



# Axis I Symptom Change in a sample of Inpatient Adolescents with and without Borderline Personality Disorder



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## BACKGROUND

Consistent with evidence from research in adults, a diagnosis of Borderline Personality Disorder (BPD) in adolescence has been linked to poorer psychosocial functioning, high levels of distress and impairment, and significant impairments in role functioning including school and work (Chanen, Jovev, & Jackson, 2007; Bernsetein, et al., 1993). Despite this knowledge, there are very few studies examining Axis I outcomes in adolescents with comorbid BPD. In fact, only one prospective longitudinal study in a community sample of female adolescents (Daley et al., 1999) examined comorbid personality disorder and the course of depression. The study supported some findings from the adult literature finding that comorbid personality disorders negatively impacted the course of depression and predicted continued depressive symptoms. This emphasizes the importance of assessing Axis I symptom changes in adolescents with BPD. Against this background, the aim of the current study is to examine Axis I symptom changes in adolescents diagnosed with BPD compared to a psychiatric control group without BPD.

## METHODS

### Participants

Adolescent inpatients ages 12-17 who are admitted to the Menninger Clinic, Adolescent Treatment Program (ATP). The Menninger Clinic, ATP is a tertiary care private hospital specializing in assessment and stabilization of adolescents who have failed to respond to previous treatments.

**Table 1.** ATP Patient Diagnostic information (n = 175) for the past year.

Diagnoses	%
Borderline Personality Disorder	29%
Social Phobia	18.3%
Separation Anxiety Disorder	13.1%
Specific Phobia	17.3%
Panic Disorder	14.3%
Agoraphobia	10.1%
Generalized Anxiety Disorder	14.2%
Obsessive Compulsive Disorder	26.6%
Post-traumatic Stress Disorder	8.3%
Anorexia	6.6%
Bulimia	2.4%
Major Depressive Disorder	39.2%
Dysthymia	1.8%
Manic	4.8%
Hypomanic	4.2%
ADHD	22.2%
Oppositional Defiant Disorder	24.0%
Conduct Disorder	24.6%

### Measures

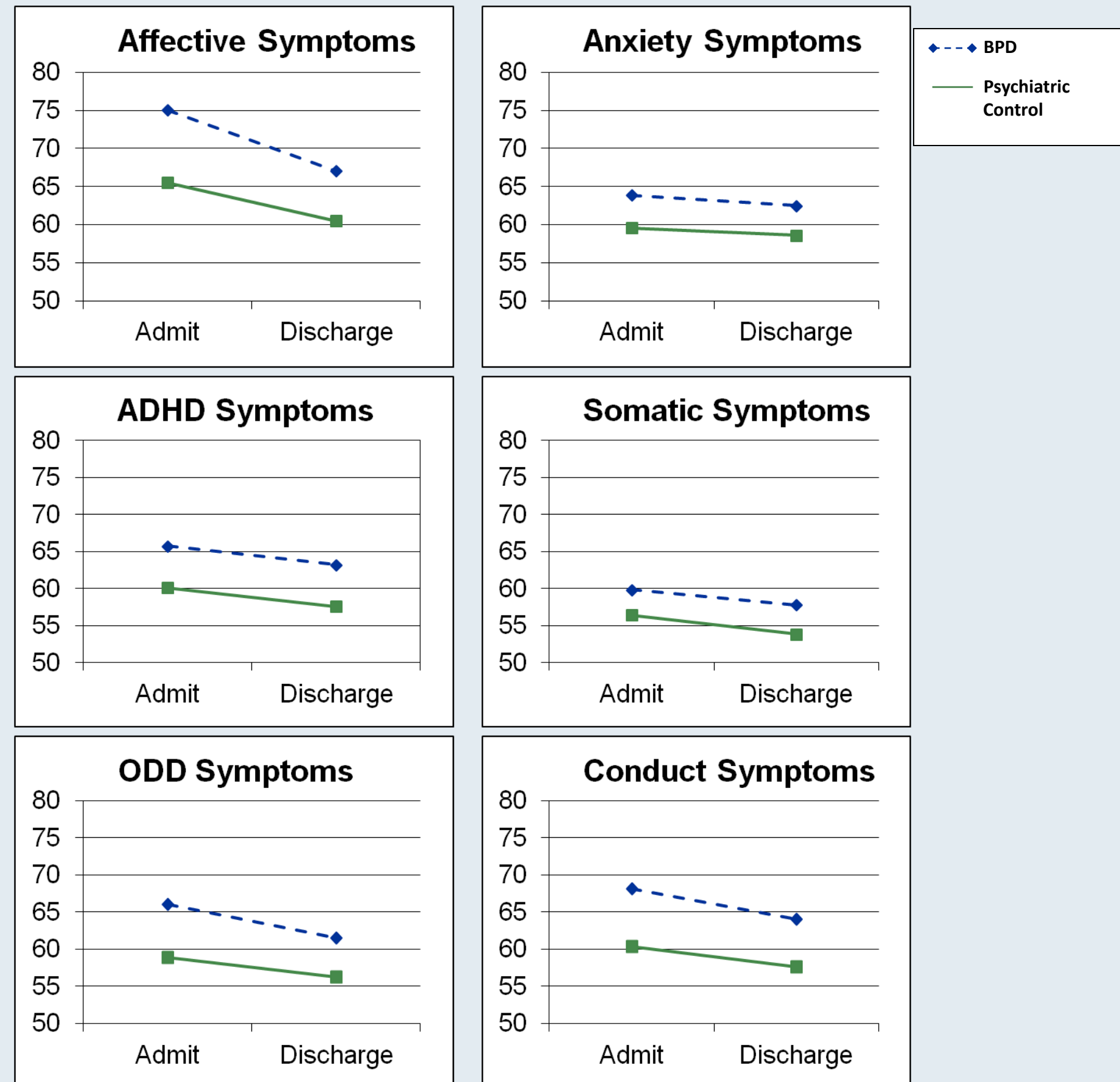
#### BPD Diagnosis

- Childhood interview for borderline personality disorder (CI-BPD; Zanarini, 2003).

#### Axis I Diagnoses

- Youth self-report (YSR; Achenbach & Rescorla, 2001).
- Diagnostic Interview Schedule for Children (NIMH-DISC-IV; Shaffer, Fischer, Lucas, Dulcan, & Schwab-Stone, 2000).

## RESULTS



**Table 2.** Change in Axis I Mean Scores between Admit and Discharge for BPD and Psychiatric Controls.

YSR DSM-oriented		Patient Groups		Analyses		
Scales	Timepoint	BPD	Psychiatric Control	<i>F</i> ( <i>df</i> = 1, 135)	<i>p</i>	$\eta^2_\pi$
		Mean (SD)	Mean (SD)			
Affective	Admit	75.04 (10.39)	65.52 (11.48)			
	Discharge	67.05 (12.57)	60.46 (9.98)	20.3	< .001	0.13
Anxiety	Admit	63.86 (8.04)	59.55 (8.94)			
	Discharge	62.47 (10.07)	58.57 (8.87)	7.91	0.006	0.06
Somatic	Admit	59.86 (10.27)	56.42 (9.04)			
	Discharge	57.81 (8.82)	53.88 (6.93)	7.22	0.008	0.05
ADHD	Admit	65.75 (7.81)	60.12 (7.54)			
	Discharge	63.21 (8.74)	57.61 (7.11)	14.27	< .001	0.1
ODD	Admit	66.00 (9.70)	58.85 (8.05)			
	Discharge	61.56 (9.23)	56.27 (6.83)	21.96	< .001	0.14
CP	Admit	68.10 (10.84)	60.41 (8.54)			
	Discharge	64.00 (10.81)	57.60 (8.17)	21.42	< .001	0.14