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Innovation The Research Concept

Borderline Personality Disorder and Adolescents Behaviour

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Abstract

Borderline personality disorder (BPD) is an emotional instability or emotional unstable personality disorder. BPD patients have persistent difficulty interacting with the world around them. These patients are frequently misunderstood for their erratic behavioral patterns. Distorted and unstable self image, dangerous behaviors, chronic feeling of emptiness is symptoms of this disorder. A person with BPD may experience intense anger, depression and anxiety.

Keywords: Borderline Personality Disorder, Adolescents, Aggression, Suicide, Distress.

Introduction

Borderline personality disorder (BPD) is an emotional instability or emotionally unstable personality disorder stamped by unsteady temperaments, conduct and connection.. It is characterized by unstable relationships with other people, unstable sense of self, and unstable emotions. A person with BPD may experience intense episodes of anger, depression, and anxiety that may end from only a few hours to days. BPD has high rates of co-occurring mental disorders, such as mood disorders, anxiety disorders, and eating disorders, substance abuse, self-harm, suicidal thinking and behaviors, and even suicide. Statistics show that one to two per cent of the total world's population suffers from BDP. The earliest sign of this mental illness occur during late adolescence and affect more women than men.

The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR) states that Personality disorder categories may be applied to children or adolescents in those relatively unusual instances in which the individual's particular maladaptive personality traits appear to be pervasive, persistent and unlikely to be limited to a particular developmental stage.

According to Joyce Burland, Director, NAMI Education, "There is perhaps no serious mental illness more maligned and misconstrued than borderline personality disorder." BDP patients have persistent difficulty interacting with the world around them and may come out as being shallow and unpredictable. These patients are frequently misunderstood for their erratic behavioral patterns.

Aim of the Study

The aim of this study is to find out the reasons and way to come out of this serious psychological disorder of adolescents. Medication is not very helpful in such cases. Psychotherapy, cognitive behavioral therapy are to be made relatively helpful to care such patients.

Signs and Symptoms

Adolescents with borderline personality disorder may experience extreme mood swings and can display uncertainty about who they are. As a result, their interests and values can change rapidly. They have unstable relationships with their family, friends, and loved ones, Distorted and unstable self-image, Dangerous behaviors; such as unsafe sex, substance abuse, reckless driving, and binge eating, recurring suicidal behaviors or threats or self-harming behavior such as cutting, Chronic feelings of emptiness as symptoms of this disorder. People with borderline personality disorder may feel angry and distressed over minor separations such as vacations, business trips, or sudden changes of plans from people to whom they feel close.

Dr Alka A Subramanyam, Psychiatrist and Assistant Professor at Nair Medical College, “Adolescents with BPD get the chronic feeling of emptiness and loneliness. They often feel that nobody cares and they will be left alone at the end. They also feel that nobody cares and loves them. So, parents should watch out for these symptoms”.

Bradley R, Zittel Conklin C, Westen D, studied on 'the borderline personality diagnosis in adolescents: gender differences and subtypes'. This study aimed to identify personality features characterizing adolescent girls and boys with borderline personality disorder (BPD) and to see whether meaningful patterns of heterogeneity exist among adolescents diagnosed with the disorder. The results indicated that the symptoms and phenomenology of adolescent girls with BPD are similar to those of adults. Adolescent boys meeting BPD criteria have a more aggressive, disruptive, antisocial presentation.

Causes

Genetic, brain, environment, and social factors affects BPD. BPD is about five times more likely to occur if a person has a close family member (first-degree biological relatives) with the disorder. Traumatic life events, such as abuse or abandonment during childhood, unstable relationships and hostile conflicts can lead BPD. Some Studies show that people with BPD have structural and functional changes in the brain, especially in the areas that control impulses and emotional regulation.

A girl's parents took her to a clinic seeking medical help with an unusual complaint. Her family was astonished to know her relationship count has reached to five though she being in her late teens. Also, she used to have a new boyfriend in every few months. The doctors identified the reason behind her emotional instability and were diagnosed with Borderline Personality Disorder (BPD).

A renowned psychiatrist shared "Adolescents suffering from BPD fight with their parents a lot. He had one case where a teenage girl wanted to leave her parent's home because she thought that they haven't done her proper upbringing. Tired of these fights, the parents brought her to psychiatry and she was identified with 'BPD'.

Dr. Nilesh Shaba, (Head of the Psychiatric Department, Sion Hospital), some kids are short tempered. They blame their parents and can't control their violent instincts. They could deliberately harm themselves. Emotional instability is one of the symptoms and they also tend to get addicted to cigarettes, cannabis etc.

Dr Heena Merchant, ex-secretary of the Bombay Psychiatry Association and assistant professor at KEM Hospital, "The Borderline Personality Disorder stands between neurosis and psychosis. That's why it is called as Borderline. It develops as the as the personality starts to take shape. Children who were sexually abused and disturbed family background are prone to develop this disorder".

Treatments and Therapies

Psychotherapy

Psychotherapy is the main treatment for people with BPD. Psychotherapy can be provided one-on-one between the therapist and the patient or in a group setting. Therapist-led group sessions may help teach people with BPD how to interact with others and how to express themselves effectively. Types of psychotherapy used to treat BPD are-

Cognitive Behavioral Therapy (CBT)

CBT may help reduce a range of mood and anxiety symptoms and reduce the number of suicidal or self-harming behaviors.

Dialectical Behavior Therapy (DBT)

This type of therapy utilizes the concept of mindfulness, or being aware of and attentive to the current situation and moods. DBT also teaches skills to control intense emotions, reduce self-destructive behaviors, and improve relationships.

Schema-Focused Therapy

This type of therapy combines elements of CBT with other forms of psychotherapy that focus on reframing schemas, or the ways people view themselves.

Systems Training for Emotional Predictability and Problem Solving (STEPPS)

STEPPS is a type of group therapy that aims to educate family members, significant others, and health care professionals about BPD and gives them guidance on how to interact consistently with the person with the disorder. Families of people with BPD may also benefit from therapy. The challenges of dealing with a loved one with BPD on a daily basis can be very stressful, and family members may unknowingly act in ways that worsen their relative's symptoms. Some therapies include family members in treatment sessions. These types of programs help families develop skills to better understand and support a relative with BPD. Other therapies focus on the needs of family members and help them understand the obstacles and strategies for caring for a loved one with BPD.

Meditation

Medications should not be used as the primary treatment for BPD as the benefits are unclear. However, in some cases, medications can help to treat specific symptoms, such as mood swings, depression, or other disorders that may occur with BPD.

Conclusion

There is perhaps no illness so serious as this. The adolescents suffering from it have suicidal feeling and they can harm themselves. Parents should be very watchful if their children start unusual eating, speaking, go erratic on trivial things or If they are short tempered. Genetic, brain, environment, and social factors etc. may be the reasons behind it. Traumatic life events, insecure childhood and feeling of loneliness may be its seed factors.

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