Borderline Personality Disorder and dual diagnosis are different entities or a nosographic error?

Giorgio Tiraboschi (Serina, Italy) M. Boso, A. Urru, R. Francesca, G. Sacco, S. Basti, C. Monti, E. Caverzasi

Objective

Our aim is to understand if the different nosography between patients with Borderline Personality Disorder (BPD) and whom use of substances, that is Dual Diagnosis (DD), is real and effective or an error.

Methods

The observational-transversal study involves 40 patients (20 BPD and 20 DD) between 18 and 45 years old, admitted to our Mental Health Service and Addiction Service from March 2015 to July 2017. The psychological assessment consists of Structured Clinical Interview for DSM-IV I and II (SCID I and II), in order to assess psychiatric disorders (BPD is an inclusion criteria); Shedler-Westen Assessment Procedure-200 (SWAP-200), in order to assess personality facets; Reflective Function Questionnaire (RFQ), in order to assess mentalization.

Results

The uncertainty (U) and certainty (C) scale of RFQ shows equal impairment in both groups (U_BPD 7, U_DD 7, p>0.05; C_BPD 2, C_DD 3, p>0.05). Patients with Borderline trait of SWAP-200 are statistically similar (BPD 90% vs DD 93.33%, p>0.05). So they shared Borderline pathology. Nevertheless, using Q-factors of SWAP-200 these groups are significantly different in many facets. Q-Histrionic and Q-Dysphoric High-Functioning Neurotic are more related to BPD (p<0.05), so they experience chronic dysphoria but that is often egosyntonic and they have more personal resources. Otherwise Q-Dysphoric Emotionally Disregulated and Q-Dysphoric Dependent-Masochist are more related to DD (p<0.05); so they experience an overwhelming dysphoria and use primary defence mechanisms and depend on others to regulate emotions.

Conclusion

Both groups are characterized by compromised regulation of emotional responses. The quality of emotional experience, however, differs between the two groups and could bring DD group to use substance as self-medication.

A revision of Dual Diagnosis nosography and subsequently Health System is suggested.