



# Dissociative disorders

## Overview

Dissociative disorders are mental disorders that involve experiencing a disconnection and lack of continuity between thoughts, memories, surroundings, actions and identity. People with dissociative disorders escape reality in ways that are involuntary and unhealthy and cause problems with functioning in everyday life.

Dissociative disorders usually develop as a reaction to trauma and help keep difficult memories at bay. Symptoms — ranging from amnesia to alternate identities — depend in part on the type of dissociative disorder you have. Times of stress can temporarily worsen symptoms, making them more obvious.

Treatment for dissociative disorders may include talk therapy (psychotherapy) and medication. Although treating dissociative disorders can be difficult, many people learn new ways of coping and lead healthy, productive lives.

## Symptoms

Signs and symptoms depend on the type of dissociative disorders you have, but may include:

- Memory loss (amnesia) of certain time periods, events, people and personal information
- A sense of being detached from yourself and your emotions
- A perception of the people and things around you as distorted and unreal
- A blurred sense of identity
- Significant stress or problems in your relationships, work or other important areas of your life
- Inability to cope well with emotional or professional stress
- Mental health problems, such as depression, anxiety, and suicidal thoughts and behaviors

There are three major dissociative disorders defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), published by the American Psychiatric Association:

- **Dissociative amnesia.** The main symptom is memory loss that's more severe than normal forgetfulness and that can't be explained by a medical condition. You can't recall information about yourself or events and people in your life, especially from a traumatic time. Dissociative amnesia can be specific to events in a certain time, such as intense combat, or more rarely,

can involve complete loss of memory about yourself. It may sometimes involve travel or confused wandering away from your life (dissociative fugue). An episode of amnesia usually occurs suddenly and may last minutes, hours, or rarely, months or years.

- **Dissociative identity disorder.** Formerly known as multiple personality disorder, this disorder is characterized by "switching" to alternate identities. You may feel the presence of two or more people talking or living inside your head, and you may feel as though you're possessed by other identities. Each identity may have a unique name, personal history and characteristics, including obvious differences in voice, gender, mannerisms and even such physical qualities as the need for eyeglasses. There also are differences in how familiar each identity is with the others. People with dissociative identity disorder typically also have dissociative amnesia and often have dissociative fugue.
- **Depersonalization-derealization disorder.** This involves an ongoing or episodic sense of detachment or being outside yourself — observing your actions, feelings, thoughts and self from a distance as though watching a movie (depersonalization). Other people and things around you may feel detached and foggy or dreamlike, time may be slowed down or sped up, and the world may seem unreal (derealization). You may experience depersonalization, derealization or both. Symptoms, which can be profoundly distressing, may last only a few moments or come and go over many years.

### When to see a doctor

Some people with dissociative disorders present in a crisis with traumatic flashbacks that are overwhelming or associated with unsafe behavior. People with these symptoms should be seen in an emergency room.

If you or a loved one has less urgent symptoms that may indicate a dissociative disorder, call your doctor.

### Suicidal thoughts or behavior

If you have thoughts of hurting yourself or someone else, call 911 or your local emergency number immediately, go to an emergency room, or confide in a trusted relative or friend. Or call a suicide hotline number — in the United States, call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) to reach a trained counselor.

## Causes

Dissociative disorders usually develop as a way to cope with trauma. The disorders most often form in children subjected to long-term physical, sexual or emotional abuse or, less often, a home environment that's frightening or highly unpredictable. The stress of war or natural disasters also can bring on dissociative disorders.

Personal identity is still forming during childhood. So a child is more able than an adult to step outside of himself or herself and observe trauma as though it's happening to a different person. A child who learns to dissociate in order to endure a traumatic experience may use this coping mechanism in response to stressful situations throughout life.

## Risk factors

People who experience long-term physical, sexual or emotional abuse during childhood are at greatest risk of developing dissociative disorders.

Children and adults who experience other traumatic events, such as war, natural disasters, kidnapping, torture, or extended, traumatic, early-life medical procedures, also may develop these conditions.

## Complications

People with dissociative disorders are at increased risk of complications and associated disorders, such as:

- Self-harm or mutilation
- Suicidal thoughts and behavior
- Sexual dysfunction
- Alcoholism and drug use disorders
- Depression and anxiety disorders
- Post-traumatic stress disorder
- Personality disorders
- Sleep disorders, including nightmares, insomnia and sleepwalking
- Eating disorders
- Physical symptoms such as lightheadedness or non-epileptic seizures
- Major difficulties in personal relationships and at work

## Prevention

Children who are physically, emotionally or sexually abused are at increased risk of developing mental health disorders, such as dissociative disorders. If stress or other personal issues are affecting the way you treat your child, seek help.

- Talk to a trusted person such as a friend, your doctor or a leader in your faith community.
- Ask for help locating resources such as parenting support groups and family therapists.
- Look for churches and community education programs that offer parenting classes that also may help you learn a healthier parenting style.

If your child has been abused or has experienced another traumatic event, see a doctor immediately. Your doctor can refer you to a mental health professional who can help your child recover and adopt healthy coping skills.

By Mayo Clinic Staff

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