

A QUICK AND
SIMPLE GUIDE
TO BORDERLINE
PERSONALITY
DISORDER (BPD).

FROM KINERGY.

What is Borderline Personality Disorder?

Borderline Personality Disorder, often abbreviated to BPD, is a type of personality disorder that affects people's moods and how they interact with other people socially. Although genetics can play a part in the formation of personality disorders, it is thought that our upbringing, environmental factors, and experiences of trauma at a young age are major contributing factors in the development of these disorders.

Unlike other mental health illnesses like Bipolar Disorder or Schizophrenia there are no drugs designed to treat specific personality disorders. Instead medications are used to treat *symptoms* of the disorders, such as anxiety or depression.

Historically, mental disorders were classed as 'psychoses' or 'neuroses'. Research into the disorder led psychiatrists to believe it did not fit accurately in to either category; however, they realised that those suffering this illness were bordering on psychotic (but never fully psychotic), hence the term 'borderline' was introduced.

What causes BPD?

Currently there is not thought to be a single cause of this illness, but there may be several contributing factors: brain chemistry, brain development, and environmental factors.

Of the environmental factors, the most common and widespread among people with BPD are:

- Experiencing emotional, physical, or sexual abuse at an early age
- Frequently experiencing fear or distress at a young age
- Being neglected by one or both parents
- Losing a parent at a young age
- Family difficulties or instability

What are the symptoms of BPD?

There are *many* symptoms of BPD that overlap with other mental illnesses, the most similar being Bipolar Disorder, but you can find a common list of symptoms listed here. Only a qualified specialist, such as a psychiatrist, should diagnose Borderline Personality Disorder; if you think you may have this disorder, you should speak with your GP who can make an appropriate referral.

- **Fear of abandonment.** People with BPD often become very distressed at the thought of being left alone or abandoned. This can be so intense that a person with BPD may resort to begging a person not leave them. They may start fights or even try to physically prevent someone from leaving them.
- **Relationship problems.** People with BPD often have very intense but short-lived relationships. They will sometimes find that they fall in love very easily or quickly, fantasising that their new love is the person who will make everything perfect for them, only to fall quickly out of love again when the reality does not match their expectation.
- **Black and white thinking.** People with BPD tend to hold very firm, inflexible beliefs that hold very little room for nuance. They often believe something is wrong or right, and find it difficult to see any 'grey area'.

- **Unstable self-image.** If you have BPD, you may find that your sense of self is always changing. At times you might like yourself, at other times you may really dislike yourself, often to extremities where you think you are perfect – or evil. You may find you feel directionless, not knowing what you want from life. This may cause you to frequently change jobs, lovers, friends, religious beliefs, political beliefs, and even sexual identity.
- **Impulsive behaviours.** People with BPD will often act impulsively without thinking about any consequences of their actions.
- **Self-destructive behaviours.** Similar to being impulsive, you may find that you engage in risky sexual activity, take lots of drugs or drink heavily. You might buy things you can't afford, drive dangerously, or shoplift etc.
- **Self-harm and suicidal behaviour.** People with BPD can often suffer with suicidal ideation and may sometimes make suicidal remarks, make plans to commit suicide – or even attempt suicide. They may also self-harm.
- **Emotional instability.** If you have BPD, you may find that your emotions are somewhat out-of-control. You might experience very intense but short-lived emotions that are excessive for the triggering event. As an example: if someone without BPD rips a favourite piece of clothing they may feel very annoyed, frustrated or disappointed, but they will be able to shrug this off and move on quickly. People with BPD may find themselves bursting into tears, thinking this is the worst thing that has ever happened and that the universe is conspiring against them. This emotional instability is sometimes referred to as 'Emotional Dysregulation'.
- **Feeling empty.** People with BPD often suffer chronic feelings of emptiness, like they're a void or a 'nobody'.

- **Extreme and sudden anger.** If you have BPD, you may find you suffer with a very short temper and experience explosive fits of rage which you have trouble bringing under control. You might scream and yell and throw things or threaten people. This anger can be directed outwards at others or inwards at yourself. This can be a terrifying experience for someone to observe.
- **Paranoia and dissociation.** You may find yourself being deeply suspicious of others, and you may also have moments where you lose touch with reality – an experience known as dissociation.

How is BPD treated?

In a crisis you should consider contacting your GP or your local mental health crisis team who can support you through this period.

Talking therapies such as counselling and group therapy may be useful, but there are other specific therapies that are very successful in helping those with BPD.

The first of these is Dialectical Behavioural Therapy (DBT). This type of therapy is used specifically to treat BPD. This therapy is aimed at breaking the cycle of emotional instability by allowing the person to process their emotions more constructively, and also by addressing the black and white ways of thinking that people with BPD often have to allow them to be open to other ideas and opinions which differ from their own. The therapist will listen to the person's thoughts and feelings and attempt to challenge their beliefs to reframe these in a more positive and constructive way.

Another therapy that can be used is Mentalisation-based therapy (MBT).

Mentalisation refers to the way in which we think about things. This type of therapy invites a person to examine their thoughts and beliefs and to assess whether they are useful and based on the reality.

For example: someone with BPD may have a sudden urge to do something like buy an expensive item that they cannot afford. They will then do so impulsively without thinking and may regret it later. This is because they lack the capacity to take a step back and ask themselves why they want the item and if it is something they truly need. MBT attempts to address these kinds of behaviours so that someone with BPD can learn to be less impulsive and consider things before taking action, allowing them to take a step back.

MBT will also attempt to challenge a person's beliefs and how their beliefs and actions may have an impact on others.

Both DBT and MBT may have a more long-term focus than standard counselling or Cognitive Behavioural Therapy (CBT) courses.

Further Reading

You may find our guides on mindfulness and meditation, dissociation, distraction and grounding techniques, and self-harm useful.