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Correlation of Substance Use Disorder and Self-Harm Urges and Actions in Borderline Personality Disorder

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Introduction

- Self-harming behavior is one of the unique features of borderline personality disorder (BPD). BPD is also associated with other impulsive or maladaptive behaviors (e.g., substance use, spending sprees, binge eating). These behaviors are thought to be either indicative of general impulsivity or to be maladaptive attempts to regulate negative affect.
- The goal of the current study is to see if there are any differences in self-harm urges and actions between BPD patients with a comorbid substance use disorder (SUD) and those without. We would expect that individuals with greater impulsivity would have an increase in both substance use and self-harm behaviors.
- Specifically, we hypothesize that individuals with borderline personality disorder and a comorbid substance use disorder (SUD) will have more urges for self-harm/suicide ideation, and a greater frequency of actual self-harm actions and/or suicide attempts than those with BPD without a comorbid SUD.

Method

- All participants were outpatients recruited from a Dialectical Behavior Therapy treatment program in which they recorded their harmful urges, and actions on a weekly basis.
- Each participant filled out a weekly diary card on which they rated their urges for self-harm on a scale from 1 to 5 where 1 is the lowest urge for self-harm. The participants also recorded a "yes" or "no" concerning whether or not they took actions toward self-harm.
- For calculation purposes, "yes" was equivalent to 1 and "no" to 0. An average urge for self-harm across all diary cards was calculated for each participant. The proportion of self-harm actions, out of the total days tracked, was calculated as well.
- SUD diagnoses were established by the Structured Clinical Interview for DSM-IV Disorders (SCID-I). For the purposes of the current analyses, we separated these participants into one of two diagnostic categories based on lifetime diagnosis: substance abuse/dependence or the absence thereof.

Data Analysis

- For all participants, with or without substance abuse or dependence, averages were calculated for the urges for self-harm/suicide and for actual self-harm behaviors.
- The participants with a lifetime history of SUD were compared to those without a lifetime history of SUD using a t-test.
- We also compared the participants with alcohol use disorder (AUD) with participants without AUD and participants with drug use disorders (DUD) with those without.

Results

- BPD participants who did not have SUD had more self-harm actions than those who did have SUD ($p=0.075$). This was a trend toward significance.
- This was true even when we compared participants with AUD ($p=0.075$) and DUD (0.052) separately to those who did not have the use disorders.
- There were no significant differences between groups for urges to self-harm or suicide ideation.

Figure 1. Diary Card

Dialectical Behavior Therapy DIARY CARD						Filled out during meeting? Y N				How often did you fill out this side? Daily 2-3x once						Date started
	Emotions					Urges to . . .				Actions						
	Anger	Sadness	Fear	Guilt	Enthusiasm	suicide	self-harm			suicide	self-harm					
Day	0-5	0-5	0-5	0-5	0-5	0-5	0-5	0-5	0-5	y/n	y/n	y/n	y/n	#	Specify	#
Mon																
Tues																

NOTE: The diary card is where participants tracked their weekly urges and actions for self-harm and suicide ideation.

Discussion

- This research provides a better understanding of the high comorbidity rate between BPD and SUD.
- Overall, the results indicate that BPD participants in this study who do not have a substance use problem tend to have a higher probability of hurting themselves or attempting suicide than participants who do have a use problem.
- This result could be because the participants who have a substance use problem have an alternative to actually committing self-harm. For these participants, using the substances could provide a coping mechanism for them to avoid acting on their urges.