

EARLY ETIOLOGICAL THEORIES

- **Phase-specific developmental failure (Masterson, 1975)**
- **Reliance on primitive defenses: most specifically splitting (Kernberg, 1967)**
- **Dysfunctional families (Shapiro et al. 1980)**
- **Childhood trauma (Herman, 1989)**

Perceptions of Family Environment

	<u>BPD</u>	<u>Parents</u>
Cohesive	-	+
Encourage independence	-	+
Alienation	+	-
Communication	-	-

GENETICS OF BPD

- **Not related to schizophrenia (adoption study)**

Gunderson et al. 1983

- **Heritability ~ .68 (twin study)**

Torgerson et al. 2001

(H of schizophrenia ~ .85, Bipolar ~ .7, MDD ~ .5, PTSD ~ .3)

HERITABILITY OF CLUSTER B TRAITS

(COMMUNITY SAMPLE)

BPD	.35
ASPD	.38
HPD	.31
NPD	.24

- **Cluster B PDs share genetic and environmental causes**
- **BPD & ASPD are most closely related**
- **BPD has the *least* and ASPD the *most* disorder-specific genetic code**

HERITABILITY

Life Span 3%

Impulsivity 25%

Vocational interest 42%

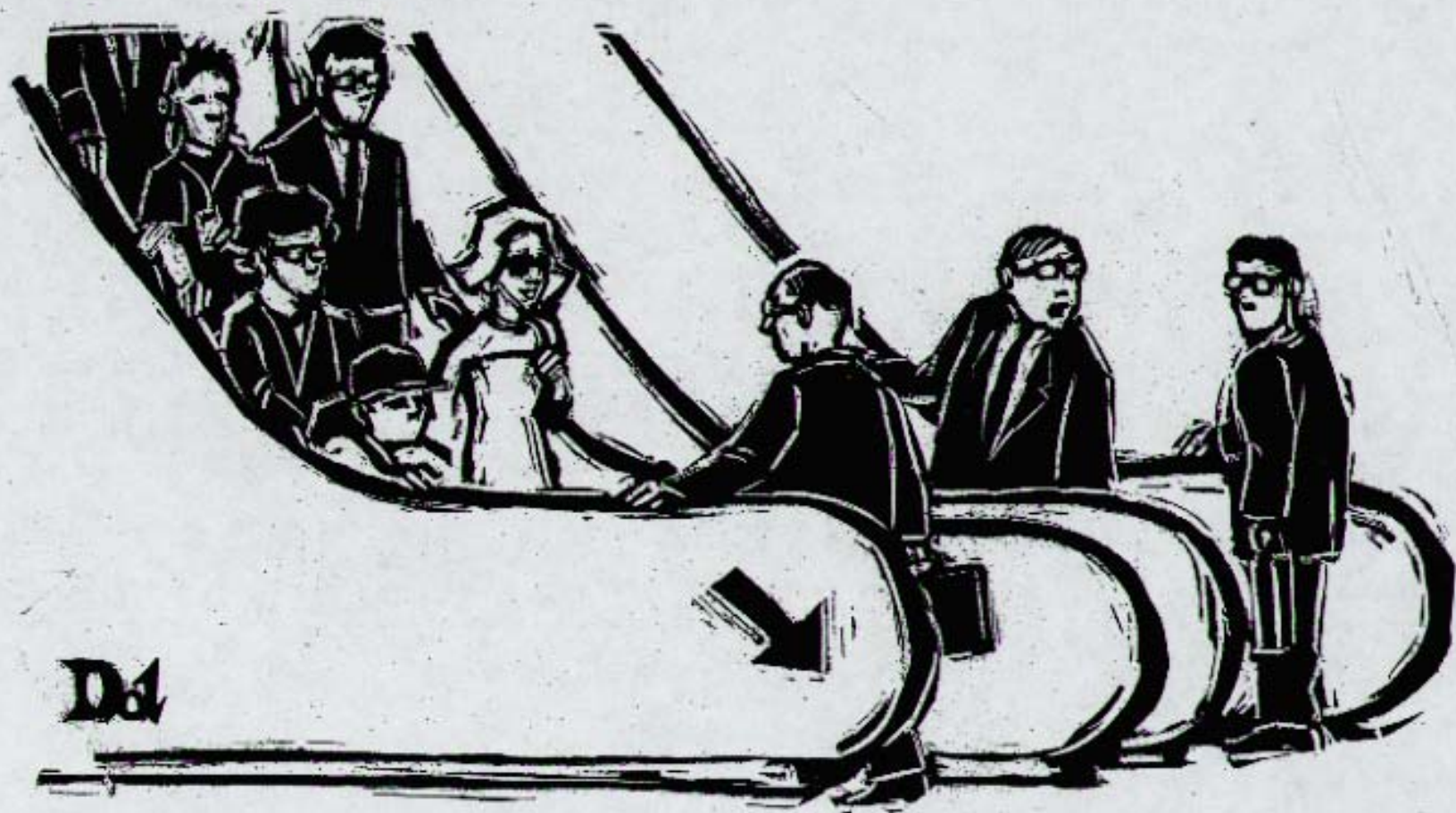
Personality 50%

Intelligence 52%

Height 85%

HERITABILITY

Schizophrenia	85%
Bipolar	80%
ADHD	75%
BPD	68%
MDD	45%
Panic Disorder	40%
PTSD	30%



D&A

"Bob was raised in the wilderness by salmon."

Nice Rats,
Nasty Rats:
Maybe It's All
In the Genes



Prototypes of 3 Phenotypes/Factors

Behavioral

- cut, burn, repeated suicide attempts

Emotional

- fearful/angry, chronically depressed

Interpersonal

- fearful of abandonment
- splits: alternating idealization/devaluation

PHENOTYPES FOR BPD

- **Subsyndromal phenomenology with significant heritability.**

AFFECTIVE: **Readiness to become angry, anxious, or to shift between anxiety and depression**

IMPULSIVE: **Acts without concern for longer term consequences; especially to act in self-injurious ways**

INTERPERSONAL: **Insecure attachments characterized by longings for closeness and fears of rejection or abandonment**

THE AFFECTIVE PHENOTYPE

- **AFFECTIVE INSTABILITY:** *Due to a marked reactivity of mood (e.g., intense subjective distress - anxiety or depression - that usually lasts a few hours)*
- **ANGER:** *Intense, often inappropriate, and may be unexpressed or poorly controlled*
- **FAMILIAL** (Silverman et al. 1991, Zanarini et al. 2004) ~ 50% FDRs
- **HERITABILITY 0.45** (Jang et al. 1996)

THE IMPULSIVE PHENOTYPE

- **IMPULSIVITY:** *In at least two areas that are potentially self-damaging*
SUICIDAL or SELF-MUTILITATIVE BEHAVIORS, GESTURES, or THREATS:
Recurrent
- **FAMILIAL** (Silverman et al. 1991, Zanarini et al. 2004) ~ 25% FDRs
- **HERITABILITY 0.28-0.45** (Gottesman et al. 1983; Reiss et al. 2000; Jang et al. 1998)

THE INTERPERSONAL PHENOTYPE

- **INTENSE UNSTABLE RELATIONSHIPS:**

Characterized by alternating between idealization and devaluation

ABANDONMENT FEARS: *Real or imagined that cause frantic efforts to avoid being alone*

EMPTINESS:

The inner experience associated with feeling the lack of the presence of a caring other

- **FAMILIAL (Zanarini et al. 2004) ~ 25% FDRs**

- **HERITABILITY 0.48 (Jang et al. 1996)**



Attachment and BPD

- **Clinically, interpersonal features of BPD reflect two prototypical attachment styles**
 - **Preoccupied = > needy, clingy behaviors**
 - **Fearful, Disorganized = > conflicted, dissociated, avoidant**
- **Empirically, BPD is associated with insecure, preoccupied, and fearful attachment styles (Agrawal et al., 2004, Levy, 2005)**

The preborderline child has an innate hypersensitivity to interpersonal interactions that:

- **shapes early caretaking**
- **predisposes to making interpersonal stressors traumatic**

INTERPERSONAL HYPERSENSITIVITY

INFANT

**easily
distressed**

**more
distress
“fearful”**

**disorganization
“badness”**

CARETAKER

**distressed
response**

**anger,
withdrawal
“hostile helpless”**



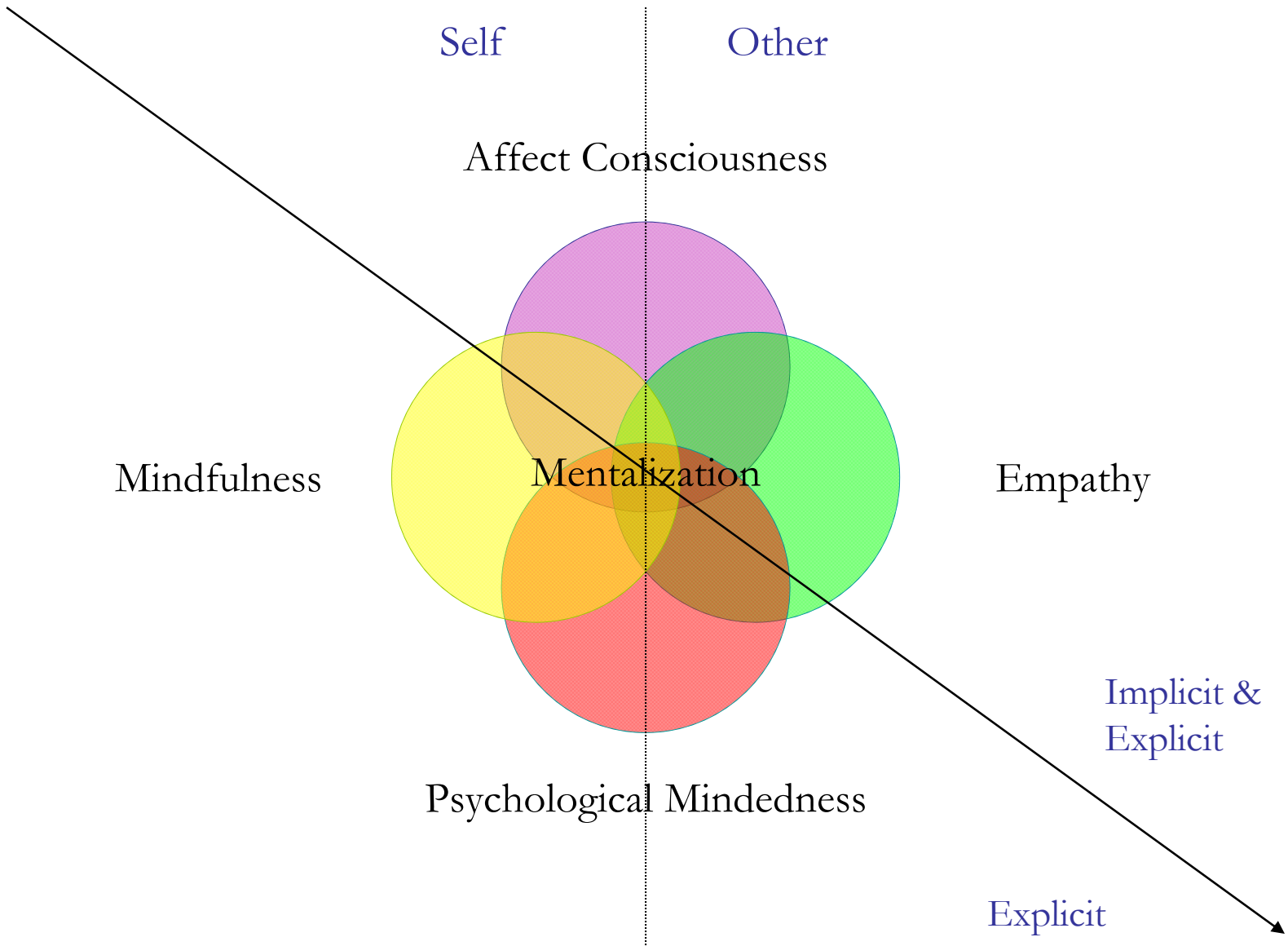
MENTALIZATION

(Fonagy and others, since 1991)

“A reflective function which denotes the understanding of one’s self as well as others’ behaviors in mental state terms”

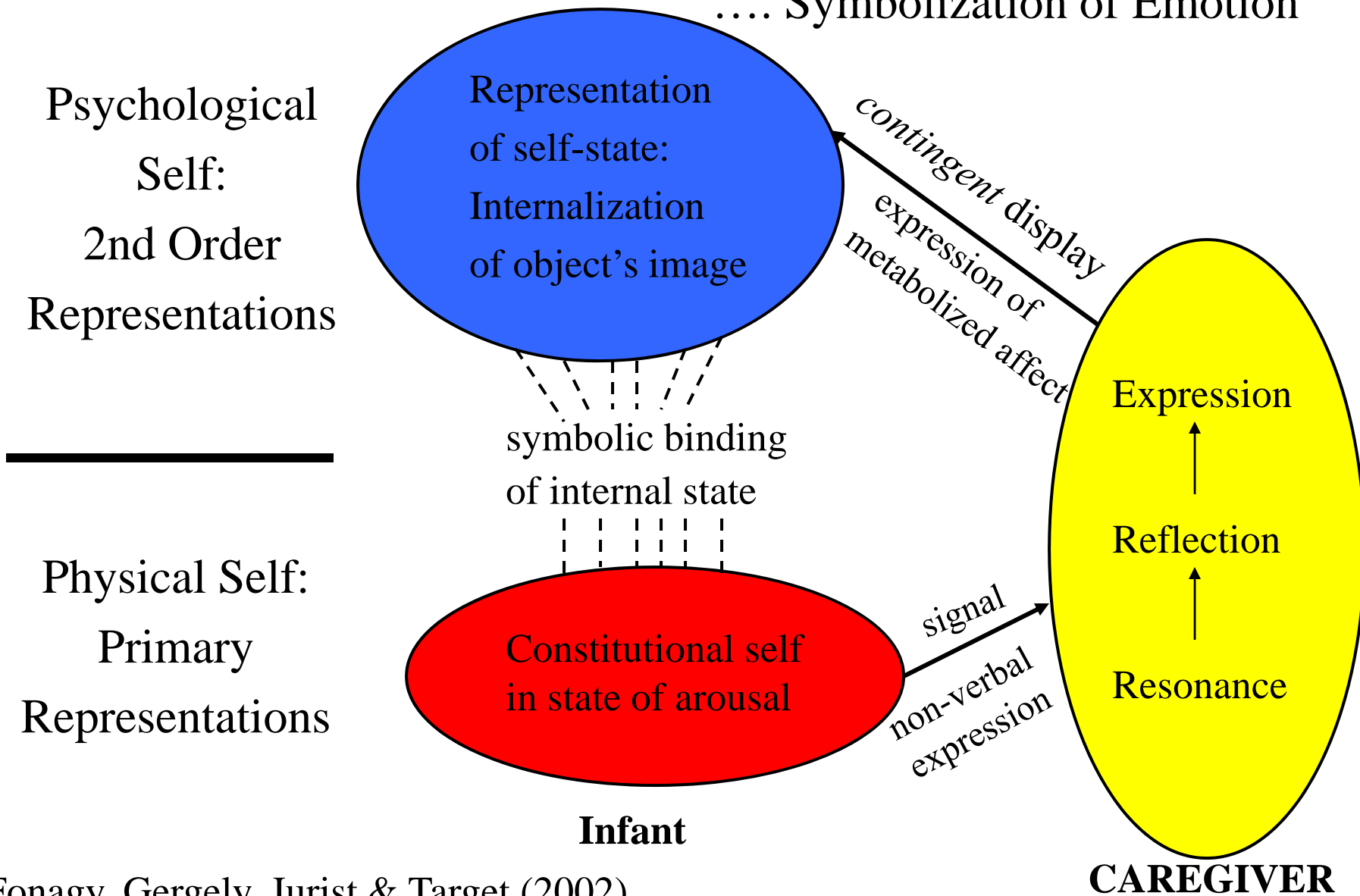
“She (mother) thinks of me as thinking or feeling and therefore I exist (a self) as a thinker, feeler”

“Making sense of the actions of oneself and others on the basis of intentional mental states such as desires, feelings, and beliefs”



Theory: Intersubjective Space and the

.... Symbolization of Emotion



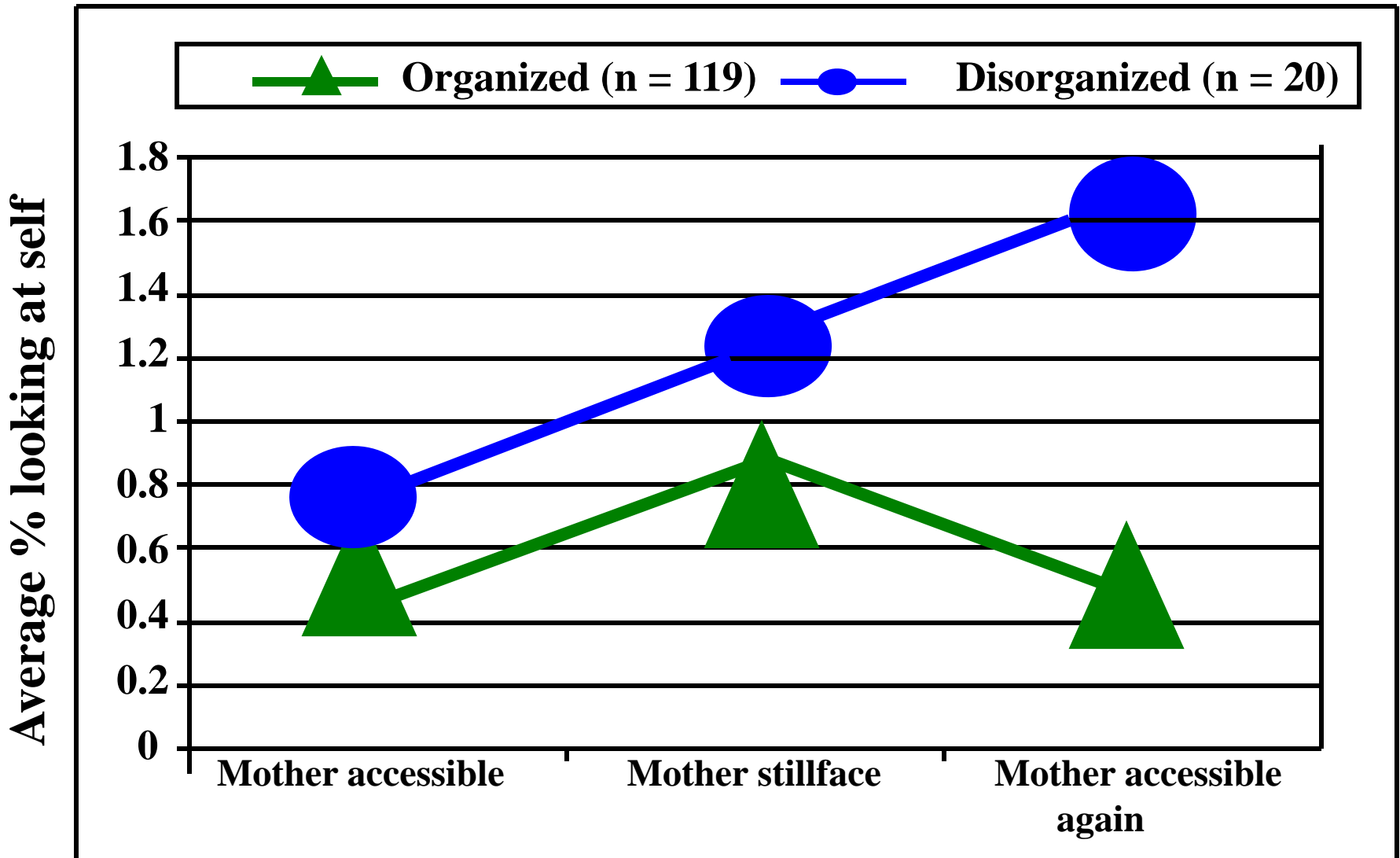
DISORGANIZED ATTACHMENTS

- **“contradictory and unintegrated behaviors towards caregivers when comfort is needed”**
- **becomes evident by 1 year in about 15% of infants**
- **associated with hostile/helpless caretaker behaviors**

Disorganized Attachment

Contradictory and unintegrated approach/avoidance responses to others. Includes confused, disoriented mind states and interrupted misdirected behavioral responses in the strange situation.

Duration of Looking at Self During Three Phases of Modified Still Face Procedure



F (interaction) = 12.00, df = 2,137m p < .0001
(Gergely, Fonagy, Koos, et al. 2004)

Infant (effects on) Parenting

Difficult/challenging

Inattentive, irritated

(van der Boon '94, Wachs '92)

Anxious/inhibited

Overengaged

(Kagan et al. '93)

Evolution of Disorganized Attachments

- **age 6-8 controlling strategies**
 - **caretaking (role reversal)**
 - **punitive**
- **predicts adolescent suicidality, hostility, conduct disorder, depression**

CHILDHOOD TRAUMA IN BPD

- **~ 70%: Sexual Abuse most specific, Neglect most prevalent**
- **Most sexual abuse is not incest**
- **Other personality disorders have equal levels**
- **~ 50% children develop without consequences**
- **Events become traumatic when they are unprocessed**
- **Accounts for about 15% of variance for BPD**

Preventive Interventions

- **identification of children at risk
(e.g. disorganized attachments,
referral for family services, incest)**
- **educate families “customized
home environments”**

Mothers of *difficult, challenging* 6 month old infants can be taught to become more attentive with the result that:

- a) they are more able to soothe their child**
- b) the child learns to soothe itself**
- c) more secure attachments form**