

Psychiatric comorbidity: A concept in need of a theory

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During the last few decades, the concept of psychiatric comorbidity, i.e., the co-occurrence of two or more mental disorders, has become widespread in clinical practice and psychiatric research. The purpose of this presentation is to offer a critical reflection on this concept. First, I trace the origin of the concept back to Feinstein's original concept of comorbidity in general medicine. Second, I demonstrate how the application of the concept of psychiatric comorbidity is confronted by a series of interrelated theoretical issues concerning inadequate definition, differential diagnostic confusion, and reification of mental disorders. Third, I illustrate how these theoretical issues have consequences for diagnostic assessment in everyday clinical practice and psychiatric research. Despite these profound issues, I argue that the concept of psychiatric comorbidity can be both appropriate and helpful in psychiatry. However, if it is to be applied in a scientifically meaningful way, its theoretical foundation must first be properly established. Thus, in the final part, I will try to establish this theoretical foundation, emphasizing *independence* of mental disorders as the defining criterion for psychiatric comorbidity and discussing how such independence can be determined.