostendimus. Quorum historias infinitas quæ indies se offerunt, partim ridiculas, partim serias & admirandas, recensere possemus, quas tamen studio omittimus. Sufficiat tres exposuisse iocofas. Ebrius quidam noctu dum domu reuerteretur, in platea splendorem Lunæ, in terra intuens, existimat fluum se videre profundum; itaque se exuens, & humi procumbens ad natandum, fedeceptum deinum deprehendit.

Ebrius qui lucem diei, Lunæ splendorem esse putabat.

Alius quidam totam noctem pergracatus, & circa diluculum somno oppresus, domum reuersurus circa meridiem, diem Lunæ splendorem arbitratus, sibi accensâ lucernâ quasi de nocte, præluceri passus est.

Temulentia in qua quidam ebrius, se diu mingere credebat.

Apter bene potus ad fontem aquæ salientis perueniens, illic vrinam reddere coepit, nec inde recessit, donec à quodam prætereunte fuit admonitus. Cui roganti quid ageret, respondit, se

c 3

38 IN MENTIS ALIENATIONE existimasse, quam diq strepitum aquæ fluentis audiret. Hunc à sua vrina emissa prouenire, & proin tam diu substituisse, nam supra horæ spatum veluti mingens, illuc hæserat,

Ebrietas, quando Vinum plus iusto bibendum, quomodo aliquomodo caueri possit.

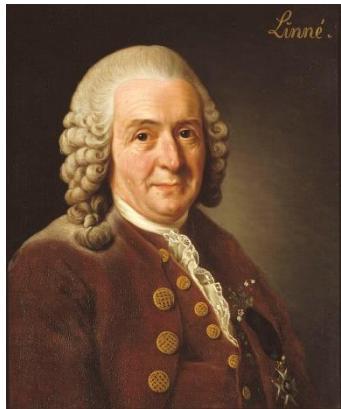
In terrogatus sæpenumero, cùm tot annos ab ægris plurimis frequenter accersitus, Principibus nobilibus & aliis magnatibus, apud quos splendidè viuitur, mihi cauere potuerim, quò minus ab illis ad potandum invitatus, vti moris est, inde nos xam nullam contraxerim, & ad hanc grandè & vegetam æstatè saluus peruenire potuerim? Respondi id, quod' & verum erat, me in conuulsiis, quæ in multis horas protrahitur, ab initio ad horæ vnam vel etiam duas, à potu abstinerre posse, idq; eò facilius, quod sitis me pon vrgear, donec ad satieta, tem ferè comederm, tuncque piiss ventriculo eis referto, et si quandoque liberalius bibens, nullam offendam inde me hæc tenus sensisse. Quod cùm & alij quidam me suadente fecissent, se quoq; contra ebrietatem egregiè fuisse præmunitos, mihi sunt facti.

Ebrietas à potu Vini contracta, quomodo emendari aliquomodo possit.

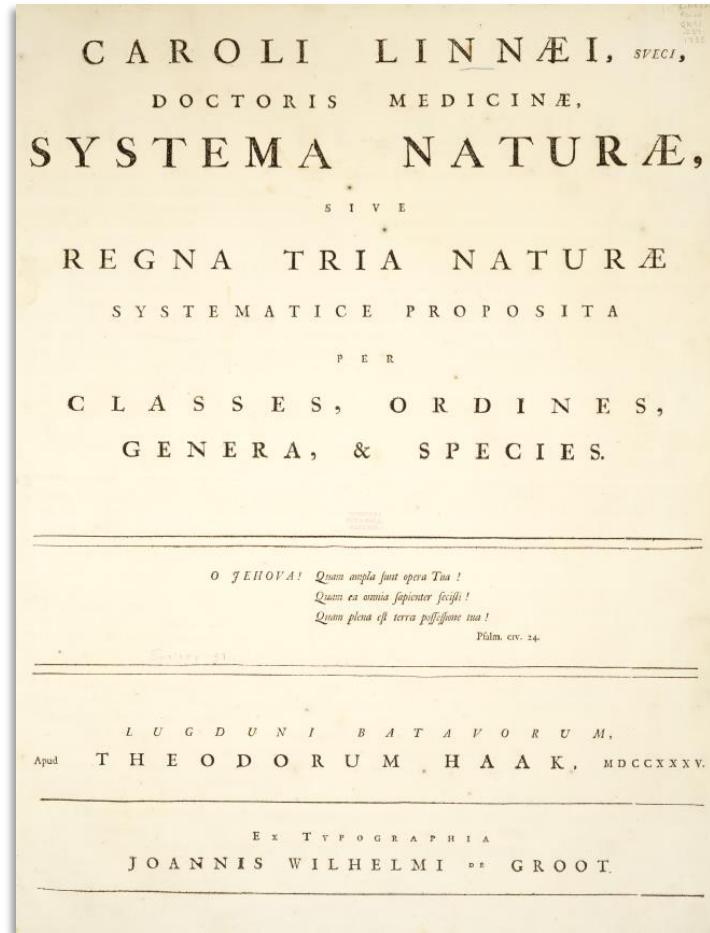
In terremenda quæ ebrietati resistunt, & quo minùs lædat, iuvant, imprimis acida vim Vini infringere, iam diu obseruavi, uti & aliorum narcoticorum, sicuti in Praxi mea Acetum, & Solani furiosi, & Papaueris vires restundere, demonstrauis

Linné (1759):

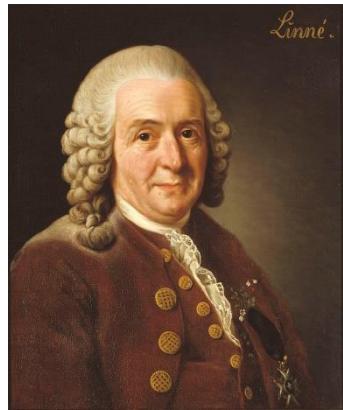
Systema naturae, sive regna tria naturae



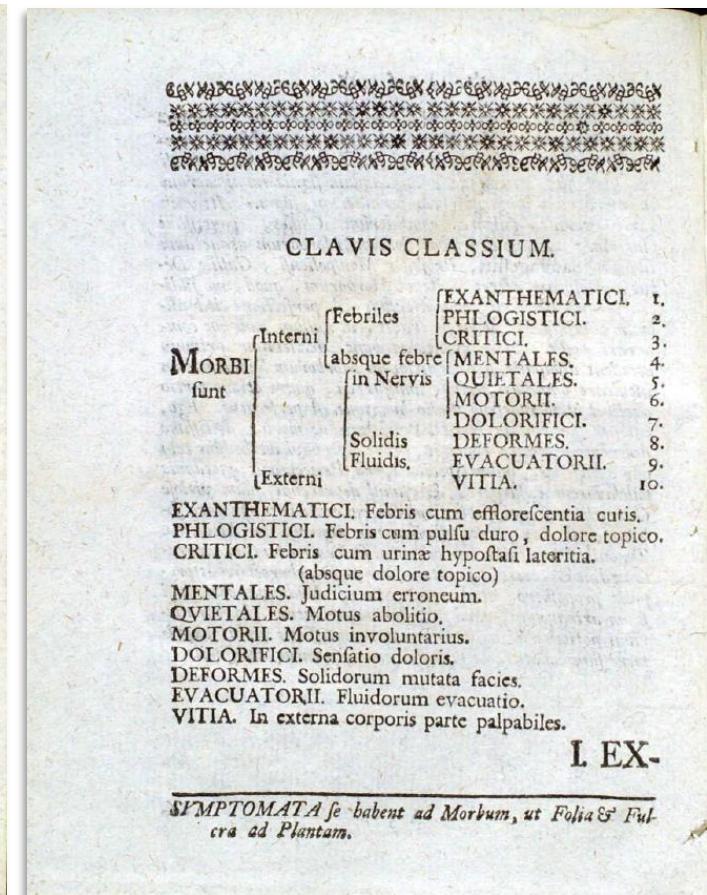
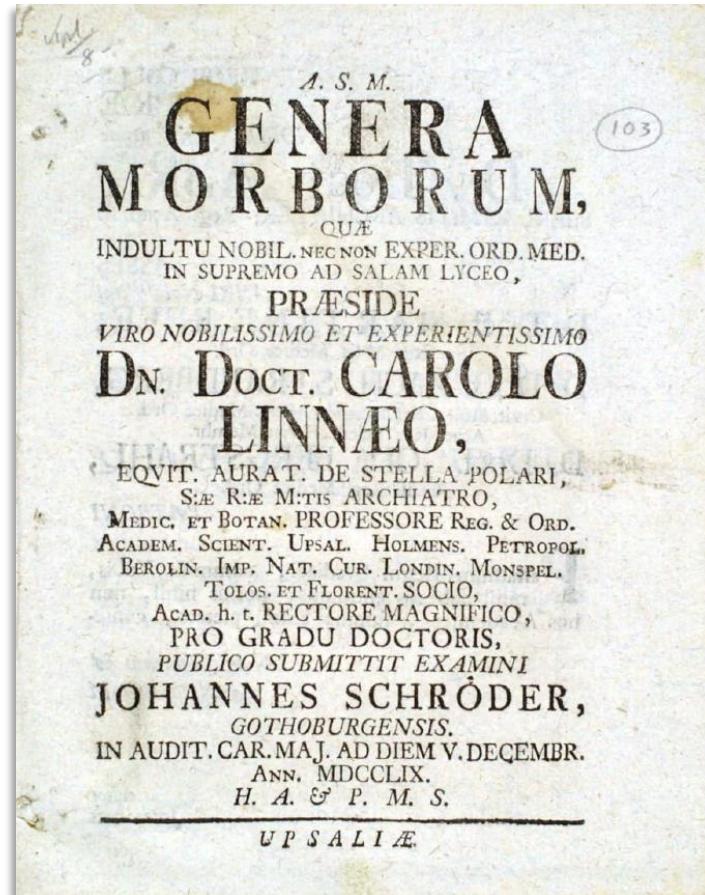
Carl Linné
(1707 – 1778)



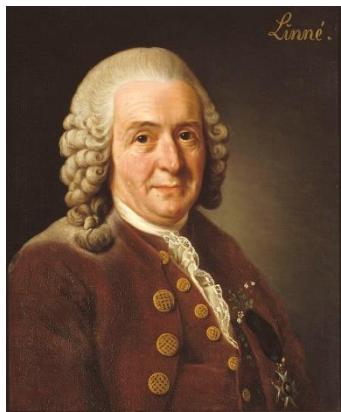
Linné (1759): Genera morborum diss.



Carl Linné
(1707 – 1778)



Linné (1759): Genera morborum diss.



Carl Linné
(1707 – 1778)

*) 13 (*

IV. MENTALES.

I. IDEALES.

- 40. DELIRIUM Insania acuta, transitoria, symptomatica cum febre.
- 41. PARAPHRYSYNE Insania acuta, periodica, sine febre.
- 42. AMENTIA Insania chronica, universalis, innocua.
- 42. MANIA Insania chronica, univertalis, furibunda.
- 44. DÆMONIA Insania chronica, partialis, furibunda, meticuloſa, de Dæmonibus.
- 45. VESANIA Insania chronica, partialis, tranquilla.
- 46. MELANCHOLIA Insania chronica, partialis, moesta, meditabunda.

II. IMAGINARII.

- 47. SYRINGMOS Perceptio Soni tinnitus falsi.
- 48. PHANTASMA Perceptio Visibilis objecti falsi.
- 49. VERTIGO Perceptio circumgyrationis falsæ.
- 50. PANOPHOBIA Imaginatio mali praesentis in solididine.
- 51. HYPOCHONDRIASIS Imaginatio fati lethalis e leví malo; Borborygmi (99), Ruſtus (200) acidi, Palpitationes (108), Praecordia tremula, Persuasio.
- 52. SOMNAMBULISMUS Imaginatio somniantis fortior, qua motus voluntari excitantur.

III. PATHETICI.

- 53. CITTA Appetitus Esculentum ingerendi.
- 54. BULIMUS Appetitus Cibi inexplebilis.
- 55. POLYDIPSIA Appetitus Potus continuus.
- 56. SATYRIASIS Appetitus Veneris enormis.

B 3 57.

*) 14 (*

- 57. EROTOMANIA Desiderium Amantium pudicum.
- 58. NOSTALGIA Desiderium Patriæ Affiniumve.
- 59. TARANTISMUS Desiderium Chorea (sepe a morbi Infecti).
- 60. RABIES Desiderium Mordendi lacerandique innocuos (sepe a morbi Mammalis).
- 61. HYDROPHOBIA Aversatio Potulentorum cum Rigore (117) & Sardiasi (101) (sepius precedenti maritata).
- 62. CACOSITIA Aversatio Cibi cum horrore.
- 63. ANTIPATHIA Aversatio obiecti particularis.
- 64. ANXIETAS Aversatio rerum mundanarum (Cordis dolor).

De Sauvage (1763): Nosologia methodica

NOSOLOGIA METHODICA

SISTENS

MORBORUM CLASSES,

GENERA ET SPECIES,

Juxta Sydenhami mentem & Botanicorum
ordinem.

A U C T O R E

FRANCISCO BOISSIER DE SAUVAGES,

*Regis Consiliario ac Medico, in Monspe-
lienfi Universitate Medicinæ, olimque Bo-
tanical, Professore Regio; Academiae Scien-
tiarum Monspeliensis, Londonensis, Up-
salensis, Berolinensis, Florentinae, Physico-
Botanicae, Suecicae, Naturæ curiosorum,
& Instituti Bononensis Socio.*

TOMUS PRIMUS,

Complectens MORBORUM CLASSES X.
cum Prolegomenis.



AMSTELODAMI,

Sumptibus FRATRUM DE TOURNES.

M. DCC. LXIII.



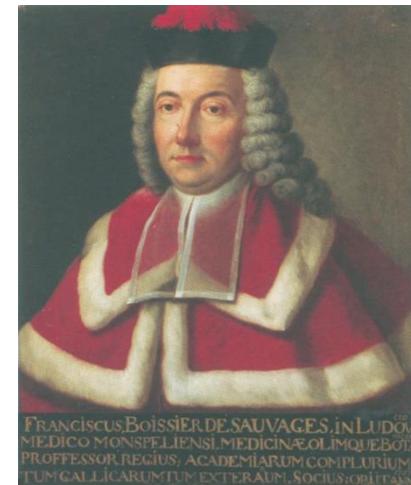
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	MORBORUM



FRANCISCUS BOISSIER DE SAUVAGES. IN LUDO MEDICO MONSPELIENSIS, MEDICINÆ OLIMQUE BOTANICAL PROFESSOR REGIUS, ACADEMIARUM CONPLURIM TUM GALICARUM EXTERAUM, SOCIVS ORBITE

François Boissier
de Sauvages de Lacroix
(1706 – 1767)

Cullen (1769): Synopsis nosologiae methodicae



William Cullen
(1710 – 1790)

S E R I E S ,
CLASSIUM et ORDINUM,

CLASSIS I. PYREXIÆ,
ORDO I. FEBRES.
I. PHLEGMASIÆ.
II. EXANTHEMATA.
IV. HÆMORRHAGIÆ.
V. PROFLUVIA.

CL. II. NEUROSES.
O. I. COMATA,
II. ADYNAZIÆ.
III. SPASMI.
IV. VESANIE.

CL. III. CACHEXIÆ.
O. I. MARCORES.
II. INTUMESCENTIA.
III. IMPETIGINES.

CL. IV. LOCALES.
1 O. I. DYSÆSTHESIA. *Dysorexia*
2 O. I. DYSCINESIA.
4 O. I. APOCENOSES.
5 O. V. EPISCHESSES.
6 VI. TUMORES.
7 VII. ECTOPIÆ.
8 VIII. DIALYSES.

Cullen (1769): Synopsis nosologiae methodicae

C U L L E N I . 281

et fauces ascendens, ibique strangulantis; sopor; convulsiones; urinae limpidae copia profusa; animus, nec sponte, varius et mutabilis.

Hysteria, S. 135. L. 126. V. 219.

XIV Malum hystericum, Hoffm. III. 50. Junck 36.

G. LXII H Y D R O P H O B I A.

Potionis cujuslibet, ut ^{ad ipso} convulsionem pharyngis dolentem carentis, fastidium et horror; plerumque a morbo animalis rabidi.

Hydrophobia, S. 231. L. 86. V. 30. B. 1138. Junck.
124.

O. IV. V E S A N I A E.

Vesaniae, S.

Mentales, L.

Paranoiae, V.

Mentis ^{functiones} laesae sine pyrexia vel comate.

G. LXV A M E N T I A.

Mentis ^{functiones} imbecillitas, quae homines rerum relationes, vel non percepunt, vel non reminiscuntur.

N n

282 GENERA MORBORUM

Amnesia, S. 237.

Oblivio, L. 107. V. 338.

Stupiditas, morosis, fatigata, V. 336.

Memoriae debilitas, Junck. 120.

G. LXVI M E L A N C H O L I A.

Insania partialis, ^{sive} dysphoria.

Melancholia, S. 234. L. 71. V. 332. B. 1089. Junck.

121.

Daemonomania, S. 236.

Daemonia, L. 69.

Velaria, L. 70.

Panophobia, L. 75.

Athymia, V. 329.

Delirium melancholicum, Hoffm. III. 251.

Erotomania, L. 82.

Nostalgia, S. 226. L. 83. Junck 125.

G. LXVII M A N I A.

Insania universalis.

Mania, S. 235. L. 68. V. 331. B. 1110. Junck. 122.

Paraphrofyme, L. 66.

Amentia, L. 67.

Delirium maniacum, Hoffm. III. 251.

Satyriasis, S. 228. L. 81.

Nymphomania, S. 229.

G. LXVIII S O M N I U M. Oneirodynia

In somno imaginatio vehementior vel molestia.

C U L L E N I . 283

Somnium, V. 339.

Somnambulismus, S. 221. L. 77.

Hypnobatafis, V. 340.

Noctambulatio, Junck. 124.

Epiphantes, S. 138. L. 163.

Inebibus, V. 211. Junck 50.

Panophobia, S. 227.

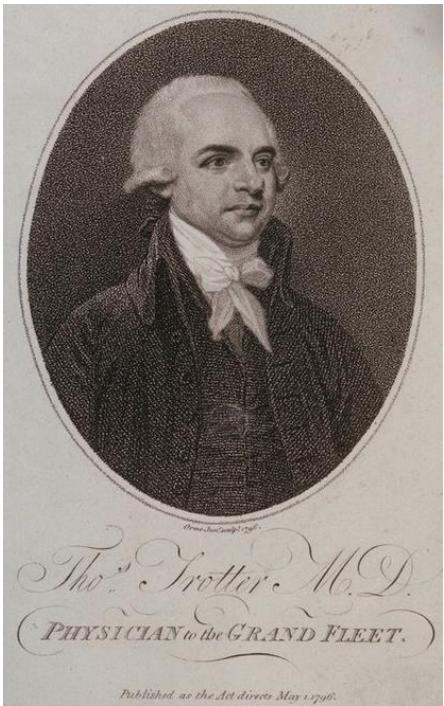
N. Vesaniae symptomatice.

Paraphrofyme, S. 232.

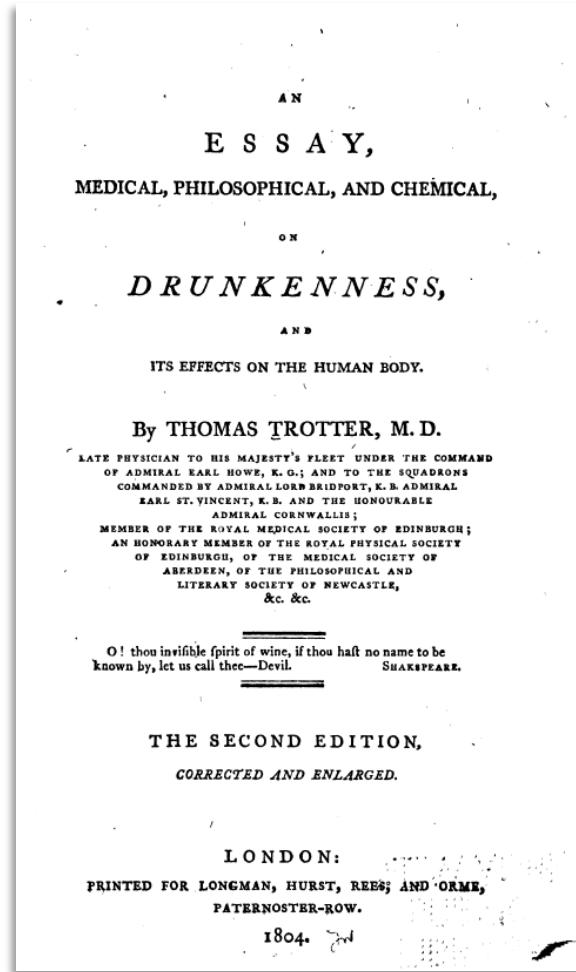
Delirium, L. 65. V. 330.

Trotter (1804):

The habit of drunkenness is a disease of the mind



Thomas Trotter
(1760 – 1832)



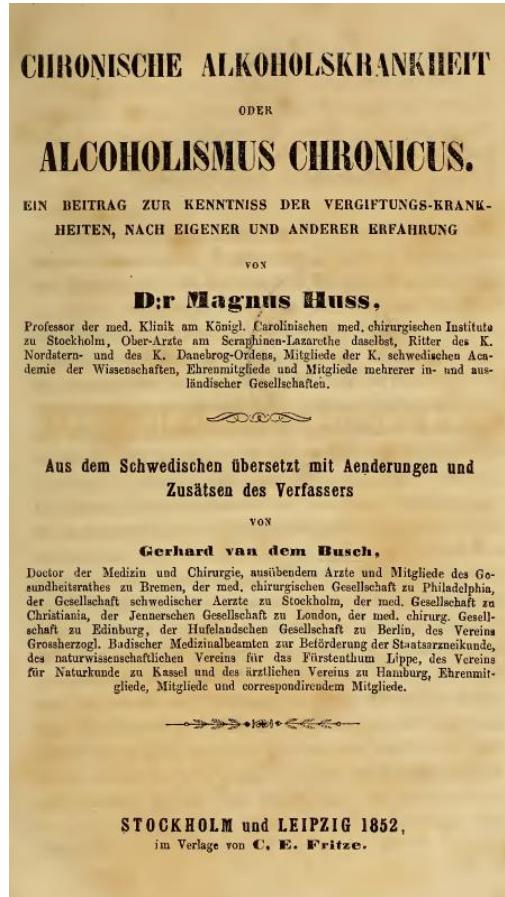
Počiatky definovania alkoholizmu

- *Rush (1784)*: habitual drunkenness
- *Trotter (1804)*: habit of drunkenness
- *Von Brühl-Cramer (1819)*: Trunksucht
- *Hufeland (1819)*: Dipsomanie
- *Esquirol (1838)*: Monomanie d'ivresse
- *Rösch (1839)*: Trunkenheit
- *Huss (nem. 1852)*: Sauftrieb/Trunksucht

Huss (1849): Alcoholismus chronicus



Magnus Huss
(1807 – 1890)



Alcoholismus acutus:

1. Ebrietas (nem. Rausch)
2. Delirium tremens (nem. Säuferwahnsinn, švéd. fyllerigalenskap)
3. Combustio spontanea (Catacausis, nem. Selbstverbrennung)

Alcoholismus chronicus:

1. symptómy motorickej sféry
2. symptómy senzorickej sféry
3. symptómy psychickej sféry nervového systému

Farr (1856): Report on the nomenclature and statistical classification of diseases



Achille Guillard
(1799 – 1876)

STATISTICAL NOSOLOGY.

[NOTE.—The latinized names of classes and of orders are derived from Greek roots, which may help the memory, and suggest, but will never define, the classes. The English names of classes are used in nearly the ordinary senses, and "constitutional" here legitimately acquires a definite meaning. Instead of "Diseases of the Nervous System," I have employed the name "Brain Diseases;" thus designating by the name of the principal organ the diseases of all the divisions of this great system. On the same principle the diseases of the circulatory, respiratory, digestive, urinary, reproductive, locomotive, and integumentary systems are named.]

(Z.) I. ZYMIC DISEASES :—*Zymotici*. ($\zeta\mu\eta$, leaven.)

Diseases that are either epidemic, endemic, or contagious; induced by some specific body, or by the want or by the bad quality of food.

(C.) II. CONSTITUTIONAL DISEASES :—*Cachectici*. ($\kappa\chi\epsilon\xi\alpha$, bad habit of body.)

Sporadic diseases ; affecting several organs in which new morbid products are often deposited; sometimes hereditary.

(L.) III. LOCAL DISEASES : *Monorganici*. ($\mu\nu\rho\varsigma$, alone, without others; $\delta\pi\alpha\nu\varsigma$, organ.)

Sporadic diseases, in which the functions of particular organs or systems are disturbed or obliterated, with or without inflammation ; sometimes hereditary.

(D.) IV. DEVELOPMENTAL DISEASES :—*Metamorphici*. ($\mu\epsilon\tau\alpha\mu\rho\varphi\omega\varsigma$, change of form.)

Special diseases, the incidental result of the formative, reproductive, and nutritive processes.

(V.) V. VIOLENT DISEASES OR DEATHS :—*Thanatici*. ($\theta\acute{a}\nu\alpha\tau\varsigma$, violent deaths.)

Diseases which are the evident and direct results of physical or chemical forces, acting either by the will of the sufferer, of other persons, or accidentally.



William Farr
(1807 – 1883)



Marc-Jacob D'Espine
(1806 – 1860)

Order.

CLASS I.—1. Miasmatic diseases :—Miasmatici. (*μίασμα*, stain, defilement.)

2. Enthetic diseases :—Enthetici. (*ἐνθετός*, put in ; implanted.)

3. Dietic diseases :—Dietici. (*δίαιτα*, way of life ; diet.)

4. Parasitic diseases :—Parasitici. (*παράσιτος*, parasite.)

CLASS II.—1. Diathetic diseases : Diathetici. (*διάθεσις*, condition, diathesis.)

2. Tubercular diseases :—Phthisici. (*φθίσις*, wasting away.)

CLASS III.—1. Brain diseases :—Cephalici. (*κεφαλὴ*, head.)

2. Heart diseases :—Cardiaci. (*καρδία*, heart.)

3. Lung diseases :—Pneumonici. (*πνεύμων*, lung.)

4. Bowel diseases :—Enterici. (*ἰντερον*, intestine.)

5. Kidney diseases :—Nephritici. (*νεφρὸς*, kidney.)

6. Gennetic diseases :—Aidoici. (*αἰδοῖα*, pudenda.)

7. Bone and muscle diseases :—Myostici. (*μῆν*, muscle ; *ὀστέον* bone.)

8. Skin diseases :—Chrotici. (*χρωτὶς*, skin.)

CLASS IV.—1. Developmental diseases of children :—Paidiaci. (*παιδία*, youth.)

2. Developmental diseases of women :—Gyniaci. (*γυνὴ*, woman.)

3. Developmental diseases of old people :—Geratici. (*γῆρας*, old age.)

4. Diseases of nutrition :—Atrophicci. (*ἀτροφία*, atrophy.)

CLASS V.—1. Accident :—Tychici. (*τύχη*, chance.)

2. Battle :—Polemici. (*πόλεμος*, a battle, fight.)

3. Homicide :—Androphonici. } (*ἄνδρος*, man ; *αὐτὸς*, self ;

4. Suicide :—Autophonici. } *φονεύω*, I murder, kill.)

5. Execution :—Demiotici. (*δημιώτης*, executioner.)

Farr (1856): Report on the nomenclature and statistical classification of diseases

ORDER 3.—*Dietici.*

Famine fever.	Febris à famine.	Fièvre de faim.	Hungerfieber.
Scurvy.	Scorbutus.	Scorbut.	Scorbut.
PURPURA.	Purpura.	Purpura.	Purpura oder Blutflecken Krankheit.
†Rickets (?)	Rachitis. (?)	Rachitisme. (?)	Englische Krankheit.
†Bronchocele. (?)	Bronchocele. (?)	Bronchocele (?)	Kropf.
†Cretinism. (?)	Cretinismus. (?)	Crétinisme. (?)	
Ergotism.	Ergotismus.	Ergotisme.	Mutterkornvergiftung
Alcoholism.	Alcoholismus.	Alcoholisme.	Trunksucht oder
(Includes Intemperance, Delirium Tremens, and Catacausis.)			Säuferdyskrasie.

Kuffner (1900): Psychiatrie

Klasifikácia...



Karel Kuffner
(1858 – 1940)

Rozpadá se ve dvě hlavní třídy: I. psychósy prosté, II. psychósy modifikované. Označení »prostoty« voleno, poněvadž při nich podklad pitevný není znám, aetiologický pak nemá rozhodujícího významu na vytváření choroby, a že tudíž charakter jich určen jest prostě zřetely symptomatologickými.

Uvádíme psychósy prosté symptomatické na místě prvném, poněvadž jejich jednoduché typy slouží za vzorec pro tvary různými podklady přispůsobované. Třída ta rozvržena pouze ve dvě podřadí dle základních symptomů: a) affektivní, u nichž změny emoce tvoří basis; b) intellektuální, u kterých základní příznak pozůstává v prvním porušení sféry rozumové. K prvnímu odřadí přiléhá melancholie a manie, ke druhému paranoia, amentia a dementia.

Třída druhá objímá patero skupin, u nichž dá se sledovati vliv určitého podkladu na určitou modifikaci anomalí psychických. Patří sem: 1. Modifikace cerebropathická [Progressivní paralysa, Lues cerebralis, Arteriosklerosa mozku]. 2. Neurotická [Neurasthenie, Epilepsie, Hysterie]. 3. Toxická [Alkoholism, Morphinism atd.]. 4. Věková [Dementia juvenilis et senilis]. 5. Modifikace podmíněná vadami psychické evoluce, k níž počítáme nejen trvalé stavy duševní zakrnělosti, nýbrž i psychósy na degenerativní basi vyvstávající.

Bertillon (1899): Nomenclatures des maladies

CANADA	UNITED STATES	MEXICO	BERTILLON CLASSIFICATION OF CAUSES OF DEATH 13
THE			THREE NOMENCLATURES OF DISEASES.
BERTILLON CLASSIFICATION			(Causes of Death.—Causes of Incapacity for Labor.)
FIRST NOMENCLATURE.	SECOND NOMENCLATURE.	THIRD NOMENCLATURE.	
1. Typhoid fever. 2. Smallpox. 3. Measles. 4. Scarlet fever. 5. Whooping cough. 6. Diphtheria and croup. 7. Influenza. 8. Asiatic cholera. 9. Other epidemic diseases.	1. Typhoid fever. 2. Smallpox. 3. Measles. 4. Scarlet fever. 5. Whooping cough. 6. Diphtheria and croup. 7. Influenza. 8. Asiatic cholera. 9. Cholera nostras. 10. Other epidemic diseases.	1. General Diseases. 1. Typhoid fever. 2. Smallpox. 3. Scurvy. 4. Measles. 5. Scarlet fever. 6. Whooping cough. 7. Diphtheria and croup. 8. Influenza. 9. Asiatic cholera. 10. Cholera nostras. 11. Other epidemic diseases. 12. Pyemia and septicemia. 13. Intermittent fever and malarial exæxia. 14. Pellagra.	1. General Diseases. 1. Typhoid fever. 2. Smallpox. 3. Scurvy. 4. Measles. 5. Scarlet fever. 6. Whooping cough. 7. Diphtheria and croup. 8. Influenza. 9. Asiatic cholera. 10. Cholera nostras. 11. Other epidemic diseases. A. Yellow fever. B. Malaria. C. Mumps. D. Others. 12. Pyemia and septicemia. 13. Intermittent fever and malarial exæxia. 14. Anthrax. 15. Rabies. 16. Relapsing fever. 17. Malaria. 18. Relapsing fever. 19. Intermittent fever. 20. Malarial exæxia. 21. Pellagra.
9. Tuberculosis of the lungs. 10. Tuberculosis of the meninges. 11. Other tuberculosis.	15. Tuberculosis. 16. Seroful. 17. Syphilis.	A. Of the lungs. B. Of the meninges. C. Of the peritoneum. D. Of the skin. E. Other organs or general.	A. Of the lungs. B. Of the meninges. C. Of the peritoneum. D. Of the skin. E. Of other organs. F. General.
12. Cancer.	18. Cancer.	A. Of the mouth. B. Of the stomach. C. Of the liver. D. Of the intestines. E. Of the rectum. F. Of the female genital organs. G. Of the breast.	A. Of the mouth. B. Of the stomach. C. Of the liver. D. Of the intestines. E. Of the rectum. F. Of the female genital organs. G. Of the breast. H. Of the skin.
[13. Anæmia, chlorosis.] 20. Diabetes. 21. Anæmia, chlorosis. 22. Other general diseases. 23. Alcoholism (acute or chronic). 24. Lead poisoning and other chronic poisonings of occupations. 25. Other chronic poisonings.			
19. Rheumatism and goit. 26. Rheumatism. 27. Gout. 28. Diabetes. 29. Exophthalmic goitre. 30. Malaria as a disease. 31. Leukemia. 32. Anæmia, chlorosis. 33. Other chronic diseases. 34. Alcoholism (acute or chronic). 35. Lead poisoning. 36. Other chronic poisonings of occupations. 37. Other chronic poisonings.			
Diseases are printed in <i>italics</i> which appear in statistics of causes of sickness, but not of causes of death.			



Jacques Bertillon
(1851 – 1922)

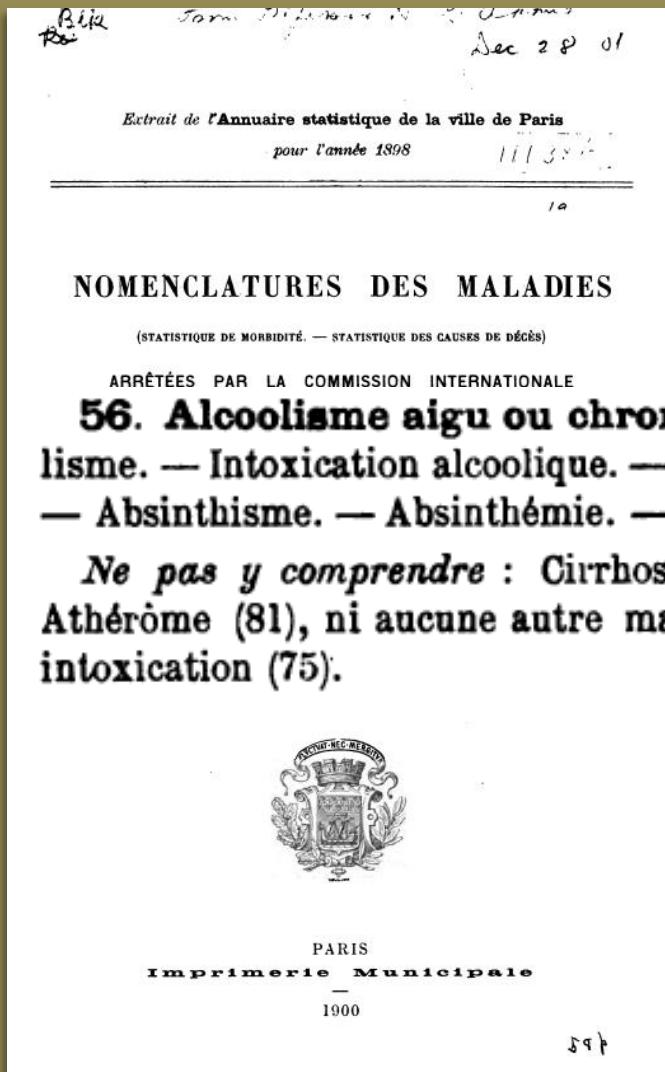
Bertillon (1899): Nomenclatures des maladies

THREE NOMENCLATURES OF DISEASES.

(Causes of Death.—Causes of Incapacity for Labor.)

FIRST NOMENCLATURE.	SECOND NOMENCLATURE.	THIRD NOMENCLATURE.
[13. <i>Anemia, chlorosis.</i>]	<p>I. General Diseases.</p> <p>19. Rheumatism and gout. 20. Diabetes. 21. Anemia, chlorosis. 22. Other general diseases. 23. Alcoholism (acute or chronic). 24. Lead poisoning and other chronic poisonings of occupations. 25. Other chronic poisonings.</p>	<p>I. General Diseases.</p> <p>26. Rheumatism. 27. Gout. 28. Diabetes. 29. Exophthalmic goitre. 30. Addison's disease. 31. Leukemia. 32. Anemia, chlorosis. 33. Other general diseases. 34. Alcoholism (acute or chronic). 35. Lead poisoning. 36. Other chronic poisonings of occupations. 37. Other chronic poisonings.</p>

ICD-1 (Paríž, 1900)



Vývoj revízií ICD

- Bertillon (1899) – č. 23, 34
- ICD-1 (1900) – č. 56
- ICD-2 (1909) – bez zmeny
- ICD-3 (1920) – č. 66
- ICD-4 (1929) – č. 75 (Kap. V – Chronické otravy a intoxikácie)
- ICD-5 (1938) – č. 77 (Kap. V)

ICD-6 (1948)

SANG — TROUBLES MENTAUX

11

Avitaminose et autres maladies du métabolisme (280-289)

- 280 Béribéri
- 281 Pellagre
- 282 Scorbut
- 283 Rachitisme aigu
- 284 Séquelles du rachitisme
- 285 Ostéomalacie
- 286 Autres avitaminoses et états de carence
- 287 Obésité, non spécifiée comme d'origine endocrinienne
- 288 Goutte
- 289 Autres troubles du métabolisme

IV. MALADIES DU SANG ET DES ORGANES HÉMATOPOIÉTIQUES

Maladies du sang et des organes hématopoïétiques (290-299)

- 290 Anémie pernicieuse et autres anémies hyperchromes
- 291 Anémies hypochromes (par carence en fer)
- 292 Autres anémies de type spécifié
- 293 Anémie de type non spécifié
- 294 Polycythémie
- 295 Hémophilie
- 296 Purpura et autres affections hémorragiques
- 297 Agranulocytose
- 298 Maladies de la rate
- 299 Autres maladies du sang et des organes hématopoïétiques

V. TROUBLES MENTAUX, PSYCHONÉVROSES ET TROUBLES DE LA PERSONNALITÉ

Ce chapitre (300-326) ne comprend pas le délire transitoire ni les troubles mentaux mineurs qui accompagnent des maladies organiques définies, comme le délire transitoire des états fébriles, l'intoxication urémique transitoire, les réactions mentales transitoires en relation avec une infection quelconque d'un système de l'économie ou avec une infection du cerveau, un traumatisme, une maladie dégénérative ou une maladie vasculaire.

Psychoses (300-309)

- 300 Troubles schizophréniques (démence précoce)
- 301 Accès maniaque dépressif

12

LISTE DÉTAILLÉE

- 302 Mélancolie involutive
- 303 Paranoïa et psychoses paranoïaque
- 304 Psychose sénile
- 305 Psychose pré-sénile
- 306 Psychose avec artériosclérose cérébrale *
- 307 Psychose alcoolique
- 308 Psychose d'autre étiologie démontrable **
- 309 Psychoses autres ou non spécifiées

Psychonévroses (310-318)

- 310 Anxiété sans mention de symptômes somatiques
- 311 Réaction hystérique sans mention d'anxiété
- 312 Phobies
- 313 Obsessions et réactions compulsives
- 314 Réaction dépressive névrotique
- 315 Psychonévrose avec symptômes somatiques (réaction de somatisation) affectant l'appareil circulatoire
- 316 Psychonévrose avec symptômes somatiques (réaction de somatisation) affectant l'appareil digestif
- 317 Psychonévrose avec symptômes somatiques (réaction de somatisation) affectant d'autres appareils
- 318 Troubles psychonévrotiques de types autres, mixtes ou non précisés.

Troubles du caractère, du comportement et de l'intelligence (320-326)

- 320 Personnalité pathologique
- 321 Arréation affective
- 322 Alcoolisme
- 323 Autres toxicomanies
- 324 Troubles primitifs du comportement au cours de l'enfance
- 325 Déficience mentale
- 326 Troubles du caractère, du comportement et de l'intelligence, autres ou non précisés

* Cette rubrique ne doit pas être employée pour le classement de la cause principale du décès ; elle ne sera généralement pas non plus utilisée pour le classement de la cause principale de morbidité.

** Cette rubrique ne doit pas être employée pour le classement de la cause principale du décès ni, généralement, pour le classement de la cause principale de morbidité si l'affection antécédente persiste.

ICD-6 (1948), ICD-7 (1955)

307 Psychose alcoolique

Delirium tremens

Hallucinations alcooliques

Psychose de Korsakoff (troubles mentaux avec polynévrites), à moins qu'elle ne soit spécifiée comme non alcoolique

Psychose alcoolique

avec polynévrite

de tout genre

Cette rubrique ne comprend pas l'alcoolisme chronique sans troubles mentaux (322).

322 Alcoolisme

Cette rubrique ne comprend pas les psychoses alcooliques (307), ni l'intoxication aiguë par l'alcool (E880, N961). Pour la classification de la cause principale, elle ne comprend pas la cirrhose alcoolique du foie (581.1).

322.0 *Aigu*

Alcoolisme aigu

Ethyliste aigu

322.1 *Chronique*

Alcoolisme chronique

Ethyliste chronique

Alcoolisme habituel

322.2 *Sans précisions*

Alcoolisme SAI

Ethyliste SAI

E880 Empoisonnement accidentel par les alcools

Cette rubrique comprend les empoisonnements accidentels par :

Alcool	Antigel
de bois	Distillats alcooliques (de la série
dénaturé	amylique, butylique, propylque ou autre)
éthylique	
de grain	Esprit de vin (Z)
industriel	
méthylique	

Cette rubrique ne comprend ni les psychoses alcooliques (307) ni l'alcoolisme (322).

N961 Empoisonnement par les alcools

Empoisonnement par :

alcool spécifié comme :

de bois
dénaturé
éthylique
de grain
industriel
méthylique

Empoisonnement par :

antigel

distillat alcoolique (de la série amylique, butylique, propylque ou autre)
esprit de vin (Z)

Cette rubrique ne comprend ni les psychoses alcooliques (307) ni l'alcoolisme (322).

Les subdivisions suivantes avec quatrième chiffre peuvent être employées pour les rubriques N960-N979 :

.0 *Empoisonnement, aigu ou non précisé*

.5 *Intoxication chronique*

.9 *Séquelles de l'empoisonnement*

ICD-8 (1965) a ICD-9 (1975)

Alkoholické psychózy

ICD-8 (1965)

290 – 315

ICD-9 (1975)

290 – 319

290-299 Psychoses

291 Alcoholic psychosis

- .0 Delirium tremens
- .1 Korsakov's psychosis (alcoholic)
- .2 Other alcoholic hallucinosis
- .3 Alcoholic paranoia
- .9 Other and unspecified

294 Psychosis associated with other physical conditions

- .3 Drug or poison intoxication

290-299 Psychoses

290-294 Organic psychotic conditions

291 Alcoholic psychoses

- .0 Alcohol withdrawal delirium
- .1 Alcohol amnestic syndrome
- .2 Other alcoholic dementia**
- .3 Alcohol withdrawal hallucinosis
- .4 Idiosyncratic alcohol intoxication**
- .5 Alcoholic jealousy
- .8 Other specified alcoholic psychosis
(Alcohol withdrawal syndrome)
- .9 Unspecified alcoholic psychosis

292 Drug psychoses

ICD-8 (1965) a ICD-9 (1975)

Alkoholizmus vs. Závislost' a abúzus

ICD-8 (1965)	ICD-9 (1975)
300-309 Neuroses, personality disorders and other nonpsychotic mental disorders	300-316 Neurotic disorders, personality disorders and other nonpsychotic mental disorders
303 Alcoholism	303 Alcohol dependence syndrome
303.0 Episodic excessive drinking	303.0 Acute alcoholic intoxication
303.1 Habitual excessive drinking	.00 Unspecified
303.2 Alcoholic addiction	.01 Continuous
303.9 Other and unspecified alcoholism	.02 Episodic
	.03 In remission
	303.9 Other and unspecified alcohol dependence
	305 Nondependent abuse of drugs
	305.0 Alcohol abuse
	.00 Unspecified
	.01 Continuous
	.02 Episodic
	.03 In remission

Vývoj syndrómu závislosti od alkoholu

Guze et al. (1962)

Feigner et al. (1972)

1. fyzické dôsledky
2. frekventné alebo ťažké denné pitie
3. patologické rysy pitia
4. narušené pracovné či sociálne fungovanie
5. identifikácia samotným pacientom alebo inými

Edwards & Gross (1976)

1. zužovanie repertoáru
2. saliencia pitia
3. zvýšená tolerancia
4. abstinenčné stavy
5. vyhýbanie sa abstinenčným stavom
6. nutkanie vypíť si
7. reinstatement

MKCh-10 (1992)

def: priorita, nutkanie, reinstatement

1. craving
2. narušená kontrola
3. odvykací stav
4. tolerancia
5. preokupácia
6. škodlivé pitie

ICD-8 (1965) a ICD-9 (1975)

Somatické komplikácie

ICD-8 (1965)	ICD-9 (1975)
571 Cirrhosis of liver	357.5 Alcoholic polyneuropathy
571.0 Alcoholic	425.5 Alcoholic cardiomyopathy
	535.3 Alcoholic gastritis
	571.0 Alcoholic fatty liver
	571.1 Acute alcoholic hepatitis
	571.2 Alcoholic cirrhosis of liver
	571.3 Alcoholic liver damage, unspecified
	760.7 Noxious influences affecting foetus via placenta or breast milk
	760.71 Alcohol

ICD-8 (1965) a ICD-9 (1975)

Otrava

ICD-8 (1965)	ICD-9 (1975)
<i>N980-N989 Toxic effect of substances chiefly nonmedicinal as to source</i> N980 Toxic effect of alcohol N980.0 Ethyl alcohol	<i>980-989 Toxic effects of substances chiefly nonmedicinal as to source</i> 980 Toxic effect of alcohol 980.0 Ethyl alcohol
<i>E860-E869 Accidental poisoning by other solid and liquid substances</i> E860 Accidental poisoning by alcohol	<i>E860-E869 Accidental poisoning by other solid and liquid substances, gases and vapours</i> E860 Accidental poisoning by alcohol, not elsewhere classified E860.0 Alcoholic beverages (+ miesto) E860.1 Other and unspecified ethyl alcohol and its products (+ miesto)
<i>E950-E959 Suicide and self-inflicted injury</i> E950 Suicide and self-inflicted poisoning by solid or liquid substances E950.9 Other and unspecified solid and liquid substances	<i>E950-E959 Suicide and self-inflicted injury</i> E950 Suicide and self-inflicted poisoning by solid or liquid substances E950.9 Other and unspecified solid and liquid substances

ICD-8 (1965) a ICD-9 (1975)

Dodatková klasifikácia faktorov pôsobiacich na zdravotný stav a motivácie kontaktu so zdravotníckymi službami

ICD-8 (1965)	ICD-9 (1975)
<p><i>Y00-Y09 Examination and investigation of specific systems without reported diagnosis</i></p> <p>Y11 General psychiatric examination</p> <p>Y11.0 Social maladjustment without manifest psychiatric disorder</p> <p>Y11.9 Other</p>	<p><i>V10-V19 Persons with potential health hazards related to personal and family history</i></p> <p>V11 Personal history of mental disorder</p> <p>V11.3 Alcoholism</p> <p><i>V60-V69 Persons encountering health services in other circumstances</i></p> <p>V61 Other family circumstances</p> <p>V61.4 Health problems within family</p> <p>V61.41 Alcoholism in family</p>
	<p><i>V70-V82 Persons without reported diagnosis encountered during examination and investigation of individuals and populations</i></p> <p>V70.1 General psychiatric examination, requested by the authority</p> <p>V70.2 General psychiatric examination, other and unspecified</p> <p>V70.4 Examination for medicolegal reasons</p> <p>(Alcohol blood tests)</p>
	<p>V79 Special screening for mental disorders and developmental handicaps</p> <p>V79.1 Alcoholism</p>

ICD-10 (1983-1989, 1990, 1992, 1993, 1994)

- viacero verzií (klinická, výskumná)
- alfanumerický kód (lepšie zapamätanie kapitol)
- nárast trojmiestnych položiek z 30 na 100
- všetky psychické aspekty alkoholizmu pod F10
- škodlivé užívanie

Škodlivé užívanie (ICD-10)

F1x.1 Harmful use

A pattern of psychoactive substance use that is causing damage to health. The damage may be **physical** (as in cases of hepatitis from the self-administration of injected drugs) or **mental** (e.g. episodes of depressive disorder secondary to heavy consumption of alcohol).

Diagnostic guidelines

The diagnosis requires that actual damage should have been caused to the mental or physical **health of the user**. Harmful patterns of use are often criticized by others and frequently associated with adverse social consequences of various kinds. The fact that a pattern of use or a particular substance is disapproved of by another person or by the culture, or may have led to socially negative consequences such as arrest or marital arguments is not in itself evidence of harmful use. Acute intoxication (see F1x.0), or "hangover" is not in itself sufficient evidence of the damage to health required for coding harmful use. Harmful use should not be diagnosed if dependence syndrome (F1x.2), a psychotic disorder (F1x.5), or another specific form of drug- or alcohol-related disorder is present.

Centrálna črta dependencie – túžba po droge

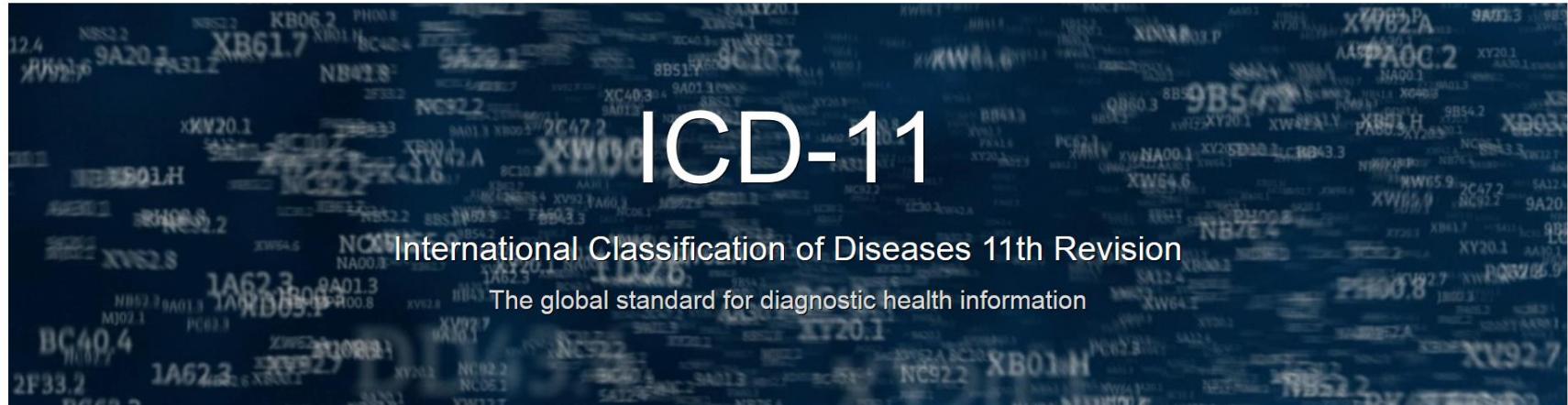
303 Syndróm závislosti na alkohole (*ICD-9, 1975, Osveta, 1984*)

Psychický a zvyčajne tiež fyzický stav, vyplývajúci z požívania alkoholu, charakterizovaný reakciami správania a inými reakciami, ktoré **vždy obsahujú túžbu** buď sústavne, alebo periodicky požívať alkohol s cieľom prežívať jeho psychické účinky alebo potlačiť nepríjemný pocit z abstinencie. Návyk môže, ale nemusí byť prítomný. Osobnosť môže byť súčasne závislá od alkoholu i od iných návykových látok; v tom prípade treba použiť príslušné kódovanie uvedené pod položkou 304. Ak sa alkoholizmus spája s alkoholickou psychózou alebo somatickými komplikáciami, treba kódovať obidva.

F1x.2 Dependence syndrome (*ICD-10, Bluebook, 1993*)

A cluster of physiological, behavioural, and cognitive phenomena in which the use of a substance or a class of substances takes on a much higher priority for a given individual than other behaviours that once had greater value. A central descriptive characteristic of the dependence syndrome **is the desire** (often strong, sometimes overpowering) to take psychoactive drugs (which may or may not have been medically prescribed), alcohol, or tobacco. There may be evidence that return to substance use after a period of abstinence leads to a more rapid reappearance of other features of the syndrome than occurs with nondependent individuals.

ICD-11 for Mortality and Morbidity Statistics (ICD-11-MMS)



ICD-11

International Classification of Diseases 11th Revision
The global standard for diagnostic health information

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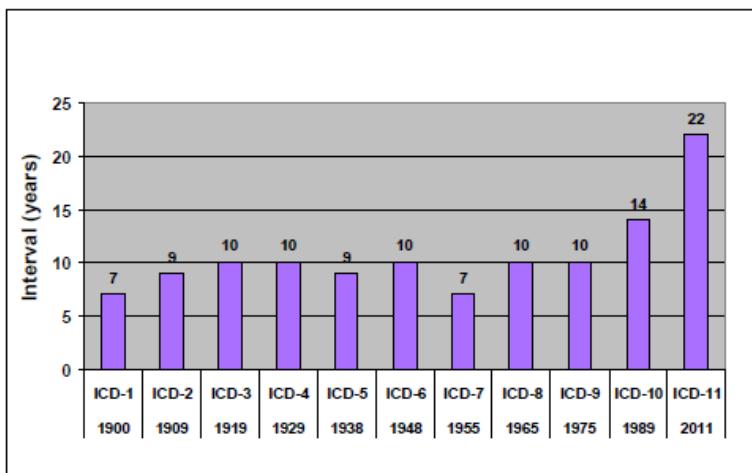
Comments

Proposals

Translations

Vývoj ICD-11

ICD Revisions



Tentative Timeline

- ICD-11 by ...
 - 2004/5: International Consultations for blueprint
 - 2005 : Start of multiple streams of workplan
 - 2006 : Alpha version
 - 2007 : Commentaries and consultations
 - 2008 : Beta version & Field Version
 - 2009 : Field trials
 - 2010 : Final version for public viewing
 - 2011 : WHA Approval
 - 2013+ implementation



ICD-11



Home / News / Detail / World Health Assembly Update, 25 May 2019

WHO/L. Cipriani
Chairperson for Committee A, Dr Silvia Paula Valentim Lutucuta, Minister of Health of Angola

World Health Assembly Update, 25 May 2019

25 May 2019 | News release | Geneva

International Statistical Classification of Diseases and Related Health Problems (ICD-11)

Member states agreed today to adopt the eleventh revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-11), to come into effect on 1 January 2022.

Français Русский Español



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Vývoj ICD-11

In the following years, WHO addressed the implementation issues within the WHO Family of International Classifications (WHO FIC) Network and then formulated a revision strategy between 2003 and 2007. The objectives of the ICD Revision Process were:

1. To revise the ICD classification in line with **scientific advances**, to serve multiple purposes including mortality and morbidity statistics as well as clinical use in primary care, specialty care and research;
2. To maintain the ICD classification as the **international standard** in multiple languages and in multiple settings to enable **comparable data**;
3. To link the ICD classification with **computerized health information systems**, which required ICD directly uses standard terminologies and links with other health informatics applications to be "**electronic health application ready**".

Základná štruktúra ICD-11 (porovnanie s ICD-10)

	ICD-10 (1989)	ICD-11 MMS (2018)
Infekčné, nádorové, duševné ochorenia a všeobecne ochorenia z vnútorných príčin	I – XIV (A00-N99)	01 – 17 (1A00-HA87)
Pregnancy... perinatal period... Congenital malformations/ Developmental anomalies	XV-XVII (O00-Q99)	18 – 20 (JA00-LD9Z)
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	XVIII (R00-R99)	21 (MA00-MH2Y)
Injury, poisoning and certain other consequences of external causes	XIX (S00-T98)	22 (NA00-NF2Z)
External causes of morbidity and mortality	XX (V01-Y98)	23 (PA00-PL2Z)
Factors influencing health status and contact with health services	XXI (Z00-Z99)	24 (QA00-QF4Z)
Codes for special purposes	XXII (U00-U89)	25 (RA00-RA26)
Traditional Medicine conditions - Module I		26 (TM1) (SA00-SJ3Z)
Supplementary section for functioning assessment		V
Extension Codes		X

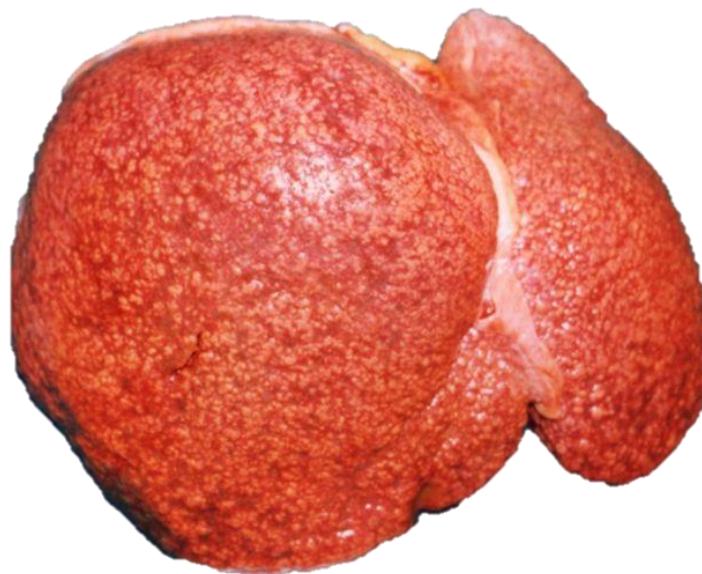
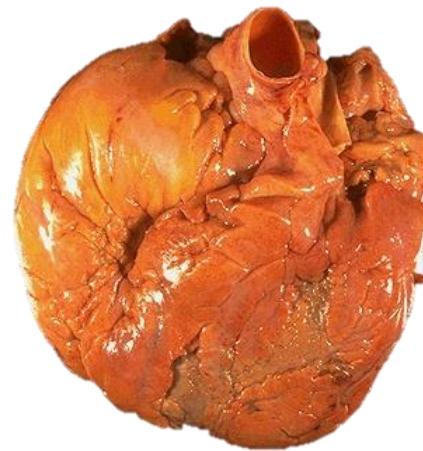
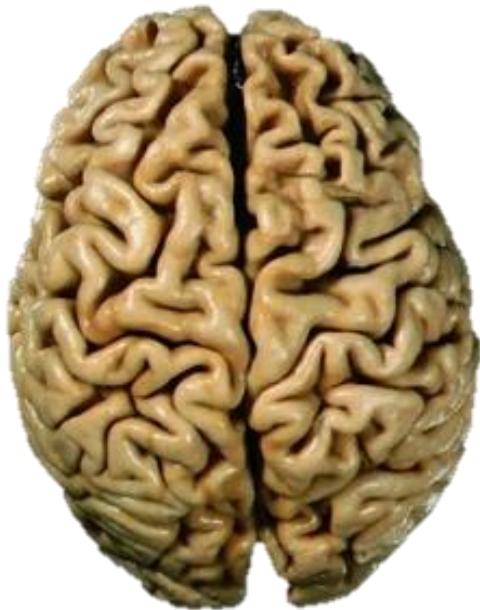
Kódovanie intoxikácie a otravy



Kódovanie intoxikácie a otravy

ICD-10 (1989)			ICD-11 MMS (2018)	
Alkohol (etanol)			XM87W3 XM1A61	Ethanol Alcohol beverage + ďalších 21 kódov
Akútна intoxikácia (Akútna opitost alkoholom)	F10.0	Mental and behavioural disorders due to use of alcohol: acute intoxication	6C40.3	Alcohol intoxication
Toxický účinok alkoholu (etanol)	T51.0	Toxic effect of alcohol	NE61	Toxic effect of alcohol deterrents (incl. alcohol poisoning)
Zistenie alkoholu v krvi	R78.0	Finding of alcohol in blood	MA13.1	Finding of alcohol in blood
Dôkaz vplyvu alkoholu potvrdený obsahom alkoholu v krvi	Y90.0-Y90.8	Evidence of alcohol involvement determined by blood alcohol level		
		Evidence of alcohol involvement determined by level of intoxication		Mild Moderate Severe Scale Value
Dôkaz vplyvu alkoholu potvrdený stupňom intoxikácie	Y91.0 Y91.1 Y91.2 Y91.3	Mild Moderate Severe Very severe	XS5W XSOT XS25 (XS2R)	Mild Moderate Severe (Profound)
Otravy alkoholom podľa zavinenia	X45	Accidental poisoning by and exposure to alcohol	PB30	Unintentional exposure to or harmful effects of alcohols
	X65	Intentional self-poisoning by and exposure to alcohol	PD00	Intentional self-harm by exposure to or harmful effects of alcohols
	X89 (?)	Assault by other specified chemicals and noxious substances	PE90	Assault by exposure to or harmful effects of alcohols
	Y15	Poisoning by and exposure to alcohol, undetermined intent	PH50	Exposure to or harmful effects of undetermined intent of alcohols

Somatické prejavy alkoholizmu



Endokrinné poruchy, poruchy výživy a metabolizmu

ICD-10 (1989)	ICD-11 MMS (2018)
IV Endocrine, nutritional and metabolic diseases	05 Endocrine, nutritional or metabolic diseases
E20-E35 Disorders of other endocrine glands	Endocrine diseases
E24.4 Alcohol-induced pseudo-Cushing's syndrome	5A70.2 (Alcohol-induced) pseudo-Cushing syndrome
E50-E64 Other nutritional deficiencies	Nutritional disorders
E51 Thiamine deficiency	5B5A Vitamin B1 deficiency
E51.2 Wernicke's encephalopathy	5B5A.1 Wernicke-Korsakoff Syndrome
E51.8 Other manifestations of thiamine deficiency	5B5A.10 Wernicke encephalopathy 5B5A.11 Korsakoff syndrome

Ochorenia nervového systému

ICD-10 (1989)	ICD-11 MMS (2018)
VI Diseases of the nervous system	08 Diseases of the nervous system
G40-G47 Episodic and paroxysmal disorders	Headache disorders
G44.8 Other specified headache syndromes	8A84.Y Delayed alcohol-induced headache Nutritional or toxic disorders of the nervous system
G60-G64 Polyneuropathies and other disorders of the peripheral nervous system	8D44 Alcohol-related neurological disorders
G62.1 Alcoholic polyneuropathy	8D44.0 Alcoholic polyneuropathy
G70-G73 Diseases of myoneural junction and muscle	
G72.1 Alcoholic myopathy	8D44.1 Alcoholic myopathy
G30-G32 Other degenerative diseases of the nervous system	8D44.Y Other specified alcohol-related neurological disorders <ul style="list-style-type: none">• alcoholic encephalopathy• cerebellar degeneration due to chronic alcoholism• peripheral neuropathy due to chronic alcoholism
G31.2 Degeneration of nervous system due to alcohol	
G40.5 Special epileptic syndromes <ul style="list-style-type: none">• Epileptic seizures related to alcohol	8D44.Z Alcohol-related neurological disorders, unspecified

Ochorenia nervového systému



Avicenna
(980 – 1037)

De cura soda ex ebrietate.

Cap. 24.

IN soda autem contingente ex ebrietate, in primis oportet ut administretur stomachi purgatio: aut uomitum facto cum sechanibin, & sem. raphani, aut cum sechanibin, & succo raphani, & aut sechanibin cum aqua tepida: aut cum uomitibus leuibus & medijs, de illis quos in antidotario faciemus: q[ui] si uomitus non fuerit obediens: aut timetur eius administratio, solues cum hiera confortata cum scamonea, ne eius mora prolongetur: q[ui] si tibi fuerit aliquid prohibens ab administratione eius, quod est calidum propter aegritudinem calidam, solues cum decoctione myrobalanorum, aut syrupo de fructibus solutiuo. Et si anima abhoruerit huiusmodi solutiua, solues cum aqua utrorumq[ue] granatorum cum pulpa, secundum quod dicimus in antidotario, uigorata cum scamonea parumper: & non timeas propter ipsius caliditatem. Et si est aliquid prohibens ab euacuantibus cuiuscumque modi fuerint, fac & eos dormire, quousque digeratur, q[ui]d in eorum stomachis continetur de uino. Et istud quidem appareat ex colore urinæ, & eius tintura. Et frumenta pedes eorum cum sale & oleo uiolaceo: & super ipsum forum extremitates effundatur embroca ex chamæmilla. Deinde fac eos ingredi balneum: & ut capita ipsum forum inungantur oleo rosa. Infrigidato, non tamem uehementer: & cibentur lentibus, & acresta, et similibus. Et in caulisbus quidem est proprietas, qua uapores à capite prohibentur. Gal. inquit si cibas illos pullis columbarum, non erras. Et uidetur q[ui] causa sit subtilitas sanguinis ex eis generati, & fortitudo eius ad resoluendum uapores. Et oportet ut eis tribus fructus stypticos: et usitatus potus aquæ, et non aliud, nisi stomachus fuerit debilis, et timetur ipsius lassitas: tunc enim prohibe eos à multitudine potus aquæ frigidae: et pota eos aqua granati & acetoli, et ribes proprie, et rob eius, et acetositate citri proprie, et rob ipsius, et cydoniorum, et malorum, et transglutinare coriandrum siccum cum zucaro ad pondus coriandri confert eis: deinde fac eos & dormire et quiescere, quoniam est radix in cura ipsius: quod si propter hoc non quiescunt, reitera illud eadem die, et in mane. Et pone cibum ipsum, qui infrigidat et humectat, aut qui est ei subtilis sicut est uitellus oui: et super eos funde aquam calidam multæ resolutionis. Et administrata eis somnum in quantum potes: deinde cum remouetur nausea, si fuerit, et remanet soda absconde oleum rosa. ab eis, quoniam nocuum est eis post illud, cum prius fuerit necessarium ad confortandum caput, et prohibendum uapores. et iammodo, seu et nunc sunt remoti. et oportet ut modo seu nunc administreres oleum chamæmillinum loco eius fricando ad resoluendum: q[ui] si propter illud non remouetur, adhibeatur oleum de lilio, quoniam ipsum est ultimum et expertum. Amplius cum ebrietas incipit alleuiari, et descendere, fac eos ambulare paulatim, et paulatim, et fac eos iacere in lectica chordis suspensa, et suauiter commota. Et ciba eos tunc carnibus piscium petroforum, et testiculis gallorum, et pullis cum herbis frigidis. Et oportet quidem ne super cibum ambulent: sed post tres horas. Et uniuersaliter melius est, ut consideres digestio nem eorum cum somno, aut quiete longa, donec stomachus parumper alleuietur. Deinde administratur sechanibin zuccarinum si fuerint calefacti: aut mellinum, si fuerint humectati et infrigidati: et redi super frictionem pedum suorum: deinde ambulet non laboriose: aut moueantur alio motu non laborioso: et cum hoc oportet a puro aceto, et almuri fieri alienos: parum, q[ui] si non est excusatio ab eo, tunc intingant panem in eo, uel utantur eo quod non est acutum. Cumq[ue] parum feceris eos ambulare, administrare eis tintam, et balneum: deinde ad ultimum oportet ut eos infundas cum embrocis æqualis resolutionis, et cibis eos carnibus leuibus. Medicamen optimum ebrietati. Recipe seminis endiuia, seminis caulisi, berberis mundati ex semine suo, et sumac, et lentium ex corticatarum, rosarum, spodijs, omnium æqualiter, commisceantur omnia: et bibatur ex eis pondus trium drach. cum chirat. i. caphorae, et unc. i. aquæ granati: aut aquæ ribes: aut acetositatis citri, et rob eius.

Ochorenia obejového systému

ICD-10 (1989)	ICD-11 MMS (2018)
IX Diseases of the circulatory system	11 Diseases of the circulatory system
I30-I52 Other forms of heart disease	Diseases of the myocardium or cardiac chambers
I42 Cardiomyopathy	BC43 Cardiomyopathy
	BC43.0 Dilated cardiomyopathy
I42.6 Alcoholic cardiomyopathy	BC43.01 Nonfamilial dilated cardiomyopathy <ul style="list-style-type: none">alcohol cardiomyopathyalcoholic cardiomyopathydilated cardiomyopathy due to alcoholismdilated cardiomyopathy secondary to alcohol

Ochorenia tráviaceho systému

ICD-10 (1989)	ICD-11 MMS (2018)
XI Diseases of the digestive system	13 Diseases of the digestive system
K20-K31 Diseases of oesophagus, stomach and duodenum	Diseases of the stomach or duodenum
K29.2 Alcoholic gastritis	DA42.80 Alcoholic gastritis DA51.50 Alcoholic duodenitis DA60.60 Alcohol-induced gastric ulcer
K70-K77 Diseases of liver	Diseases of liver
K70 Alcoholic liver disease	DB94 Alcoholic liver disease
K70.0 Alcoholic fatty liver	DB94.0 Alcoholic fatty liver
K70.1 Alcoholic hepatitis	DB94.1 Alcoholic hepatitis
K70.2 Alcoholic fibrosis and sclerosis of liver	DB94.2 Alcoholic liver fibrosis
K70.3 Alcoholic cirrhosis of liver	DB94.3 Alcoholic cirrhosis of liver without hepatitis
K70.4 Alcoholic hepatic failure	DB94.Y Other specified alcoholic liver disease
K70.9 Alcoholic liver disease, unspecified	DB94.Z Alcoholic liver disease, unspecified
K80-K87 Disorders of gallbladder, biliary tract and pancreas	Diseases of pancreas
K85.2 Alcohol-induced acute pancreatitis	DC31.1 Acute alcohol-induced pancreatitis
K86.0 Alcohol-induced chronic pancreatitis	DC32.3 Chronic alcohol-induced pancreatitis

Ochorenia pohybového aparátu...

ICD-10 (1989)	ICD-11 MMS (2018)
XIII Diseases of the musculoskeletal system and connective tissue	15 Diseases of the musculoskeletal system or connective tissue
M80-M94 Osteopathies and chondropathies	Osteopathies and chondropathies
M87.3 Other secondary osteonecrosis	FB81.2 Drug-induced osteonecrosis • Alcohol induced osteonecrosis

Ťažkosti spôsobené plodu pitím matiek počas ťarchavosti



Ťažkosti spôsobené plodu pitím počas ťarchavosti

ICD-10 (1989)	ICD-11 MMS (2018)
XV Pregnancy, childbirth and the puerperium O30-O48 Maternal care related to the fetus and amniotic cavity and possible delivery problems 035.4 Maternal care for (suspected) damage to fetus from alcohol	18 Pregnancy, childbirth or the puerperium Maternal care related to the foetus , amniotic cavity or possible delivery problems JA85.Y Maternal care for known or suspected other specified fetal abnormality or damage
XVI Certain conditions originating in the perinatal period P00-P04 Fetus and newborn affected by maternal factors and by complications of pregnancy, labour and delivery F04.3 Fetus and newborn affected by maternal use of alcohol	19 Certain conditions originating in the perinatal period Foetus or newborn affected by maternal factors or by complications of pregnancy, labour or delivery KA06.2 Foetus or newborn affected by maternal use of alcohol
XVII Congenital malformations, deformations and chromosomal abnormalities Q80-Q89 Other congenital malformations Q86 Congenital malformation syndromes due to known exogenous causes, not elsewhere classified Q86.0 Fetal alcohol syndrome (dysmorphic)	20 Developmental anomalies Multiple developmental anomalies or syndromes LD2F Syndromes with multiple structural anomalies, without predominant body system LD2F.0 Toxic or drug-related embryofetopathies LD2F.00 Foetal alcohol syndrome

Faktory ovplyvňujúce zdravotný stav alebo styk so zdravotníckymi zariadeniami



Ilustračné foto Foto: TASR/Michal Svítko

tasr

MKCH-10 (1989)			ICD-11 MMS (2018)	
Chapter XXI Factors influencing health status and contact with health services (Z00-Z99)			24	Factors influencing health status or contact with health services
Pozorovanie pri podozrení na duševnú poruchu	Z03.2	Observation for suspected mental and behavioural disorders	QA02.3	Observation for suspected mental or behavioural disorders, ruled out
Vyšetrenie a pozorovanie z iných príčin	Z04.0	Blood-alcohol and blood-drug test	QA04.0 QA04.1	Blood-alcohol or blood-drug test Alcohol and drug testing other than by blood
Sledovanie po liečbe	Z09.8	Follow-up examination after other treatment for other conditions	QA07.Y	Other specified follow-up examination after treatment for conditions other than malignant neoplasms
Špeciálne skríningové vyšetrenie	Z13.3	Special screening examination for mental and behavioural disorders (Incl.: Alcoholism)	QA0A.3	Special screening examination for mental or behavioural disorders Incl.: Screening for alcoholism
Poradenstvo a dohľad pri abúze alkoholu	Z71.4	Alcohol abuse counselling and surveillance	QA11	Contact with health services for alcohol use counselling or surveillance
Rehabilitácia pri alkoholizme	Z50.2	Alcohol rehabilitation	QB95.2	Alcohol rehabilitation
Rekonvalescencia	Z54.8	Convalescence following other treatment	QB73	Convalescence following combined treatment (incl.: alcohol rehabilitation)
Abúzus alkoholu v rodinnej anamnéze	Z81.1	Family history of alcohol abuse	QC65	Family history of mental or behavioural disorder
Konzum alkoholu	Z72.1	Alcohol use	QE10	Hazardous alcohol use

Rizikové pitie

QE10

Hazardous alcohol use

A pattern of alcohol use that appreciably increases the risk of harmful physical or mental health consequences to the user or to others to an extent that warrants attention and advice from health professionals. The increased risk may be from the frequency of alcohol use, from the amount used on a given occasion, or from risky behaviours associated with alcohol use or the context of use, or from a combination of these. The risk may be related to short-term effects of alcohol or to longer-term cumulative effects on physical or mental health or functioning. Hazardous alcohol use has not yet reached the level of having caused harm to physical or mental health of the user or others around the user. The pattern of alcohol use often persists in spite of awareness of increased risk of harm to the user or to others.

Exclusions: Disorders due to use of alcohol (6C40)

„Mental and behavioural disorders in the ICD-11: concepts, methodologies, and current status“

Table 10. Clinical aspects of disorders due to substance use suggested for ICD-11, using alcohol-related disorders as an example

Number	Types of disorders
1.	Alcohol intoxication
2.	Harmful pattern of use of alcohol
3.	Alcohol dependence
4.	Alcohol withdrawal
5.	Alcohol-induced delirium
6.	Alcohol-induced psychotic disorder
7.	Alcohol-induced mood disorder
8.	Alcohol-induced anxiety disorder
9.	Alcohol-induced sexual dysfunction
10.	Alcohol-induced sleep disorder
11.	Dementia due to use of alcohol
12.	Amnestic disorder due to alcohol use
13.	Single episode of harmful use of alcohol

6C40.0-1 Škodlivé pitie (ICD-11 MMS)

6C40.0

Single episode of harmful use of alcohol

A single episode of use of alcohol that has caused damage to a person's physical or mental health or has resulted in behaviour leading to harm to the health of others. Harm to health of the individual occurs due to one or more of the following: (1) behaviour related to intoxication; (2) direct or secondary toxic effects on body organs and systems; or (3) a harmful route of administration. Harm to health of others includes any form of physical harm, including trauma, or mental disorder that is directly attributable to behavior due to alcohol intoxication on the part of the person to whom the diagnosis of single episode of harmful use applies. This diagnosis should not be made if the harm is attributed to a known pattern of alcohol use.

Exclusions: Harmful pattern of use of alcohol (6C40.1)

Alcohol dependence (6C40.2)

6C40.1

Harmful pattern of use of alcohol

A pattern of alcohol use that has caused damage to a person's physical or mental health or has resulted in behaviour leading to harm to the health of others. The pattern of alcohol use is evident over a period of at least 12 months if substance use is episodic or at least one month if use is continuous. Harm to health of the individual occurs due to one or more of the following: (1) behaviour related to intoxication; (2) direct or secondary toxic effects on body organs and systems; or (3) a harmful route of administration. Harm to health of others includes any form of physical harm, including trauma, or mental disorder that is directly attributable to behaviour related to alcohol intoxication on the part of the person to whom the diagnosis of Harmful pattern of use of alcohol applies.

Exclusions: Alcohol dependence (6C40.2)

Single episode of harmful use of alcohol (6C40.0)

6C40.2 Závislosť od alkoholu (ICD-11 MMS)

6C40.2

Alcohol dependence

Alcohol dependence is a disorder of regulation of alcohol use arising from repeated or continuous use of alcohol. The characteristic feature is a strong internal drive to use alcohol, which is manifested by impaired ability to control use, increasing priority given to use over other activities and persistence of use despite harm or negative consequences. These experiences are often accompanied by a subjective sensation of urge or craving to use alcohol. Physiological features of dependence may also be present, including tolerance to the effects of alcohol, withdrawal symptoms following cessation or reduction in use of alcohol, or repeated use of alcohol or pharmacologically similar substances to prevent or alleviate withdrawal symptoms. The features of dependence are usually evident over a period of at least 12 months but the diagnosis may be made if alcohol use is continuous (daily or almost daily) for at least 1 month.

Inclusions: Chronic alcoholism

Dipsomania

Exclusions: Single episode of harmful use of alcohol (6C40.0)

Harmful pattern of use of alcohol (6C40.1)

Proposed criteria of alcohol dependence (2014)

Table I. Proposed criteria of alcohol dependence in ICD-11

Criterion	Description
A	Difficulties in controlling substance-taking behaviour in terms of its onset, termination, or levels of use, often combined with a strong desire or sense of compulsion to take the substance.
B	A higher priority given to alcohol use than to other activities, obligations, personal and health matters. Substance use plays a dominant role in the individual's life.
C	Presence of physiological symptoms (pointing to an adaptation of the nervous system to the substance), such as: tolerance, physical withdrawal state when substance use has ceased or been reduced, as evidenced by: the characteristic withdrawal syndrome for the substance; or use of the same (or a closely related) substance with the intention of relieving or avoiding withdrawal symptoms. Withdrawal symptoms must be characteristic for the withdrawal syndrome of the given substance and not just be symptoms of a hangover.

DSM-5 (2013)

Alcohol Use Disorder

Diagnostic Criteria

- A. A problematic pattern of alcohol use leading to clinically significant impairment or distress, as manifested by at least two of the following, occurring within a 12-month period:
1. Alcohol is often taken in larger amounts or over a longer period than was intended.
 2. There is a persistent desire or unsuccessful efforts to cut down or control alcohol use.
 3. A great deal of time is spent in activities necessary to obtain alcohol, use alcohol, or recover from its effects.
 4. Craving, or a strong desire or urge to use alcohol.
 5. Recurrent alcohol use resulting in a failure to fulfill major role obligations at work, school, or home.
 6. Continued alcohol use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol.
 7. Important social, occupational, or recreational activities are given up or reduced because of alcohol use.
 8. Recurrent alcohol use in situations in which it is physically hazardous.
 9. Alcohol use is continued despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by alcohol.
 10. Tolerance, as defined by either of the following:
 - a. A need for markedly increased amounts of alcohol to achieve intoxication or desired effect.
 - b. A markedly diminished effect with continued use of the same amount of alcohol.
 11. Withdrawal, as manifested by either of the following:
 - a. The characteristic withdrawal syndrome for alcohol (refer to Criteria A and B of the criteria set for alcohol withdrawal, pp. 499–500).
 - b. Alcohol (or a closely related substance, such as a benzodiazepine) is taken to relieve or avoid withdrawal symptoms.

ICD-10 (WHO, 1989) Chap. V		ICD-11 MMS (2018) Chap. 06		DSM-5 (2013)	
		Block L1 Disorders due to substance use or 6C4 addictive behaviours		481	Substance-related and addictive disorders
F10-	Mental and behavioural disorders due to psychoactive substance use	Block L2 Disorders due to substance use 6C4		483	Substance-related disorders
F10	Mental and behavioural disorders due to use of alcohol	6C40	Disorders due to use of alcohol	490	Alcohol-related disorders
		6C40.0	Single episode of harmful use of alcohol		
F10.1	Harmful use	6C40.1	Harmful pattern of use of alcohol	490	Alcohol use disorder
F10.2	Dependence syndrome	6C40.2	Alcohol dependence		
F10.0	Acute intoxication	6C40.3	Alcohol intoxication	497	Alcohol intoxication
F10.3	Withdrawal state	6C40.4	Alcohol withdrawal	499	Alcohol withdrawal
F10.4	Withdrawal state with delirium	6C40.5	Alcohol-induced delirium	596	Delirium (intoxication or withdrawal)
F10.5	Psychotic disorder	6C40.6	Alcohol-induced psychotic disorder	87	Schizophrenia spectrum and other psychotic disorders
F10.8	Other mental and behavioural disorders (due to use of alcohol)	6C40.7	Other alcohol-induced disorders	502	Other alcohol-induced disorders
		6C40.70	Alcohol-induced mood disorder		
		6C40.71	Alcohol-induced anxiety disorder		
		6C40.Y	Other specified disorders due to use of alcohol		
F10.9	Unspecified mental and behavioural disorder (due to use of alcohol)	6C40.Z	Disorders due to use of alcohol, unspecified	503	Unspecified alcohol-related disorder

ICD-10 (WHO, 1989) Chap. V	ICD-11 MMS (2018) Chap. 06	DSM-5 (2013)
F10.2 Dependence syndrome	6C40.2 Alcohol dependence	303.90 Alcohol use disorder (moderate, severe)
F10.24 currently using the substance (active dependence)	6C40.20	current use, continuous
F10.25 continuous use		
F10.26 episodic use	6C40.21	current use, episodic
F10.20 currently abstinent (+F10.21, F10.22, F10.23)	6C40.22	early full remission
	6C40.23	sustained partial remission
	6C40.24	sustained full remission
	6C40.2Z	unspecified

F10.3	Withdrawal state	6C40.4	Alcohol withdrawal	499	Alcohol withdrawal
				(291.81)	
F10.30	uncomplicated	6C40.40	uncomplicated		without perceptual disturbances
		6C40.41	with perceptual disturbances		with perceptual disturbances
F10.31	with convulsions	6C40.42	with seizures		
		6C40.43	with perceptual disturbances and seizures		
		6C40.4Z	unspecified		
F10.4	Withdrawal state with delirium	6C40.5	Alcohol-induced delirium	591	Neurocognitive disorders
F10.40	without convulsions			596	Delirium
F10.41	with convulsions				(substance intoxication delirium, substance withdrawal delirium)

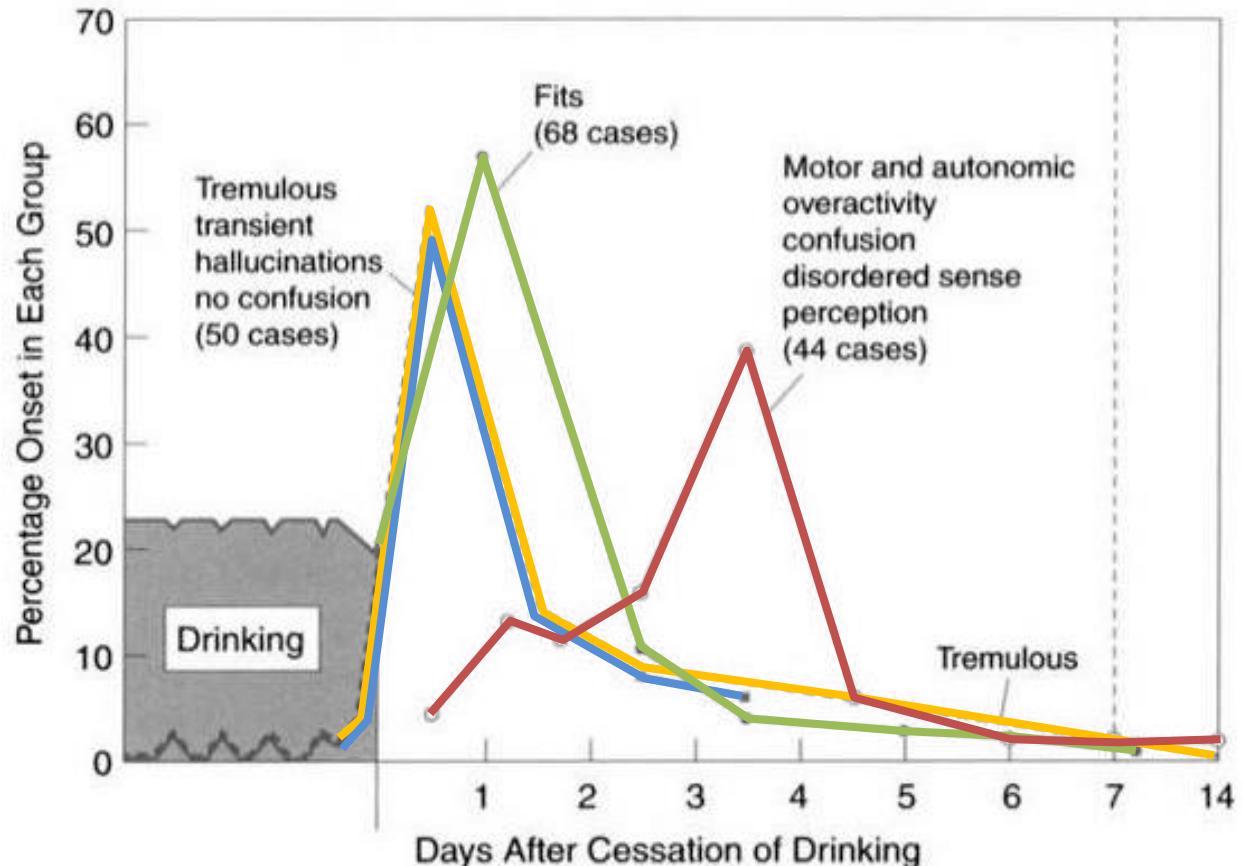
Priebeh syndrómu odňatia alkoholu (Victor & Adams, 1953)



Maurice Victor
(1920 – 1981)



Raymond D. Adams
(1911-2008)



Victor, M., and Adams, R.D. (1953). The effect of alcohol on the nervous system (chapter XXVIII). In: Merritt H.H. – Hare C.C. (eds.) Metabolic and Toxic Diseases of the Nervous System. Vol. 32 Baltimore: Williams and Wilkins Company, 1953. pp. 526–573

ICD-10 (WHO, 1989)
Chap. V

ICD-11 MMS (2018)
Chap. 06

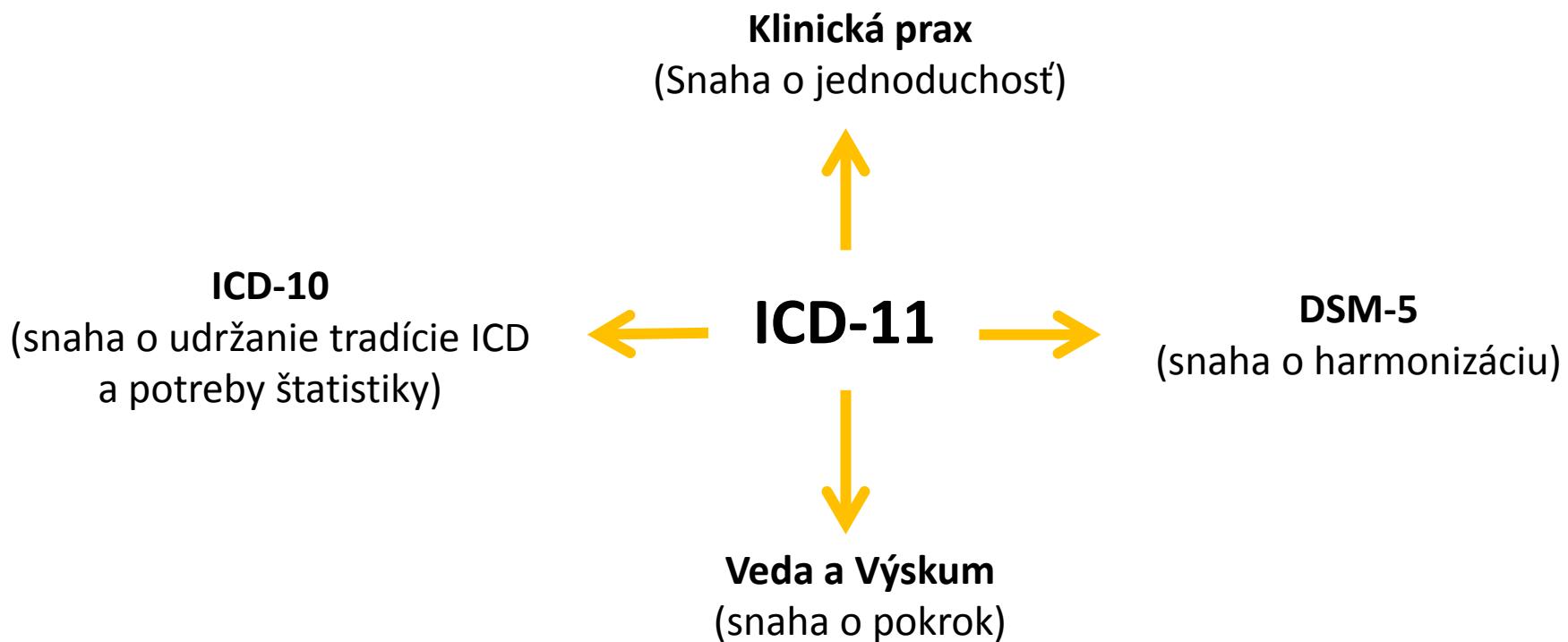
DSM-5 (2013)

F10.5 Psychotic disorder		6C40.6 Alcohol-induced psychotic disorder	87 Schizophrenia spectrum and other psychotic disorders
F1x.50 schizophrenia-like			110 Substance/medication-induced psychotic disorder
F1x.52 predominantly hallucinatory	6C40.60	with hallucinations	Alcohol-induced psychotic disorder
F1x.51 predominantly delusional	6C40.61	with delusions	with onset during intoxication
F1x.53 predominantly polymorphic	6C40.62	with mixed psychotic symptoms	with onset during withdrawal
F1x.56 mixed		6C40.67 unspecified	
F1x.54 predominantly depressive symptoms			
F1x.55 predominantly manic symptoms			

ICD-10 (WHO, 1989) Chap. V	ICD-11 MMS (2018) Chap. 06	DSM-5 (2013)
	Block L1 Neurocognitive disorders 6D7	591 Neurocognitive disorders
F10.6	Amnestic syndrome 6D72 6D72.1 6D72.10	Amnestic disorder Amnestic disorder due to psychoactive substances including medications Amnestic disorder due to use of alcohol 596 Delirium 627 Substance/medication-Induced major or mild neurocognitive disorder
F10.7	Residual and late-onset psychotic disorder	Block L2 Dementia 6D8
F10.73	Dementia	6D84 Dementia due to psychoactive substances including medications 6D84.0 Dementia due to use of alcohol

Záver

- ICD-11 stojí na pol ceste medzi ICD-10 a DSM-5,
je výsledkom kompromisov



Ďakujem za pozornosť

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IV. ročník Dní prof. V. Novotného v Bojniciach

11.-13.10.2019

