

10

Pyromania Clinical Practice Workbook

A clinically branded, function-preserving edition retaining the original exercises, psychoeducation, checklists, logs, planning tools, and response space.

DSM-5-TR · ICD-11 CLINICAL ALIGNMENT

1 · Self-Assessment

2 · Identifying Triggers

3 · Understanding Consequences

4 · Delaying Tactics

5 · Self-Compassion

6 · Understanding Cognitive Distortions

7 · Identifying Values

8 · Imaginal Exposure

9 · Boundaries With Yourself

10 · Analyzing Relapses

How to use this workbook

- Use this workbook selectively and collaboratively; it is educational and does not replace individualized assessment, diagnosis, treatment, medical care, or crisis services.
- Skip, pause, or modify any activity that increases distress, danger, shame, or loss of functioning. Adapt language for culture, disability, neurodivergence, health, resources, and lived context.
- Ratings in this workbook are reflection tools unless a named, validated measure and interpretation are explicitly provided.
- Assess current safety, suicidal and homicidal thoughts, self-harm, intoxication or withdrawal, violence, exploitation, psychosis, mania, medical instability, and ability to meet basic needs when relevant. Use local emergency or crisis procedures for imminent risk.
- Activities involving exposure, trauma detail, urges, means, disclosure, or relationship repair require appropriate competence, informed consent, pacing, and safety planning; a worksheet is not a substitute for these safeguards.
- Do not use real ignition sources or conduct unsupervised fire-related exposure. Current intent, preparation, access to ignition materials, recent fire-setting, or danger to people, animals, or property requires immediate specialist risk management and emergency coordination.

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Self-Assessment

The following are common signs you might be struggling with pyromania. Rate each statement on a scale from 1-5 (1 being “strongly disagree” and 5 being “strongly agree”):

Statement	Rate (1-5)
1. “I feel an irresistible urge to set fires.”	1-2-3-4-5
2. “I experience intense excitement and arousal before starting a fire.”	1-2-3-4-5
3. “I set fires intentionally and deliberately.”	1-2-3-4-5
4. “I often think about fire and have a fascination with flames.”	1-2-3-4-5
5. “I have set multiple fires over time, not just a one-time occurrence.”	1-2-3-4-5
6. “I use fire setting as a way to cope with stress, anger, or other negative emotions.”	1-2-3-4-5
7. “I find myself collecting fire-starting materials, such as matches or lighters.”	1-2-3-4-5
8. “I sometimes feel guilt or remorse after setting a fire, but I still continue to do it.”	1-2-3-4-5
9. “I often have difficulty resisting the urge to start a fire, even if I know it’s dangerous.”	1-2-3-4-5
10. “I struggle to explain why I set fires; it’s an urge I can’t control.”	1-2-3-4-5

Score: _____/50

The score reflects the severity and impact of your pyromania.

1. What statements resonated with you more than the others?

2. Which of the identified patterns or habits from the assessment do you feel most interested in working on changing?

According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5), Pyromania is classified under "Disruptive, Impulse-Control, and Conduct Disorders." The DSM-5 outlines specific diagnostic criteria for Pyromania, which include:

- A. Deliberate and purposeful fire setting on more than one occasion.
- B. Tension or affective arousal before the act.
- C. Fascination with, interest in, curiosity about, or attraction to fire and its situational contexts (e.g., paraphernalia, uses, consequences).
- D. Pleasure, gratification, or relief when setting fires or when witnessing or participating in their aftermath.
- E. The fire setting is not done for monetary gain, as an expression of sociopolitical ideology, to conceal criminal activity, to express anger or vengeance, to improve one's living circumstances, in response to a delusion or hallucination, or as a result of impaired judgment (e.g., in major neurocognitive disorder, intellectual disability [intellectual developmental disorder], substance intoxication).
- F. The fire setting is not better explained by conduct disorder, a manic episode, or antisocial personality disorder.

Identifying Triggers

1. Identify Triggers: Reflect on specific situations, emotions, thoughts, or environments that make you feel the urge to set fires. The following are some examples. Check off the ones that apply or add more to the list:

- ☐ Feeling intense boredom.
- ☐ Experiencing high levels of stress.
- ☐ Dealing with unresolved anger or rage.
- ☐ Witnessing others set fires.
- ☐ Being around flammable materials.
- ☐ Engaging in substance abuse.
- ☐ Feeling a lack of control in life.
- ☐ Struggling with mental health disorders, such as depression or anxiety.
- ☐ Craving excitement or thrill-seeking behavior.
- ☐ Feeling isolated or lonely.
- ☐ Being exposed to media depicting fires or arson.
- ☐ Seeking to escape from reality or problems.
- ☐ Being influenced by peers who engage in similar behaviors.
- ☐ Experiencing a lack of parental supervision or guidance.
- ☐ Dealing with feelings of inadequacy or low self-esteem.
- ☐ Being in an environment where fire-setting materials are easily accessible.
- ☐ Having difficulty managing strong emotions.
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

2. Environmental Changes: Modify your environment to reduce access to fire-starting materials. The following are some suggestions. Check off the ones that may be helpful or add more to the list:

- ☐ Keep lighters in locked drawers or cabinets.
- ☐ Store matches in a secure, out-of-reach place.
- ☐ Store gasoline, lighter fluid, and other flammable liquids in locked containers.
- ☐ Place candles in locked storage when not in use.
- ☐ Replace candles with electric or battery-operated alternatives.
- ☐ Place fire detectors in strategic locations around the house.
- ☐ Furnish the home with fire-resistant materials and fabrics.
- ☐ Place locks on cabinets storing any potential fire-starting materials.
- ☐ Identify and remove objects or situations that trigger urges.
- ☐ Establish a consistent daily routine to reduce downtime.
- ☐ _____
- ☐ _____
- ☐ _____

Understanding Consequences

1. List Recent Fire-Setting Episodes: Write down a list of recent fire-setting episodes. Include details such as the date, time, location, and circumstances of the fire.

Example:

- *Date and Time: May 10, 2024 - 8:00 PM*
- *Location: Abandoned warehouse*
- *Circumstances: Feeling stressed and impulsive*

2. Describe Immediate Feelings: Reflect on how you felt immediately after each fire-setting episode. Note any positive or negative emotions.

Example: Initial excitement and adrenaline rush, followed by guilt and regret

3. Identify Short-Term Effects: Consider the short-term effects of each fire-setting episode on your life. Think about impacts on your mood, relationships, and daily activities.

Example: Temporary mood boost, increased tension with family, distraction from responsibilities

4. Reflect on Long-Term Impact: Reflect on how ongoing fire-setting has affected your life over time. Consider financial, emotional, relational, and psychological impacts.

Example:

- *Financial Impact: Cost of damages and potential fines*
- *Emotional Impact: Chronic stress, anxiety, and feelings of shame*
- *Relational Impact: Strained relationships with family and friends*
- *Psychological Impact: Lowered self-esteem and feelings of helplessness*

Financial Impact	
Emotional Impact	
Relational Impact	
Psychological Impact	

5. Visualize the Future with Continued Behavior: Imagine what your life will look like if you continue your fire-setting habits. Visualize the potential future consequences in detail.

Example: Increased legal issues, further isolation from loved ones, potential for severe injury or harm

6. Visualize the Future with Positive Change: Imagine what your life could look like if you successfully manage and reduce fire-setting behaviors. Visualize positive outcomes and improvements.

7. Write a Commitment Statement: Write a statement committing to addressing and reducing the consequences of pyromania. Sign and date it to reinforce your commitment.

Delaying Tactics

1. Identifying Delaying Tactics: List healthy delaying activities to delay the urge until it passes. The following are some suggestions. Check off the ones that may be helpful or add more to the list:

- ☐ **Deep Breathing:** Practice slow, deep breaths to calm your mind.
- ☐ **Physical Exercise:** Engage in activities like running, or walking.
- ☐ **Call a Friend:** Talk to someone you trust to distract yourself.
- ☐ **Read a Book:** Immerse yourself in a good story.
- ☐ **Watch a Movie:** Find a captivating film or series to watch.
- ☐ **Journaling:** Write about your feelings and thoughts.
- ☐ **Art Therapy:** Draw, paint, or engage in any creative activity.
- ☐ **Take a Walk:** Go for a walk in a park or around your neighborhood.
- ☐ **Cooking or Baking:** Try a new recipe or bake your favorite treat.
- ☐ **Clean or Organize:** Tidy up your space or reorganize a room.
- ☐ **Gardening:** Spend time with plants or start a small garden.
- ☐ **Mind Puzzles:** Solve crosswords, Sudoku, or other puzzles.
- ☐ **Pet Care:** Spend time with pets or volunteer at an animal shelter.
- ☐ **Crafting:** Engage in knitting, sewing, or other crafts.
- ☐ **Take a Bath:** Relax in a warm bath with soothing scents.
- ☐ **Podcast:** Listen to a podcast on a topic that interests you.
- ☐ **Ice Cubes:** Hold an ice cube in your hand until it melts.
- ☐ **Play with a Stress Ball:** Squeeze a stress ball to relieve tension.
- ☐ **Memory Game:** Play a memory game or recall positive memories.
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

2. Mindfulness and Grounding Techniques: Use mindfulness and grounding techniques to stay present and focused. The following are some examples.

Breathing Exercise

- Find a quiet and comfortable place to sit.
- Close your eyes and take a deep breath in through your nose for a count of four.
- Hold the breath for a count of four.
- Exhale slowly through your mouth for a count of six.
- Repeat this cycle for 5-10 minutes, focusing on the sensation of your breath.

Body Scan Meditation

- Lie down or sit comfortably with your eyes closed.
- Start at the top of your head and gradually move down to your toes.
- Focus on each part of your body, noticing any sensations, tension, or discomfort.
- Breathe into each area, imagining the breath flowing to that part of your body.
- Spend about 1-2 minutes on each body part.

Mindful Observation

- Choose an object in your environment (e.g., a plant, a piece of artwork).

- Spend 5 minutes observing this object as if you are seeing it for the first time.
- Notice the colors, shapes, textures, and any other details.
- If your mind wanders, gently bring your focus back to the object.

5-4-3-2-1 Technique

- Identify 5 things you can see around you.
- Identify 4 things you can touch.
- Identify 3 things you can hear.
- Identify 2 things you can smell.
- Identify 1 thing you can taste.

Physical Grounding

- Sit or stand comfortably.
- Press your feet firmly into the ground.
- Notice the sensation of the floor beneath your feet.
- Gradually tense and then relax different muscle groups in your body, starting from your feet and moving upwards.

Sensory Grounding

- Hold a small object in your hand (e.g., a stress ball, a smooth stone).
- Focus on the texture, temperature, weight, and shape of the object.
- Move the object between your fingers, noticing every detail.

Mental Grounding

- Think of a safe and calm place (e.g., a beach, a forest).
- Imagine yourself in this place, using all your senses.
- What do you see? Hear? Smell? Feel? Taste?
- Spend 5-10 minutes visualizing this place in detail.

Movement Grounding

- Stand up and stretch your body.
- Walk around the room, noticing each step.
- Pay attention to how your feet feel as they touch the ground.
- Stretch your arms, roll your shoulders, and move your neck gently.

Self-Compassion

1. Recognizing Your Struggles: Acknowledge the difficulties you face with pyromania without judgment.

- Example: *"I struggle with urges to set fires, and this causes me distress and affects my relationships."*

2. Treating Yourself with Kindness: Practice self-kindness by offering yourself the same care and support you would give to a friend.

- Example: *"Instead of being harsh on myself, I remind myself that I am trying my best to overcome this challenge."*

3. Fostering Understanding and Acceptance: Cultivate an attitude of understanding and acceptance toward your experiences and emotions.

- Example: *"I understand that my urges are part of my condition, and I accept that it's okay to seek help and take steps to improve."*

4. Self-Compassionate Statements: Write down statements that reflect self-compassion and use them regularly.

- Example: *"It's okay to have these urges; I am working on managing them, and I deserve support and kindness."*

6. Self-Soothing Techniques: Identify and practice techniques that help soothe and comfort you. The following are some suggestions. Check off the ones that may be helpful or add more to the list:

- ☐ **Positive Affirmations:** Repeat affirmations that promote self-compassion, such as "I am worthy of love and care" or "I am capable of overcoming challenges."
- ☐ **Visualization:** Imagine a peaceful place or scenario that makes you feel safe and relaxed. Visualize yourself in this place whenever you feel stressed.
- ☐ **Taking a Warm Bath:** Use warm water and perhaps some calming bath salts or essential oils to relax your muscles and mind.
- ☐ **Engaging in a Hobby:** Spend time doing something you enjoy, whether it's painting, knitting, gardening, or another activity that brings you joy.
- ☐ **Hugging a Pillow:** Hugging a pillow or soft object can provide a sense of comfort and security.
- ☐ **Hugging Yourself:** Wrap your arms around yourself and give a gentle squeeze, offering comfort and reassurance.

- ☐ **Self-Massage:** Gently massage your shoulders, neck, or feet to relieve tension and show care for your body.
- ☐ **Hand on Heart:** Place your hand over your heart and take a few deep breaths, feeling the warmth and connection.
- ☐ **Soothing Touch:** Gently stroke your arms or face, providing a comforting and nurturing sensation.
- ☐ **Mirror Affirmations:** Look into a mirror and speak positive affirmations to yourself, reinforcing your self-worth.
- ☐ **Self-Compassionate Letter:** Write a letter to yourself from the perspective of a compassionate friend, acknowledging your struggles and offering support.
- ☐ **Comforting Blanket:** Wrap yourself in a soft blanket, creating a sense of safety and warmth.
- ☐ **Create a Self-Care Box:** Fill a box with items that bring you comfort, such as favorite books, candles, or mementos, and turn to it during difficult times.
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Understanding Cognitive Distortions

Cognitive distortions are irrational or biased ways of thinking that can negatively influence emotions and behavior.

Cognitive Distortion	Examples
All-or-Nothing Thinking: Seeing things in black-and-white terms, with no middle ground.	"If I can't completely stop thinking about setting fires, I might as well give up trying."
Overgeneralization: Making broad conclusions based on a single event.	"I had a strong urge today, which means I'll never be able to control my impulses."
Mental Filter: Focusing only on the negative aspects of a situation while ignoring the positive.	"I slipped up once, so all my progress is worthless."
Discounting the Positive: Rejecting positive experiences or accomplishments as insignificant.	"Even though I resisted the urge yesterday, it doesn't count because it was just one day."
Jumping to Conclusions: Making negative interpretations without evidence.	"People will think I'm a bad person if they know about my urges."
Catastrophizing: Expecting the worst-case scenario to happen.	"If I don't manage this urge right now, everything will fall apart."
Emotional Reasoning: Believing that feelings reflect reality.	"I feel out of control, so I must be completely out of control."
Should Statements: Having rigid rules about how you or others should behave.	"I should be able to stop these urges easily. If I can't, I'm a failure."
Labeling: Assigning negative labels to yourself or others.	"I'm a pyromaniac, so I'll never change."
Personalization: Blaming yourself for events outside your control.	"It's my fault that people don't trust me because of my past actions."

1. Identify the Distortion: Recognize the specific cognitive distortion you are experiencing.

Thought: _____

Type of cognitive distortion: _____

2. Evaluate the Impact: Consider the impact of the distorted thought on your feelings and behavior.

- *Example: "Thinking that I'll never improve makes me feel hopeless and less motivated."*

3. Gather Evidence: Look for evidence that supports or contradicts the distorted thought.

- *Example: "I have had days where I managed my urges well. This shows I can make progress."*

Evidence for	Evidence against

4. Generate Alternatives: Think of alternative, more balanced thoughts.

- *Example: "Even if I struggle sometimes, it doesn't mean I'm not making progress."*

Identifying Values

Values are deeply held beliefs about what is important and meaningful in life. They guide your behavior and decisions. Knowing your values can help you make choices that are consistent with your true self and goals.

1. Reflect on Meaningful Moments: Think about times when you felt truly fulfilled and satisfied. What values were you honoring during these moments?

- Example: *"I felt fulfilled when I volunteered at a community center, which aligns with my value of helping others."*

2. Consider Role Models: Identify people you admire. What qualities or values do they embody that you respect?

- Example: *"I admire my friend for their resilience and honesty, which are values I want to embody."*

3. Explore Different Areas of Life: Consider what is important to you in various areas such as relationships, career, personal growth, and health.

- Example: *"In my relationships, I value trust and communication. In my career, I value creativity and making a positive impact."*

4. List Your Core Values: Write down the values that resonate most with you.

- Example: *"Integrity, compassion, resilience, personal growth, and creativity."*

5. Identify Current Behaviors: Reflect on your current behaviors and how they align or conflict with your values.

- Example: *"Setting fires conflicts with my value of personal growth and helping others."*

6. Set Value-Based Goals: Define specific goals that align with your values and help you manage your urges.

- Example: *"My goal is to develop healthier coping strategies that align with my value of personal growth."*

7. Develop Action Plans: Create action plans to achieve your value-based goals.

- Example: *"I will attend therapy sessions, practice mindfulness, and engage in activities that support my personal growth."*

Imaginal Exposure

Imaginal exposure is a cognitive-behavioral therapy (CBT) technique that involves vividly imagining scenarios that trigger your urges in a controlled and safe environment. This process helps desensitize you to these triggers and reduces the power they hold over you.

1. Create a Safe Environment: Choose a quiet, comfortable place where you can focus without interruptions.

- Example: *"I will sit in my bedroom with the door closed and ensure I won't be disturbed for the next 30 minutes."*

2. Identify Triggers: List specific situations or thoughts that trigger your urge to set fires.

- Example: *"Seeing dry leaves in the backyard, smelling gasoline, feeling stressed after an argument."*

3. Write Detailed Scenarios: Describe the triggering situation in vivid detail, including sights, sounds, smells, and emotions.

- Example: *"I see a pile of dry leaves in the backyard on a windy day. The leaves rustle as the wind blows, and I smell the earthy scent of the yard. I feel a strong urge to set them on fire, imagining the flames and the crackling sound."*

4. Gradual Exposure: Start with less intense scenarios and gradually move to more triggering ones.

- *Example: "Begin with imagining seeing dry leaves (low intensity), then progress to imagining holding a match near the leaves (medium intensity), and finally imagine lighting the match (high intensity)."*

5. Relaxation Techniques: Practice relaxation techniques before starting to help manage anxiety. The following are some suggestions. Check off the ones that may be helpful or add more to the list:

- ☐ **Deep Breathing:** Take slow, deep breaths, inhaling deeply through the nose and exhaling slowly through the mouth.
- ☐ **Progressive Muscle Relaxation:** Tense and then slowly relax each muscle group, starting from the toes and moving up to the head.
- ☐ **Autogenic Training:** Use verbal commands to induce a state of relaxation, such as "My arms are heavy and warm."
- ☐ **Self-Compassion Statements:** Use self-soothing and compassionate statements, such as "It's okay to feel this way" or "I am safe and in control."

- ☐ **Counting Backwards:** Slowly count backward from 100 or another high number.

☐ _____

☐ _____

6. Imaginal Exposure Session: Close your eyes and vividly imagine the scenario, engaging all your senses. Stay in the imagined situation for 5-10 minutes.

Allow yourself to experience the anxiety without trying to escape or avoid it. Notice the intensity of your urges and any changes over time.

7. Reflect on the Experience: Write down your thoughts and feelings after the exposure session.

- Example: *"I felt very anxious at first, but as I stayed with the scenario, the intensity of my urge decreased. I feel more confident in my ability to manage these thoughts."*

8. Response Prevention: Commit to not engaging in any fire-setting behavior during and after the exposure.

- Example: *"I will not act on my urge to set fires. Instead, I will practice relaxation techniques and remind myself of my goals."*

- Practice imaginal exposure regularly, gradually increasing the intensity of the scenarios.

Boundaries With Yourself

Personal boundaries are limits you set for yourself to protect your well-being and ensure your actions align with your values. Boundaries help you maintain control over your behavior and reduce the risk of engaging in harmful activities.

1. Reflect on Past Experiences: Think about times when you set fires and what led to those incidents.

- Example: "I set a fire after a heated argument with a family member."

2. Define Clear Boundaries: Clearly state what you will and will not allow yourself to do. The following are some examples. Check off the ones that apply or add more to the list:

- ☐ Avoid keeping matches, lighters, and other fire-starting materials in easily accessible places.
- ☐ Identify areas in your environment where fire is absolutely prohibited, such as bedrooms and living rooms.
- ☐ Establish daily routines that do not involve any form of fire, such as using electric candles instead of real ones.
- ☐ Allocate specific times for engaging in activities that could trigger urges, and avoid these activities outside of these times.
- ☐ Recognize and avoid situations that increase the likelihood of fire-setting behavior.
- ☐ Regularly check in with a trusted friend or therapist to discuss urges and strategies for managing them.

- ☐ Stay away from places where you are likely to be alone with fire-starting materials.
- ☐ Implement techniques to delay the urge to set fires, such as taking a walk or engaging in a hobby.
- ☐ Engage in activities that divert your attention from thoughts of fire-setting, like reading or playing a game.
- ☐ Avoid substances that lower inhibitions and increase the likelihood of risky behavior.
- ☐ Participate in group therapy or support groups for individuals with pyromania.
- ☐ Ensure that everyone in the household is aware of the boundaries regarding fire and supports them.
- ☐ Install smoke detectors and fire extinguishers in your home to reduce risks.
- ☐ Modify your living space to reduce the presence of triggers, such as avoiding candles or fireplaces.
- ☐ Avoid watching videos or consuming media that could trigger fire-setting thoughts.
- ☐ Limit time spent on forums or websites related to fire-setting or pyromania.
- ☐ Avoid locations where you have previously set fires or where you feel strong urges.
- ☐ Commit to ongoing therapy sessions to work through underlying issues related to pyromania.
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

Analyzing Relapses

1. Describe the Relapse: Write a detailed account of the relapse incident, including the time, place, and circumstances.

2. Identify Emotions: Reflect on the emotions you experienced before, during, and after the relapse.

- Example: *"Before: Anger and frustration. During: A sense of release. After: Guilt and shame."*

3. Identify External Triggers: List any external factors or situations that contributed to the relapse.

- Example: *"Argument with sibling, being alone in the backyard."*

4. Identify Internal Triggers: Identify internal thoughts or feelings that played a role in the relapse.

- Example: *"Feeling misunderstood, thinking 'I need to release this anger somehow,' feeling overwhelmed by emotions."*

5. Coping Mechanisms: Reflect on how you attempted to cope with your feelings before the relapse.

- Example: *"I tried to distract myself by watching TV, but the urge to set a fire kept growing."*

6. What Could You Have Done Differently? Identify alternative actions you could have taken to prevent the relapse.

- Example: *"I could have taken a walk to cool down, called a friend to talk about my feelings, or practiced deep breathing exercises."*

7. Effective Strategies: Note any strategies that have helped you avoid relapses in the past.

- Example: *"Engaging in physical exercise, talking to my therapist, practicing mindfulness."*

8. Preventing Future Relapses: Create a detailed plan outlining steps to take when you feel triggered.

- Example: "When I feel the urge to set a fire, I will immediately leave the triggering environment, practice deep breathing, and contact a support person."

9. Strengthen Coping Skills: Identify skills and techniques to strengthen your ability to cope with triggers.

- Example: "I will practice mindfulness daily, attend regular therapy sessions, and engage in hobbies that distract me from urges."

10. Set Boundaries: Establish clear boundaries to prevent exposure to triggers.

- Example: "I will avoid being alone in the backyard and will keep fire-starting materials out of reach."

11. Forgive Yourself: Write a forgiveness statement to yourself.

2026 Clinical Alignment

DSM-5-TR (including Sept. 2025 update) · ICD-11 CDDR / 2026 MMS

Classification status

- DSM-5-TR: Pyromania · Formal but rare impulse-control diagnosis
- ICD-11 CDDR: 6C70 Pyromania · Formal impulse-control diagnosis
- A title, checklist, or completed activity never establishes a diagnosis.

Pages requiring the updated interpretation

- The audit identified source pages 1, 2, 3, 4, 5, 6, 8, 9, 10, 11, 12, 15, 16, 18, 22, 23, 24, 26, 28. The statements below supersede incompatible diagnostic, scoring, safety, or resource wording on those pages.

Diagnostic and differential limits

- Exclude instrumental, retaliatory, ideological, concealment, intoxication, developmental, manic, psychotic, conduct-related, and antisocial motives; assess imminent access and danger.

Document-specific corrections

- Pages [2, 4, 5, 18] · Frame ·Pyromania· using the DSM/ICD status below; add duration, impairment, exclusions, and differentials without reproducing criteria. The title alone must never be treated as a diagnosis.
- Pages [1, 2, 3, 4, 5] · Verify the administration, version, scoring interpretation, psychometric fit, reproduction permission, and trademark terms for DSM-derived checklist; clearly separate screening from diagnosis.
- Pages [1, 2, 3, 4, 5, 6, 8, 9, 10, 15, 18, 22, 23, 24, 26] · Do not rely on urge logs alone when there is imminent danger, illegal conduct, severe financial loss, withdrawal/overdose risk, coercive sexual behavior, procedure-related medical risk, or danger to others; require condition-specific risk management, level-of-care assessment, and qualified treatment. Apply this specifically to the workbook's Self-Assessment, Identifying Triggers, Understanding Consequences, Delaying Tactics sections.
- Pages [1, 2, 11, 12, 16, 22, 23, 24, 28] · Review all medical assertions in Pyromania with a qualified medical professional; distinguish psychoeducation from individualized advice and add referral thresholds, contraindications, and medication/procedure cautions appropriate to this population.

Measures, scoring, and permissions

- Verify the administration, version, scoring interpretation, psychometric fit, reproduction permission, and trademark terms for DSM-derived checklist; clearly separate screening from diagnosis. required before publication required before reproduction

Intervention scope and contraindications

- Do not rely on urge logs alone when there is imminent danger, illegal conduct, severe financial loss, withdrawal/overdose risk, coercive sexual behavior, procedure-related medical risk, or danger to others; require condition-specific risk management, level-of-care assessment, and qualified treatment.
- Assess intoxication, withdrawal, overdose, medical instability, co-occurring disorders, suicidality, and access to means or high-risk opportunities. Some withdrawal states require medically supervised care.
- Behavioral tracking does not by itself establish an addictive disorder; confirm diagnostic boundaries and functional impairment.
- Do not use real ignition sources or unsupervised fire-related exposure. Current intent, preparation, access, or danger to people, animals, or property requires immediate specialist risk management.

Crisis and current resources

- U.S.: call or text 988; chat at <https://988lifeline.org/>. Immediate danger: local emergency services. International resources must be separately verified for the intended country and dated.

Authoritative references

- <https://www.psychiatry.org/psychiatrists/practice/dsm/updates-to-dsm/updates-to-dsm-5-tr-criteria-text>

2026 Clinical Alignment

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- <https://icd.who.int/browse/2026-01/mms/en>
- <https://www.samhsa.gov/find-help/locators>
- <https://988lifeline.org/>
- <https://www.who.int/publications/i/item/9789240077263>
- <https://www.healthquality.va.gov/guidelines/MH/sud/>