Preliminary correlational study between personological dimensions in Borderline Personality Disorder measured with Shedler-Westen Assessment Procedure-200 and quality of depressive experience measured with Depressive Experience Questionnaire

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Objective

Depressive symptoms in BPD patients are often characterized by anger, hostility, void, fear of abandonment, self-harm and high suicidality risk.

Moreover, BPD patients seem to show more dependence, which results in anaclitic depressive experience.

Nevertheless, they can also express severe self-criticism, corresponding to introjective kind of depression. First aim of this study is to evaluate the relation between personological dimensions and quality of the depressive experience in a sample of BPD patients. We expect a significant correlation between PD-Borderline and QDysphoric: emotionally dysregulated (QDED) factors and Neediness subscale of DEQ. Secondly, we wonder if PDBorderline factor as well as Q-DED predict a higher severity in depression.

Methods

Outpatients referring to the Centro Psico-Sociale of Pavia were assessed for personality; inclusion criteria were BPD diagnosis according to DSM-5 and age between 18 and 45 years. Exclusion criteria were major psychiatric diagnoses, cognitive impairment, severe organic condition and hospitalization. Patients were tested with SWAP-200, Hamilton Depresssive Scale (HAM-D), Symptom Checklist 90 (SCL90) and DEQ. We used IBM SPSS to conduct Spearman's bivariate correlation and linear regression analysis.

Results

19 patients were recruited. No significative correlations were found between PD-Borderline factor and DEQ factors. QDED factor positively correlated with the Neediness subscale (rs 0.472, p<0.05). PD-Borderline and QDED factors didn't correlate with HAM-D scores, but they did with SCL-90 Depression subscale (rs 0.457 and 0.538, p<0.05).

Conclusion

PD-Borderline and QDED SWAP-200 factors predict subjective severity of depression. PD-Borderline factor doesn't correlate with any DEQ factor. As expected, QDED correlates with the Neediness subscale: this confirms that these patients tend to rapidly develop a dependency.