The following are excerpts from the U.S. Department of Veterans Affairs website (U.S.D.VeteransAffairs 2016)

What are the major revisions to the PTSD diagnosis?

Classification

PTSD (as well as Acute Stress Disorder) moved from the class of anxiety disorders into a new class of "trauma and stressor-related disorders." All of the conditions included in this classification require exposure to a traumatic or stressful event as a diagnostic criterion. The rationale for the creation of this new class is based upon clinical recognition of variable expressions of distress as a result of traumatic experience. The necessary criteria of exposure to trauma links the conditions included in this class; the homogeneous expression of anxiety or fear-based symptoms, anhedonic and dysphoric symptoms, externalizing anger or aggressive symptoms, dissociative symptoms, or some combination of those listed differentiates the diagnoses within the class (1).

Diagnostic criteria

Overall, the symptoms of PTSD are mostly the same in DSM-5 as compared to DSM-IV. A few key alterations include:

The three clusters of DSM-IV symptoms (APA 2000) are divided into four clusters in DSM-5 (APA 2013): intrusion, avoidance, negative alterations in cognitions and mood, and alterations in arousal and reactivity. DSM-IV Criterion C, avoidance and numbing, was separated into two criteria: Criteria C (avoidance) and Criteria D (negative alterations in cognitions and mood). The rationale for this change was based upon factor analytic studies, and now requires at least one avoidance symptom for PTSD diagnosis.

Three new symptoms were added:

Criteria D (negative alterations in cognitions and mood): persistent and distorted blame of self or others, and persistent negative emotional state

Criteria E (alterations in arousal and reactivity): reckless or destructive behavior

Other symptoms were revised to clarify symptom expression.

Criterion A2 (requiring fear, helplessness, or horror happen right after the trauma) was removed in DSM-5. Research suggests that Criterion A2 did not improve diagnostic accuracy (2).

A clinical subtype "with dissociative symptoms" was added. The dissociative subtype is applicable to individuals who meet the criteria for PTSD and experience additional depersonalization and derealization symptoms (3).

Separate diagnostic criteria are included for children ages 6 years or younger (preschool subtype) (4).

APA (2000). Diagnostic and statistical manual of mental disorders (4th ed., text rev.). doi:10.1176/appi.books.9780890423349., American Psychiatric Association Washington, DC: Author.

APA (2013). Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC: Author., American Psychiatric Association Washington, DC: Author.

U.S.D.VeteransAffairs (2016). "PTSD: National Center for PTSD." DSM-5 Diagnostic Criteria for PTSD Released; <http://www.ptsd.va.gov/professional/PTSD-overview/diagnostic_criteria_dsm-5.asp>. Retrieved September, 05, 2016.