Traits/Conditions	ASD1	ASD2	BPD	NPD	ADHD	OCD	C-PTSD
Social Communication	Difficulty with social reciprocity	More severe communication deficits	Intense, unstable communication	Requires excessive admiration	Interrupts, struggles with conversational turns	obsessions	Difficulty trusting, fear of interactions
Social Interactions	Awkward, might seem uninterested	Limited social interactions, greater deficits	Fear of abandonment, unstable relationships	Exploits relationships, feels superior	Difficulty reading social cues	Strained by compulsive behaviors	Withdrawn, vigilant, avoidance of intimacy
Emotional Regulation	Misunderstands or struggles to express emotions	More intense emotional responses	Extreme mood swings, emotional instability	Fragile self- esteem, reacts with disdain	Frequent mood swings, impulsive	Anxiety and distress dominate	Persistent sadness, explosive or inhibited anger
Behavioral Traits	Insistence on sameness, inflexible	Severe distress with changes	Impulsive, self- damaging behaviors	Arrogant, envious	Impulsive, disorganized	Repetitive behaviors to reduce anxiety	Avoidance, hypervigilance, self- destructive
Response to Criticism	May misunderstand or take criticism literally	Intense distress to criticism, may shut down	Highly sensitive to criticism, intense reaction	Angry or disdainful reaction, denies flaws	Defensive, struggles with feedback	Excessive worry, seeks reassurance	Extremely sensitive, perceives threat
Empathy	Challenges with perspective-taking	Greater difficulties with empathy	Oscillating empathy, intense responses	Lacks empathy, uses others	Variable empathy, often distracted		Empathy can be overwhelmed by trauma triggers
Interests and Activities	Intense specific interests	Restricted, repetitive behaviors	Quickly shifting interests, identity issues	Grandiose fantasies, self- focused activities	Varied interests, lacks follow-through		Activities overshadowed by managing symptoms
Need for Routine or Structure	High need for predictable routines	Dependent on strict routines	Craves but resists structure due to impulsivity	Desires control but not routine	Resists routines, seeks stimulation	Excessive need for order and precision	Desires predictability for safety

Traits/Conditions	ASD Level 1	ASD Level 2	BPD	NPD	ADHD	Bipolar Disorder	OCD
Social Communication	Difficulty	Marked deficits	Intense but	Requires	Struggles with	May have overly	May avoid social
	initiating social	in verbal and	unstable	excessive	maintaining	gregarious social	interactions due to
	interactions	nonverbal	relationships	admiration	conversations,	behavior during	fear of contamination
		communication			interrupting	manic phases	or obsession-related
							anxiety
Social Interactions	May appear	Limited social	Fear of	Feels superior,	Difficulty	Impaired judgment	Social interactions
	disinterested or	overtures,	abandonment,	exploits	reading social	in social interactions	may be strained due
	awkward	significant social	may cling or	relationships	cues, may	during mood	to compulsive
		deficits	distance abruptly		appear	episodes	behaviors or the
					inattentive		need to perform
							rituals
Emotional Regulation	Struggles with	Greater difficulty	Very poor	Appears	Impulsivity leads		High levels of anxiety
	understanding or	in controlling	emotional	confident but has		swings, ranging from	and distress related
	expressing	emotional	regulation,	fragile self-	outbursts,	manic highs to	to obsessions or
	emotions	responses	mood swings	esteem	frustrations	depressive lows	compulsions
D. I. T. T.		6				D. I I	
Behavioral Traits	Inflexible	Severe	Impulsive, self-	Arrogant	Impulsive	Risk-taking behaviors	Engages in repetitive
	behavior,	inflexibility,	damaging			during manic phases,	behaviors and rituals
	insistence on	distress at small	behaviors	others	with · .·	lethargy during	to reduce anxiety
	sameness	changes			organization	depressive phases	
Response to Criticism	May	Intense distress	Highly sensitive	Reacts with	May respond	Sensitivity to	May react with
	misunderstand	to criticism, may	to rejection or	anger or disdain,	defensively,	criticism, possible	excessive worry or
	criticism or take	shut down	criticism	denies flaws	struggle with	extreme reactions in	reassurance-seeking
	it literally				feedback	either mood state	behaviors
Empathy	Challenges with	More	Unstable	Lacks empathy,	Variable	Empathy may	May be overly
	perspective-	pronounced	empathy,	uses others for	empathy, often	fluctuate, particularly	concerned with the
	taking	difficulties in	oscillating	personal gain	distracted	affected during	consequences of
		empathy	perspective		during	mood extremes	their actions
					emotional		affecting others
					exchanges		
Interests and Activities	Intense focus on	Restricted,	Quickly shifting	Grandiose	Highly variable	Engages intensely in	Obsessions may
	specific interests	repetitive	interests,	fantasies, self-	interests,	activities, often with	dominate interests;
		patterns of	idealization and	focused activities		a high degree of	activities often
		behavior	devaluation		follow-through	variability between	revolve around
						mood states	managing anxiety
N 16 B 11 G					06		and compulsions
Need for Routine or Structure	High need for	Dependence on	Craves structure	Desires control	Often resists	Varies greatly; may	Excessive need for
	predictable	strict routines to	but may resist	but not	routines, seeks	desire routine but	order, symmetry, or
	routines	function	due to	necessarily 	novelty and	struggle to maintain	precise ways of
			impulsivity	routine	stimulation	it during mood	doing things due to
						swings	compulsive behavior
]						

Traits/Conditions	ASD1	ASD2	BPD	NPD	ADHD	OCD	C-PTSD	Suggested Treatment Protocols
Social Communication	Difficulty with social reciprocity	More severe communication deficits	Intense, unstable communication	Requires excessive admiration	Interrupts, struggles with conversatio nal turns	Compulsion s or obsessions affect communicati on	trusting, fear of interactions	Social skills training, communication therapy
Social Interactions	Awkward, might seem uninterest ed	Limited social interactions, greater deficits	Fear of abandonment, unstable relationships	Exploits relationships, feels superior	Difficulty reading social cues	Strained by compulsive behaviors	Withdrawn, vigilant, avoidance of intimacy	Group therapy, peer support groups
Emotional Regulation	Misunders tands or struggles to express emotions	More intense emotional responses	Extreme mood swings, emotional instability	Fragile self- esteem, reacts with disdain	Frequent mood swings, impulsive	Anxiety and distress dominate	Persistent sadness, explosive or inhibited anger	Cognitive-behavioral therapy (CBT), Dialectical behavior therapy (DBT), Medication
Behavioral Traits	Insistence on sameness, inflexible	Severe distress with changes	Impulsive, self- damaging behaviors	Arrogant, envious	Impulsive, disorganize d	Repetitive behaviors to reduce anxiety	Avoidance, hypervigilanc e, self- destructive	Behavioral interventions, exposure therapy, mindfulness training
Response to Criticism	May misunders tand or take criticism literally	to criticism,	Highly sensitive to criticism, intense reaction	Angry or disdainful reaction, denies flaws	Defensive, struggles with feedback	Excessive worry, seeks reassurance	Extremely sensitive, perceives threat	Assertiveness training, psychoeducation
Traits/Conditions	ASD1	ASD2	BPD	NPD	ADHD	OCD	C-PTSD	Suggested Treatment Protocols
Empathy	Challenges with perspectiv e-taking	difficulties with	Oscillating empathy, intense responses	Lacks empathy, uses others	Variable empathy, often distracted	Obsessions can interfere with empathy		Empathy training, emotional intelligence development
Interests and Activities	Intense specific interests	Restricted, repetitive behaviors	Quickly shifting interests, identity issues	Grandiose fantasies, self- focused activities		Dominated by compulsions and rituals		Structured activities, occupational therapy
Need for Routine or Structure	High need for predictabl e routines	Dependent on strict routines	Craves but resists structure due to impulsivity	Desires control but not routine	Resists routines, seeks stimulation	Excessive need for order and precision	Desires predictability for safety	Routine-building exercises environmental structuring

Traits/Conditions	ADHD	BPD	OCD	C-PTSD
Social Communication	Often interrupts, may struggle with maintaining conversational turns	Intense, sometimes inappropriate or rapid communication	Communication may be hindered by compulsions or need for exactness	May avoid social interactions or have difficulty trusting others
Social Interactions	Difficulty reading social cues, may appear inattentive or distractible	Intense and unstable interpersonal relationships, fear of abandonment	Social interactions strained by need to perform rituals or anxiety about obsessions	Often withdrawn or overly vigilant in social settings
Emotional Regulation	Impulsivity leads to mood swings, quick to frustration	Poor emotional regulation, extreme mood swings	High levels of anxiety, distress triggered by obsessions or failure to complete rituals	Difficulties managing emotions, may experience persistent sadness or explosive anger
Behavioral Traits	Impulsiveness, difficulty with organization and completing tasks	Impulsive, self- damaging behaviors, crisis- driven actions	Repetitive behaviors and compulsions dominate daily activities	May engage in avoidance behaviors, hypervigilance, or reckless actions
Response to Criticism	May respond defensively, struggles with criticism due to impulsivity	Highly sensitive to criticism, may react with intense emotion or hostility	Excessive worry about mistakes, seeks reassurance, may need rituals to manage stress from criticism	Extremely sensitive to criticism, may perceive it as a threat or react with fear or anger
Empathy	Often empathetic but may miss cues due to distractibility	Fluctuating empathy, intense but sometimes inappropriate emotional responses	Concerned about impact of their actions on others, but obsessions can interfere with perspective taking	High levels of empathy, but emotional responses can be overwhelmed by trauma triggers
Interests and Activities	Varied interests but struggles with follow- through, seeks novelty	Quickly shifting interests depending on identity and relational dynamics	Activities often revolve around managing compulsions and adhering to strict routines	Interests may be overshadowed by efforts to manage symptoms or avoid triggers
Need for Routine or Structure	Often resists routine due to seeking stimulation, inconsistent with tasks	Craves structure but may resist due to impulsive nature	Excessive need for order and structure, rituals must be performed precisely	May desire predictability to feel safe, routines can provide a sense of security

Traits/Conditions	ASD Level 1	ASD Level 2	ADHD	OCD
Social Communication	Difficulty initiating social interactions	More severe deficits; limited verbal/nonverbal communication	Interrupts, may struggle with conversational turns	Anxiety from obsessions may hinder communication
Social Interactions	Awkwardness, might seem disinterested	Greater difficulties; may avoid interactions	Misreads social cues, appears inattentive	Strain due to compulsive behaviors or rituals
Emotional Regulation	Misunderstanding emotional cues, flat affect	Intense emotional responses, frequent distress	Emotional impulsivity, frequent mood swings	High anxiety, distress linked to compulsions
Behavioral Traits	Inflexible, insistence on sameness	Requires routine, distressed by change	Impulsive, disorganized behavior	Repetitive behaviors to reduce anxiety
Response to Criticism	Literal interpretation, confused by feedback	May shut down or meltdown	Defensive, struggles with criticism	Excessive worry, seeks reassurance
Empathy	Challenges with perspective-taking	More pronounced difficulties with empathy	Often empathetic but distracted	Concerned about actions affecting others
Interests and Activities	Specific, intense focus	Restricted interests, repetitive behaviors	Varied interests, struggles with follow-through	Obsessions dominate interests
Need for Routine or Structure	High need for predictable routines	Dependent on strict routines	Resists routines, seeks novelty	Excessive need for order, precise routines

Traits/Conditions	ADHD	BPD
Social Communication	Often interrupts, struggles with conversational turns	Intense, may have rapid and oversharing communication
Social Interactions	Difficulty reading social cues, may appear inattentive	Intense relationships, fear of abandonment, may oscillate between extremes
Emotional Regulation	Impulsivity leads to frequent mood swings, struggles with frustration	Very poor emotional regulation, marked by intense mood swings
Behavioral Traits	Impulsive actions, disorganization, difficulty with task completion	Impulsive, self-damaging behaviors, driven by emotional states
Response to Criticism	May respond defensively, difficulty accepting feedback	Highly sensitive to criticism, may react with intense emotions or anger
Empathy	Often empathetic, may miss cues due to distractibility	Empathy can fluctuate, intensely empathetic but may misread intentions
Interests and Activities	Varied interests, difficulty with follow- through due to distractibility	Quickly shifting interests based on identity and relational issues
Need for Routine or Structure	Often resists routines, seeks novelty and stimulation	Desires structure but may resist due to impulsivity and identity disturbances

Traits/Conditions	BPD	C-PTSD
Nature of Trauma	Not specifically related to trauma, but traumatic events can exacerbate symptoms	Results from prolonged, repeated traumatic events, particularly in childhood
Emotional Regulation	Extreme emotional swings, intense episodic depression, anger, and anxiety	Persistent sadness, explosive anger, or inhibited anger, difficulties managing emotions
Interpersonal Relationships	Intense, unstable relationships with fears of abandonment and alternating between extremes of idealization and devaluation	Difficulties in relationships due to mistrust, need for safety, and avoidance of intimacy
Self-Perception	Unstable self-image, feelings of emptiness, and severe fear of rejection	Negative self-perception including feelings of helplessness, shame, guilt, stigma, and a sense of being different from others
Behavioral Traits	Impulsive, self-destructive behaviors (e.g., binge eating, substance abuse, reckless driving)	May engage in avoidance behaviors, reckless or self-destructive behavior similar to BPD but often driven by a lack of safety and security
Response to Stress/Criticism	Highly sensitive to criticism, leading to rapid changes in mood, often with intense anger or aggression	Sensitivity to criticism can provoke a fear response or a sense of being threatened, leading to withdrawal or avoidance
Symptoms of Dissociation	Transient, stress-related paranoia or dissociation	More persistent dissociative symptoms as a result of prolonged trauma exposure
Sense of Security	Chronic feelings of emptiness and instability	Persistent concerns about safety and security, both physically and emotionally
Treatment Focus	Focus on managing emotions, improving relationships, and reducing impulsive behavior (often through DBT)	Trauma-focused therapies to address the traumatic origins of symptoms, improve emotional regulation, and rebuild trust in relationships

Traits/Conditions	C-PTSD	BPD	GAD
Core Features	Results from prolonged exposure to traumatic events, often in childhood	Emotional instability, fear of abandonment, unstable relationships	Excessive, uncontrollable worry about everyday matters
Emotional Regulation	Difficulties managing emotions, may experience persistent sadness or explosive anger	Intense emotional swings, feelings of emptiness	Persistent and excessive anxiety and worry
Interpersonal Relationships	Difficulties due to mistrust, safety concerns, avoidance of intimacy	Intense, unstable relationships, oscillating between extremes	Generally stable but strained due to worry and neediness
Identity/Self-Perception	Negative self-perception, feelings of helplessness and detachment	Unstable self-image and sense of self, identity confusion	Typically stable self-identity but plagued by insecurities
Behavioral Traits	Avoidance behaviors, hypervigilance, self-destructive behavior	Impulsive, self-damaging behaviors	Avoidance of stressful situations due to anxiety
Response to Stress/Criticism	Extreme sensitivity, perceiving threat, withdrawal or avoidance	Highly sensitive to criticism and rejection, intense reaction	Excessive worry and tension in response to stress
Physical Symptoms	May include symptoms typical of PTSD, such as heightened startle response	Stress-related physical symptoms like headaches, chronic pain	·
Coping Mechanisms	May involve dissociation, emotional numbing	Risky behaviors (substance abuse, self-harm) to manage emotions	Overplanning, seeking reassurance, excessive preparation

Traits/Conditions	GAD (Generalized Anxiety Disorder)	Hypoglycemia	Hyperglycemia
Core Features	Persistent, excessive worry about various aspects of life	Low blood glucose levels causing acute symptoms	High blood glucose levels causing acute or chronic symptoms
Common Symptoms	Excessive anxiety, restlessness, fatigue	Shakiness, sweating, confusion, irritability	Frequent urination, increased thirst, fatigue
Emotional Symptoms	Irritability, nervousness, sense of dread	Anxiety, mood changes, irritability	May include irritability, mood changes
Physical Symptoms	Muscle tension, fatigue, sleep disturbances	Palpitations, tremors, sweating, weakness	Blurred vision, slow healing of cuts, weakness
Cognitive Symptoms	Difficulty concentrating, worrying about making mistakes	Confusion, difficulty concentrating, slurred speech	May experience confusion in severe cases
Onset	Gradual, can develop over time	Sudden, especially if related to medication, lack of eating	Gradual, may worsen over days or weeks
Duration	Chronic, long-term without treatment	Resolves quickly once glucose levels are normalized	Can persist if not treated, potentially leading to more serious complications
Triggers	Stress, life events, genetic predisposition	Skipping meals, excessive insulin, strenuous exercise	Poorly managed diabetes, illness, stress, dietary choices
Management/Treatm ent	Psychotherapy (CBT), medications (antidepressants, anxiolytics), lifestyle adjustments	Immediate carbohydrate intake, adjusting meal or medication schedules	Adjusting insulin or medication doses, dietary changes, hydration
Risk Factors	Family history of anxiety disorders, personality, excessive stress	Diabetes, certain medications, inconsistent meal schedules	Diabetes, insulin resistance, obesity, sedentary lifestyle

Туре	Description	Core Symptoms	Suggested Treatments
1. Classic ADHD	Characterized by hyperactivity, restlessness, and impulsivity.	Poor attention span, hyperactivity, distractibility, impulsivity.	Stimulant medications, high- protein/low-carbohydrate diet, exercise.
2. Inattentive ADHD	Previously known as ADD, lacking hyperactivity.	Inattention, easily distracted, disorganized, procrastination.	Stimulants, atomoxetine, possibly antidepressants, cognitive behavioral therapy.
3. Overfocused ADHD	Trouble shifting attention; gets stuck in loops of negative thoughts or behaviors.	Excessive worrying, oppositional behavior, compulsiveness.	Treatment with both stimulants and serotonin modulating medications.
4. Temporal Lobe ADHD	Involves abnormalities in the temporal lobes and associated aggressive or inattentive behavior.	Irritability, aggression, memory problems.	Combination of anticonvulsants, stimulants, and sometimes, antidepressants.
5. Limbic ADHD	Marked by moodiness and low energy. Associated with the limbic system of the brain.	Sadness, low energy, frequent feelings of hopelessness, low self- esteem.	Treatment with stimulants and antidepressants.
6. Ring of Fire ADHD	Appears as a ring of increased activity around the brain in SPECT scans. Highly overactive mind.	Oppositional behaviors, excessive moodiness, impulsivity.	Avoidance of standard stimulants (which can worsen symptoms), use of mood stabilizers and antiseizure medications.