

Correlation between quality of depressive experience in Borderline Personality Disorder (BPD) patients and therapists' countertransference patterns: A preliminar study

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Objective

We hypothesized that the quality of depressive experience in BPD can be a key factor in determine therapists' countertransference patterns.

Methods

We recruited 19 therapist-outpatient couples in mental health service in Pavia, using DSM-5 criteria and Shedler-Westen Assessment Procedure-200 to select patients with comorbidity for depression. Exclusion criteria were psychotic disorders, cognitive impairment, severe organic condition and hospitalization. The quality of depression was evaluated using Depressive Experiences Questionnaire (DEQ), while countertransference using Therapist Response Questionnaire (TRQ). Statistical analyses were performed using Spearman's bivariate correlation and linear regression analysis.

Results

We found a significative correlation between countertransference pattern parental/protective and DEQ subscale Self-Criticism ($R: 0.625$; $p < 0.01$), and a trend with DEQ subscale Connectedness ($R: 0.445$; $p: 0.056$).

Regression analysis to explore predictivity of Self-Criticism for this countertransference response showed $B: 0.556$; $t: 2,757$; $p: 0.013$.

Conclusion

An introjective-like kind of depression, substained by a pathology of integrative aspects of Self and a more mature and adaptive anaclitic depression (characterized by anxiety about separations in the context of relevant attachment relationships – described by DEQ subfactor Connectedness), may elicitate more positive therapists' emotional responses. This could be a protective factor in psychotherapy outcome.