Reflective function in Border Personality Disorder, drug addiction and dual diagnosis

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Objective

We investigated the impairment of mentalization and the correlation with psychopathology in three groups of patients, with BPD (20 pcs), Substance use disorder, SUD (20 pcs) and Dual Diagnosis, DD (30 pcs).

Methods

The observational-transversal study included 70 patients between 18 and 45 years, admitted to our Division of Psychiatry from March 2015 to July 2017, of which 20 with BPD, 20 with SUD and 30 with DD (DBP in association with SUD). Each patient (informed consent provided) underwent a psychological assessment with: Structured Clinical Interview for DSM IV Axis I (SCID I) and II (SCID-II); Barratt Impulsiveness Scale (BIS-11) for assessing Impulsivity in three areas (cognitive, motor, no-planning); Sympton Check-list 90 (SCL90-R) for assessing the intensity of psychopathology; Addiction Severity Index (ASI) for assessing the dependence on substances or alcohol; Reflecting functioning questionnaire (RFQ) forassessing the degree of impairment of mentalization. A socio-demographic and anamnestic data collection form has been prepared, including the presence of self-injurious gestures and suicide attempts

Results

The uncertainty scale of RFQ shows impairment in all the three groups (p10= 0.0846, DD=7 vs BPD=7 vs SUD=4). This scale correlates to impulsivity, depression and negative affection shared by all three groups (borderline traits). On the contrary, SUD group has better outcome in the certainty scale (p10=0.0464, DD=2 vs BPD=3 vs SUD=7). This shows that these patients have more flexibility and resources to help them with patients with borderline traits. In fact GSI of SCL90 is low attempts of suicide are less (p=<0.001) and cognitive impulsivity is less compromised (attentional key domain BIS-11 SUD=2,44, p=0.0416).

Conclusion

Borderline traits such as impulsivity and negative affection are shared by all three groups. Nevertheless, these traits have significantly correlation and are dramatically experienced by borderline patients due to their impairment of mentalization.