

1. ABSTRACT

Objective: To examine the extent of agreement between current clinical diagnoses of DSM IV mood disorders, anxiety disorders and substance related disorders with diagnoses allocated by the CIDI-AUTO interview, using clinician's diagnosis as the reference standard.

Method: Subjects were 329 DSP patients presenting to the emergency department of a tertiary referral centre. The diagnostic instrument for psychiatric disorder was the CIDI-AUTO, Version 2.1, conducted by trained interviewers. Agreement between clinicians' diagnoses and 1 month and 12 month CIDI-DSM IV diagnoses were examined using kappa statistics. Sensitivity, specificity, positive and negative predictive values and likelihood ratios were also calculated.

Results: Agreement between Clinicians' and CIDI-DSM IV diagnoses was poor ($k < 0.40$) for anxiety, mood and substance related disorders. With clinicians' diagnoses treated as the reference standard, the CIDI-AUTO showed high sensitivity and low specificity in diagnosing anxiety and depressive disorders but low sensitivity and high specificity in diagnosing substance related disorders. Overall, the CIDI-Auto had high negative predictive value but low positive predictive value when compared to clinicians' diagnoses. There was only a slight shift from pre-test to post-test probability when CIDI was administered following clinical assessment.

Conclusions: Agreement statistics on DSM IV diagnoses between CIDI-AUTO and psychiatrist were found to be poor in this population of DSP patients. The results of this

study do not support the use of the CIDI-AUTO in place of clinical diagnosis by experienced psychiatrists in this clinical setting, as there appear to be noticeable discrepancies between clinicians' diagnoses and those allocated by the computerized instrument.