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# PERSONALITY DISORDER SYMPTOMS AND DRINKING MOTIVES AS PREDICTORS OF ALCOHOL CONSUMPTION AND CONSEQUENCES

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## Introduction

- ❖ Research shows high comorbidity between certain Personality Disorders (PDs) and Alcohol Use Disorders (AUDs).
- ❖ There are three DSM-IV personality disorder clusters: **Cluster A** (odd-eccentric), **Cluster B** (dramatic-erratic-emotional), and **Cluster C** (anxious-fearful).
- ❖ Drinking *to cope with negative emotions* (**coping motives**) and drinking *to enhance positive emotions* (**enhancement motives**) are predicted to be most relevant for explaining the relationship between Cluster B PDs and alcohol problems.
- ❖ Drinking motives are thought to be the proximal mechanisms through which traits of affective instability and impulsivity operate.
- ❖ Cluster B PDs are believed to be characterized by high levels of affective instability and impulsivity.
- ❖ We tested whether coping and enhancement drinking motives mediated the relations between Personality Disorder (PD) symptoms assessed via the SIDP-IV and alcohol consumption and problems.

## Method

### Participants

Participants included 155 male and 197 female participants in a longitudinal study of problems associated with alcohol and other substances at each of seven waves of assessment across 16 years, beginning in their freshman year of college (Wave 0). Only data from years 11 and 16 were used in the present study. Participants were 28.95 (SD = 1.02) years of age at Year 11 and 34 (SD = .83) at Year 16. 46% male, 90% Caucasian.

### Materials & Procedure

**AUD Diagnoses.** For our criterion measure of alcohol use diagnoses, we assessed past year *DSM-IV* AUD (abuse or dependence) and antisocial personality disorder at Years 11 and 16 using the Diagnostic Interview Schedule, Version IV (DIS-IV).

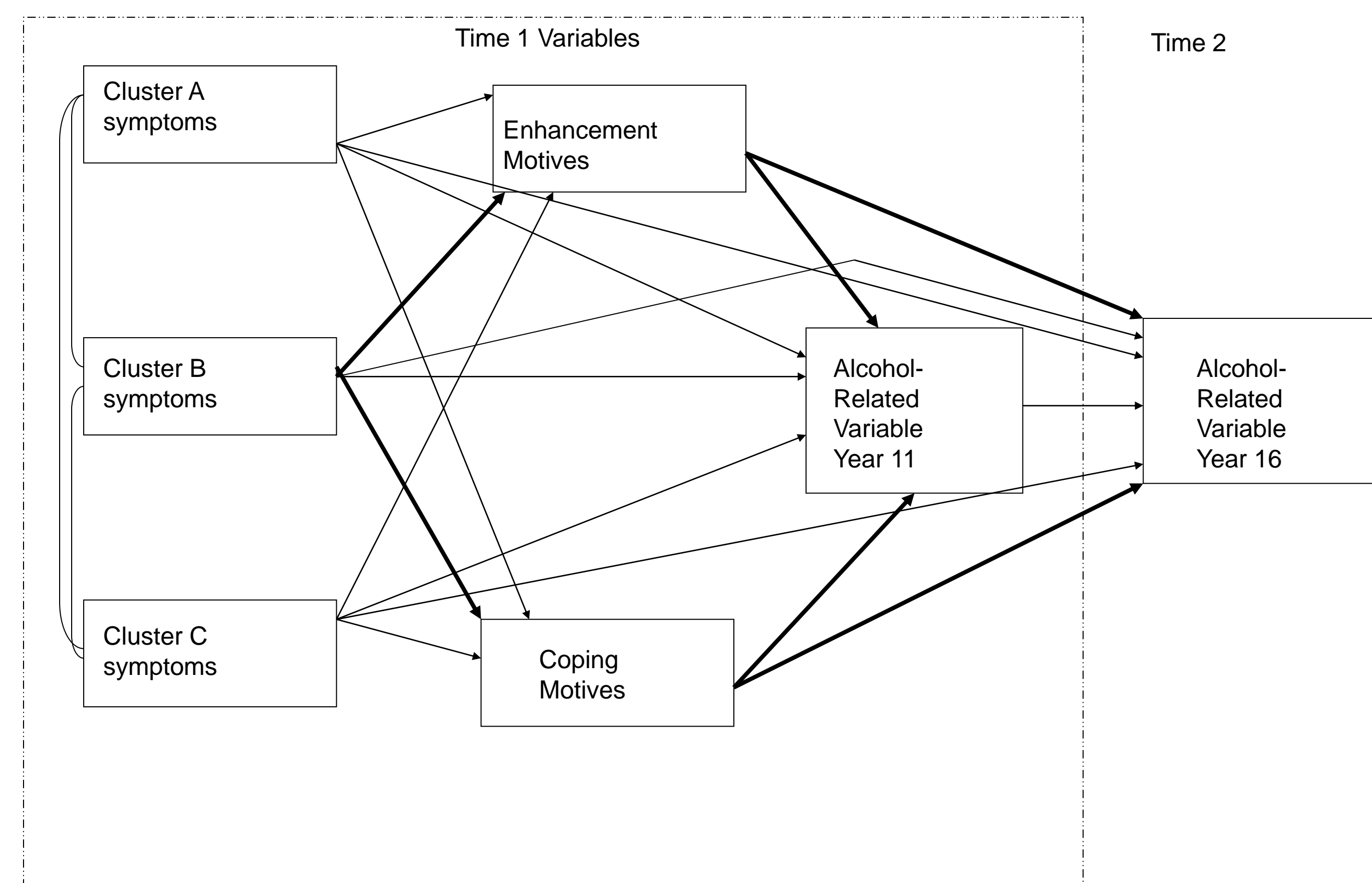
**Personality Disorder Symptoms.** *DSM-IV* personality disorder symptoms were assessed in each participant by administering the Structured Interview for DSM-IV Personality (SIDP-IV) at Year 11.

**Drinking Motives.** Coping included 5 items such as “drink to forget about your problems”. Enhancement included 5 items such as “drink because it’s exciting” Items were rated on a scale from 0 (“Strongly Agree”) to 3 (“Strongly Disagree”).

**Other Alcohol-Related Variables.** Measures of quantity-frequency of alcohol use, heavy drinking, measures of types of negative consequences from alcohol, and a measure of alcohol dependence features were included in questionnaire format.

## Analyses

- ❖ Path analyses were conducted to test the hypothesis that the relation between Year 11 Cluster B symptoms and Year 16 alcohol-related variables was mediated by Year 11 drinking motives (see Figure).
- ❖ Symptoms associated with other PD Clusters (A and C), were also modeled.
- ❖ Separate models were estimated for each dependent alcohol-related variable.



## Results

### Cross-sectional Mediation (Year 11 only)

- ❖ Enhancement motives partially mediated the relation between Cluster B symptoms and alcohol quantity/frequency, heavy drinking, total consequences, mild consequences, and dependence features (see Table).
- ❖ Coping motives partially mediated the relation between Year Cluster B symptoms and moderate consequences, social consequences, and dependence features.
- ❖ With the exception of AUDs, these effects carried over to Year 16, operating through Year 11 alcohol variables.

### Prospective Mediation (to Year 16)

- ❖ Enhancement motives partially mediated the relationship between Year 11 Cluster B symptoms and Year 16 alcohol consequences, dependence features, and AUD diagnosis above and beyond prior levels of alcohol consequences, dependence, or presence of a diagnosis.

Direct Paths From Sex, Drinking Motives, and Personality Disorder Symptom Counts to Alcohol-Related Variables at Years 11 & 16, Controlling for Indirect Paths

Variable	Cross-sectional Effect (Year 11)	Prospective Effect (Year 16)
<b>Quant/Freq Drinking</b>		
Sex	-.20***	-.04
Enhancement	.27***	-.09
Coping	.03	.01
Cluster A	-.12*	-.07**
Cluster B	.21**	.00
Cluster C	-.05	.03
Q/F Year 11	--	.65**
<b>Heavy Drinking</b>		
Sex	-.19***	-.06
Enhancement	.30***	.11
Coping	-.03	.04
Cluster A	-.11**	-.08**
Cluster B	.26***	.06
Cluster C	-.09*	-.00
HD Year 11	--	.48***
<b>Total Consequences</b>		
Sex	.02	-.05
Enhancement	.18***	.18***
Coping	.16**	.01
Cluster A	-.12**	-.04
Cluster B	.30***	.07
Cluster C	-.05	-.06
T Con Year 11	--	.35***
<b>Mild Consequences</b>		
Sex	-.09*	.03
Enhancement	.39***	.14**
Coping	.10	.05
Cluster A	-.11*	-.05
Cluster B	.34***	.04
Cluster C	-.04	-.02
Mild Con Year 11	--	.70***
<b>Moderate Consequences</b>		
Sex	.00	.04
Enhancement	-.09	.10**
Coping	.27***	.02
Cluster A	.01	.09
Cluster B	.39***	.18*
Cluster C	-.05	-.06
Mod Con Year 11	--	.49***
<b>Social Consequences</b>		
Sex	-.09	-.01
Enhancement	.02	-.05
Coping	.16**	.03
Cluster A	.17	-.05
Cluster B	.15*	.19*
Cluster C	-.12**	-.05
Soc Con Year 11	--	.52***
<b>Dependence Features</b>		
Sex	.04	.08
Enhancement	.16**	.13**
Coping	.22**	.07
Cluster A	.00	-.05
Cluster B	.35***	.09
Cluster C	-.05	-.09
Depen Year 11	--	.44**
<b>AUD</b>		
Sex	-.11	-.01
Enhancement	.37***	.29**
Coping	.10	.06
Cluster A	-.03	-.10
Cluster B	.32***	.25**
Cluster C	-.03	-.10
AUD Year 11	--	.22

Note. N = 352. \*  $p < .05$ , \*\*  $p < .01$ , \*\*\*  $p < .001$ .

## Conclusions

- ❖ As predicted, coping and enhancement motives partially mediate the relation between Cluster B symptoms and alcohol-related variables.
- ❖ Consistent with previous research, coping motives were relevant to consequences and dependence features.
- ❖ Enhancement motives predicted subsequent AUD diagnosis.
- ❖ Impulsivity may be the underlying trait in the relation between Cluster B PDs and alcohol problems.