



Normal mental development

Developed basic functions of rational intelligence (e.g., sensual recognition, linguistic expression, memory, shifting attention). Developed basic functions of emotional intelligence (e.g., attachment). Developed reflexes to sensory stimuli. Developed motion control.	Developed higher rational intelligence functions (e.g., consistency of thinking, abstract thinking, logics, semantics). Developed higher emotional intelligence functions (e.g., emotion recognition, emotion expression, stable maintenance of feelings). Mood background adequate to the situation. Recognition of more subtle sensory stimuli (e.g., facial expressions, visuospatial).	Flexible, situation-adequate personality (relationship) traits
Will formation		

Fig. 3. Taxonomic classification scheme for mental disorders.

The year scale reflects the time of CNS damage. Only in the case of disorders in dark gray boxes does it coincide with the time of onset of symptoms.

Dark gray – congenital and mental disorders occurring in childhood.

Lighter gray – mental disorders occurring in adolescence.

White – mental disorders that can occur during adolescence and at any time later.

Z – zygote.

OCD – obsessive-compulsive disorder.

*various psychosomatic symptoms: various forms of somatoform autonomic dysfunction, somatoform pain disorder, functional tics, sleep disorders, sexual dysfunction, eating disorders associated to psychological disturbances, dissociative function “drop out” disorders.