

# Discharge Instructions: Disruptive Mood Dysregulation Disorder (DMDD) in Children



Your child has been diagnosed with disruptive mood dysregulation disorder (DMDD). A child with DMDD is very irritable and angry most of the time. They often overreact to situations in an angry manner. The child may scream, throw things, or be physically aggressive. These extreme outbursts happen at least 3 times a week for a year or more.

Children with DMDD also have trouble getting along with others. They may not be able to make friends. Their negative behavior causes problems at home, in school, and around other children. To be diagnosed with DMDD, a child must be at least 6 years old with symptoms starting before age 10.

DMDD can severely affect your child's quality of life. Children with DMDD are more likely to develop depression and anxiety as they grow older. Psychological treatments, like talk therapy, can teach your child how to better manage their emotions. Your child's healthcare provider may also prescribe certain medicines to help with symptoms.

## Home care

You can help support your child by taking these steps:

- Learn all you can about DMDD. Studies are underway to better understand and treat the disorder.
- Work with your child's healthcare provider to choose the best treatments for your child. Ask questions and get a second opinion if needed.
- Be a part of your child's treatment. You can learn ways to better deal with your child's behavior. Reward your child for good behavior and be consistent.
- Make sure your child takes their medicines as directed. If your child has side effects, tell your child's healthcare provider right away.
- Tell your child's school and any other caregivers about your child's DMDD. They can help with treatment by working with you and your child.
- Take care of yourself. Reach out for support if you need it. Being in touch with other parents or caregivers who have a child with DMDD may be helpful. Also, ask your child's healthcare provider or school staff for resources to help your family.

## Call 988 in a crisis

Watch your child for signs of suicidal thoughts and behavior. Take all symptoms of suicide very seriously. Seek treatment right away. If your child is at immediate risk, don't leave them alone. Call or text 988. You will be connected to trained crisis counselors at the National Suicide Prevention Lifeline. An online chat option is also available at [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org). Lifeline is free and available 24/7.

## Follow-up care

Follow up with your child's healthcare provider as directed. Make sure your child doesn't miss any appointments with their therapist or other mental health provider.

To learn more, see the following resources:

- **National Suicide Prevention Lifeline** at [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org) or 800-273-TALK (800-273-8255). This resource is open 24 hours a day, 7 days a week. It can provide immediate crisis intervention and information on local resources. It's free and confidential.

- [National Institute of Mental Health](https://www.nimh.nih.gov) at [www.nimh.nih.gov](https://www.nimh.nih.gov) or 866-615-6464
- [National Alliance on Mental Illness \(NAMI\)](https://www.nami.org/help) at [www.nami.org/help](https://www.nami.org/help) or 800-950-6264

## When to get medical care

Children with mood disorders are more at risk for self-harm, including suicide. Get medical care right away if your child:

- Talks about wanting to die or makes plans to harm themselves
- Says they feel hopeless, trapped, or a burden to others
- Seems very anxious or is withdrawn
- Uses illegal drugs or drinks alcohol
- Sleeps a lot or very little
- Threatens to hurt others

**Call or text 988** if your child has suicidal thoughts, a plan to commit suicide or to harm others, and the means to carry out the plan.

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