Complicated Grief Signs and Symptoms

In the first two to three months after a loss, the symptoms of complicated bereavement will be almost impossible to detect. At this stage, the symptoms of grief are expected to be pervasive and intense, and deep grieving is not necessarily a sign of emotional and psychological imbalances. But if the grief seems to intensify as more time passes, or persists for six months or longer, complicated grief may have developed.

The signs of complicated grief include:

- Obsession with the departed person, expressed through speech and behavior
- Deep, unbearable sadness that never seems to lift
- Pessimistic expressions of doom, gloom, and despair about life in general
- Irritability and a hair-trigger temper that makes the person difficult to communicate with
- Sleeping problems (insomnia, or sleeping at odd hours)
- Lack of attention to grooming and personal appearance
- Refusing to leave the home
- Persistent anger and bitterness toward the world
- Withdrawal from social interactions and activities the individual used to enjoy
- Denial and defensiveness when asked about the grief
Distracted performance on the job, or an inability to engage with or take interest in others
Worsening of any preexisting mental health conditions (depression, PTSD, anxiety disorder, substance abuse, etc.)
Strong attachment to mementos and reminders of the departed person or, conversely, a strong aversion to those reminders
Inability to manage daily affairs in a wide range of contexts (work, school, financial, parental, etc.)
Behavior that seems reckless, impulsive, or potentially self-destructive
Talk of suicide, or actual suicide attempts

Beyond a certain point none of this is healthy or normal (thoughts of suicide are always alarming), and it would be a mistake to assume the grief will fade with time. While it is understandable that friends and family might want to help an individual showing signs of complicated grief, working alone they won’t make much of a difference.

The person can benefit from the support of loved ones, especially if they’ve been a bit far away since the loss. But people suffering the symptoms of complicated bereavement need therapy first and foremost, and the longer they go without it the longer their heartbreak will continue.

Diagnosing Complicated Grief
Despite not being a clinical disorder, complicated grief is recognized as a serious condition by mental health professionals. Nevertheless, without official sanction no firm and fast diagnostic scheme can be instituted, leaving diagnosis standards for complicated grief disorder open to interpretation.

However, there has been quite a bit of research on this topic carried out by interested parties, and from the data collected diagnostic criteria have been proposed. In one influential 1997 study, a team of mental health professionals, writing in the Journal of American Psychiatry, recommended the **seven-trait diagnostic standard for complicated grief disorder**. Their proposal was based on their research into the reactions of spouses who’d lost their partners and afterward experienced significant periods of grief.

By comparing grief symptoms experienced after six months and 14 months, they identified seven symptoms (out of 30 studied) that remained strongly present in a subset of study subjects, all of whom seemed to be grieving continuously for far longer than expected. Those seven distinctive symptoms of complicated grief included:

1. Intrusive memories or fantasies about the deceased loved one
2. Strong pangs of emotion related to the lost relationship
3. Powerful yearnings or wishes that the departed person was still present
4. Intense feelings of loneliness or emptiness
5. Avoidance of people, places, or activities that remind the grief sufferer of the deceased
6. Recurrent sleep interference and disturbance
7. Significant loss of interest in work, social, personal, or recreational activities

The researchers asserted that experiencing three of these seven symptoms over any one-month period, 14 months or more after the death, should be sufficient to make a complicated grief diagnosis.

Most mental health experts now agree that six months of unrelenting grief is enough to establish the presence of complicated grief, and that 14 months is too long to wait before seeking treatment. Additional defining symptoms have also been included in more recent lists suggesting criteria for diagnosis.

But even in these newer proposals, the telltale signs of complicated grief uncovered in the 1997 study have been retained, and experiencing three or more distinctive symptoms in a one-month period is still the preferred requirement for a complicated bereavement disorder diagnosis.

In the end, mental health professionals may still use some degree of discretion when evaluating people for unhealthy bereavement. But research has helped clarify the specifics of complicated grief, making it easier for psychiatrists and psychologists to recognize complicated
grief disorder when it is present.