DBT Relevant Articles from June 10 – July 1, 2015

1. **SELF-INJURIOUS BEHAVIOUR AND SUICIDAL IDEATION DURING DIALECTICAL BEHAVIOUR THERAPY (DBT) OF PATIENTS WITH BORDERLINE PERSONALITY DISORDER**

   **Objective:** The purpose of this study was to investigate the effect of dialectical behaviour therapy (DBT) and specific DBT modules on the longitudinal evolution of parasuicide of borderline patients (BPD). It was expected that a decrease in parasuicide would occur, in particular during therapy module ‘crisis coping skills’.

   **Method:** Hypotheses were tested using a sequential and replicated single-case experimental phase-design. Thirteen BPD patients made daily recordings of the frequency, urge, and severity of their self-injury and of their suicidal thoughts and behaviour.

   **Results:** Parasuicidal behaviours showed a highly variable course but, overall, decreased during DBT, albeit that the change could not be specifically attributed to the module ‘crisis coping skills’.

   **Conclusions:** Results suggest that both the integral approach of DBT (using all DBT modules) and its long-term application may be responsible for the abiding reduction in parasuicide.

2. **Adapted Dialectical Behavior Therapy for Adolescents with Self-injurious Thoughts and Behaviors.**
   DB Courtney, MF Flament - The Journal of Nervous and Mental Disease, 2015

   The purpose of this study was to explore clinical changes observed in suicidal adolescents treated with an adapted form of Dialectical Behavior Therapy for adolescents (A-DBT-A) in a tertiary care setting. We conducted an open-label naturalistic study including 61 adolescents with self-injurious thoughts and behaviors and associated features of borderline personality disorder, who underwent a 15-week course of A-DBT-A. Pre- and post-treatment measures were administered, the primary outcome being the total score on the Suicidal Ideas Questionnaire. Self-harm, symptoms of borderline personality disorder, resiliency measures, predictors of response, and predictors of attrition were also explored. Among participants who completed post-treatment measures, we found a significant reduction in suicidal ideation ($n = 31$, $p < 0.001$). Secondary outcomes also suggested improvement. Baseline substance use predicted attrition (HR 2.51; 95% CI 1.03-6.14; $p < 0.05$), as did baseline impulsivity score on the Life Problems Inventory (HR 1.03; 95% CI 1.004-1.06; $p < 0.05$). Overall, we observed clinical improvements in adolescents receiving A-DBT-A.

3. **Perceived Feeling of Security: A Candidate for Assessing Remission in Borderline**
Patients?

The aim of the study was for the first time to examine whether adults diagnosed with Borderline Personality Disorder feel that their sense of security improved through treatment with Dialectical Behavioral Therapy conducted one or two years earlier. In the current study perceived security was defined as a feeling of being free of worrisome or threatening phenomena. Twenty-three patients (2 men and 21 women) aged 18 to 57 years, were recruited from five teams in Southwest Sweden. A questionnaire was constructed where responses were given on visual analogue scales. There were three questions about security, namely perceived security when completing the questionnaire as well as estimated perceived security before and after treatment. The three questions were embedded among 19 other questions which dealt with various aspects of quality of life. Results indicated three main results: (a) the patients reported being feeling more secure following the treatment, (b) mental health of the patients and their health in a broader view appeared to be decisive for the perception of security and (c) the perception of greater security remained one or two years following treatment. The conclusion was that perceived feeling of security might be able to add a new dimension to currently used ways to assess the effects of the treatment of borderline patients and it might also be considered to be included in a future concept of borderline remission.

Other Articles Relevant to DBT & BPD

4. Dissociation in borderline personality disorder: Disturbed cognitive and emotional inhibition and its neural correlates
D Winter, A Krause-Utz, S Lis, CD Chiu, R Lanius… - Psychiatry Research: …, 2015

Evidence is heterogeneous regarding whether patients with borderline personality disorder (BPD) display disturbed emotional inhibition in the emotional Stroop task. Previous findings suggest that state dissociation may influence cognitive inhibition of task-irrelevant material, particularly with negative content. Our aim was to examine performance in an emotional Stroop task including negative, neutral, and positive words in BPD patients and healthy controls during functional magnetic resonance imaging. In advance, half of the BPD patients underwent a dissociation induction using script-driven imagery. BPD patients without dissociation induction showed behavioural performance comparable to that of healthy controls but displayed stronger neural responses, especially to positive stimuli, in the superior temporal gyrus, dorsomedial prefrontal cortex, and anterior cingulate cortex. BPD patients with dissociation induction showed overall slower and less accurate responses as well as increased reaction times for negative versus neutral words compared with BPD patients without dissociation induction. Moreover, they showed comparatively decreased neuronal activity in the fusiform gyrus and parietal cortices independent of valence, but elevated activity in the left inferior frontal gyrus in response to negative versus neutral words. In conclusion, experimentally induced dissociation in BPD was associated with inefficient cognitive inhibition, particularly of negative stimuli, in the emotional Stroop task.
5. Psychiatrists' Fear of Death is Associated with Negative Emotions toward Borderline Personality Disorder Patients
E Bodner, A Shira, H Hermesh, M Ben-Ezra, I Iancu - Psychiatry Research, 2015

This study examines the relationship between psychiatrists' fear of death and negative emotions toward patients with borderline personality disorder (BPD). A survey (N=120) demonstrated that fear of death is associated with stronger negative attitudes toward BPD patients, after controlling for attitudes toward suicide. Our findings emphasize the importance of psychiatrists' awareness to their fear of death as a relevant factor for their emotions toward BPD patients.

Non-DBT BPD Treatment Research

6. Change in interpersonal functioning during psychological interventions for borderline personality disorder—a systematic review of measures and efficacy
R Sinnaeve, L Bosch, KM Steenbergen-Weijenburg - Personality and Mental Health, 2015

Objective

To provide a systematic review of measures of interpersonal functioning used in treatments for people diagnosed with borderline personality disorder (BPD) and to report the effectiveness of treatments on these measures of interpersonal functioning.

Method

Literature was reviewed using the online databases and reference lists of previous systematic reviews. Selected studies were randomized controlled trials (RCTs) that examined psychotherapeutic interventions for people with BPD and contained quantitative outcomes on various aspects of interpersonal functioning and reported their results in peer-reviewed journals. Reliability and validity of the results were evaluated.

Results

Nineteen RCTs met our inclusion criteria. We found 16 different (sub)scales that measured some aspect of interpersonal functioning. Only four instruments were used by more than one research team. There is some evidence that psychotherapeutic interventions have beneficial effects on some aspects of interpersonal functioning in people diagnosed with BPD, both after individual and group therapy. Generalizability of these findings is limited.
Conclusion

There is preliminary evidence that psychotherapeutic interventions have beneficial effects on various aspects of interpersonal reactivity that characterize people diagnosed with BPD. However, none of these effects have a robust evidence base. There are serious concerns about the lack of agreed-upon concepts and instruments.

7. Disappointed Love and Suicide: A Randomized Controlled Trial of “Abandonment Psychotherapy” Among Borderline Patients
A Andreoli, Y Burnand, MF Cochennec, P Ohlendorf… - Journal of Personality …, 2015

To determine whether ambulatory psychotherapy targeted to abandonment experiences and fears can reduce suicidality and improve outcome in borderline patients referred to the emergency room with major depressive disorder and self-destructive behavior severe enough to require medical/surgical treatment and a brief psychiatric hospitalization. A total of 170 subjects were randomized at hospital discharge into three treatment groups: treatment as usual (TAU), abandonment psychotherapy delivered by certified psychotherapists, and abandonment psychotherapy delivered by nurses. Assessments were performed before randomization and at 3-month follow-up. Continued suicidality and other outcome measures were significantly worse in the treatment-as-usual as compared to both abandonment psychotherapy groups, but there were no differences between the two psychotherapy groups. These results suggest the efficacy of manualized psychotherapy that specifically targets the abandonment fears and experiences that are so common as precipitants to suicidal and self-destructive acts in borderline patients. It does not appear that formal psychotherapy training is associated with better outcomes.