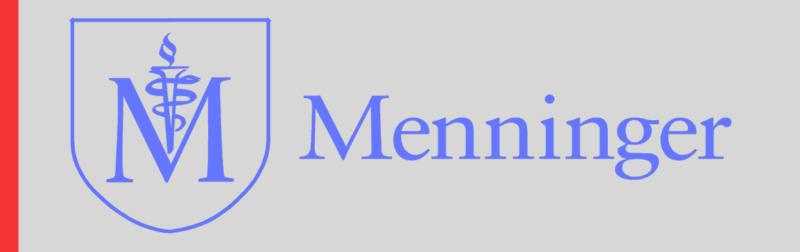


# Axis I Comorbidity in Hospitalized Adolescents with Borderline Personality Disorder



Carolyn Ha, B.S.<sup>1</sup> and Carla Sharp, Ph.D.<sup>1</sup>
University of Houston, Department of Psychology
Developmental Psychopathology Lab

## **BACKGROUND**

- ❖ Patients with Borderline Personality Disorder (BPD) place a significant burden on mental health services (Bender et al., 200)
- Axis I comorbidity in adult inpatients with BPD (Zanarini et al., 1998; Zimmerman & Mattia, 1999)
- Downward extension to inpatient adolescents
- ❖ <u>Goal</u>: Examine comorbidity of Axis I disorders in a sample of inpatient adolescents diagnosed with BPD compared to a group of psychiatric controls.
- ❖ <u>Hypothesis</u>: Patients with BPD would have significantly more Axis I psychopathology (mood, anxiety, substance abuse, oppositional defiant disorder, and conduct disorder) when compared to a psychiatric control group.

## **METHODS**

## **Participants**

- Ages 12-17
- Inpatient adolescent unit
- Consecutive admissions
- N = 225

**Table 1.** Demographics and characteristics of full sample.

	BPD	BPD Psychiatric		
		Control		
	M	SD	M	SD
Age	15.65	1.42	15.39	1.39
IQ	106.28	14.75	107.60	1.19
GAF				
Admission	36.52	7.35	38.38	7.0
Discharge	49.57	6.83	50.98	5.69
	%	N	%	N
Sex				
Males	16.1	10	49.7	81
Females	83.9	52	50.3	82
Ethnicity				
Caucasian	85.5	53	92.6	151
Non-Caucasian	15.5	9	7.4	12
BPD diagnosis	27.6	62	72.4	163
Previous Hospital (1-6)	54.1	33	48.8	79
History of Medical Prob	48.4	30	47.2	77
History of Psych Prob	98.4	60	96.9	158
Sexual trauma	31.6	18	15.4	21
Lifetime Suicide Attempts	47.5	28	35.5	55

#### Measures

# Borderline Personality Disorder

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

## Axis I Psychopathology

- Diagnostic Interview Schedule for Children (NIMH-DISC-IV; Shaffer, Fischer, Lucas, Dulcan, & Schwab-Stone, 2000)
- CRAFFT Substance screen (Kinght et al., 2002)

## **RESULTS**

- n = 62 BPD patients (28% of sample)
- n = 163 Psychiatric control
- No significant differences between both groups in terms of demographics except for gender:
  - Ethnicity: Caucasian 85.5% vs 92.6%;  $\chi^2 = 2.77$ , p = .099
  - Age: (t = -1.21, p = .228), IQ (t = .548, p = .585)
  - Global Assessment of Functioning (GAF) scores at admission: (*t* = 1.76, *p* = .08)
  - Gender: BPD (83.9%) vs psychiatric control (50.3%) were females ( $\chi^2 = 21.007$ , p < .001)

**Table 2.** Comparison of adolescents with BPD and psychiatric controls on Axis I disorders.

Axis I Disorder	BPD (n = 62)		Psychiatric Control (n = 163)		Chi-Square Analysis	
	N	%	N	%	$\chi^2 (df = 1)$	р
Mood D/O	39	68.4	87	56.1	2.61	.106
MDD	32	55.2	51	33.1	8.60	.003
Dysthymia	2	3.4	1	.60	2.37	.124
Hypomanic	4	6.9	2	1.3	4.801	.028
Manic	4	6.9	6	3.9	.84	.358
Anxiety D/O	50	84.7	112	71.8	3.86	.049
GAD	13	22	13	8.3	7.66	.006
Agoraphobia	7	35	13	8.3	.656	.418
OCD	25	42.4	29	18.5	13.07	>.001*
Panic Disorder	13	22	17	10.9	4.42	.035
PTSD	9	15.3	7	4.5	7.29	.007
SAD	13	48.1	14	9	6.38	.012
Social Phobia	12	20	26	16.6	.356	.551
Specific Phobia	18	30.5	17	10.9	12.08	.001*
Eating D/O	6	54.5	5	45.5	4.23	.040
Anorexia	5	8.5	5	3.2	2.64	.104
Bulimia	1	1.7	0	0	2.64	.104
Externalizing D/O	36	61	54	35	11.78	.001*
ADHD	17	28.8	24	15.6	4.80	.028
ODD	28	47.5	20	13	29.04	>.001*
CD	24	40.7	23	14.8	16.65	>.001*

#### CONCLUSION

- Consistent with adult literature, inpatient adolescents with BPD have significantly more comorbid Axis I disorders.
- Further bolsters findings that BPD in adults and adolescents is comparable.
- Importance of assessing for BPD in adolescence.

