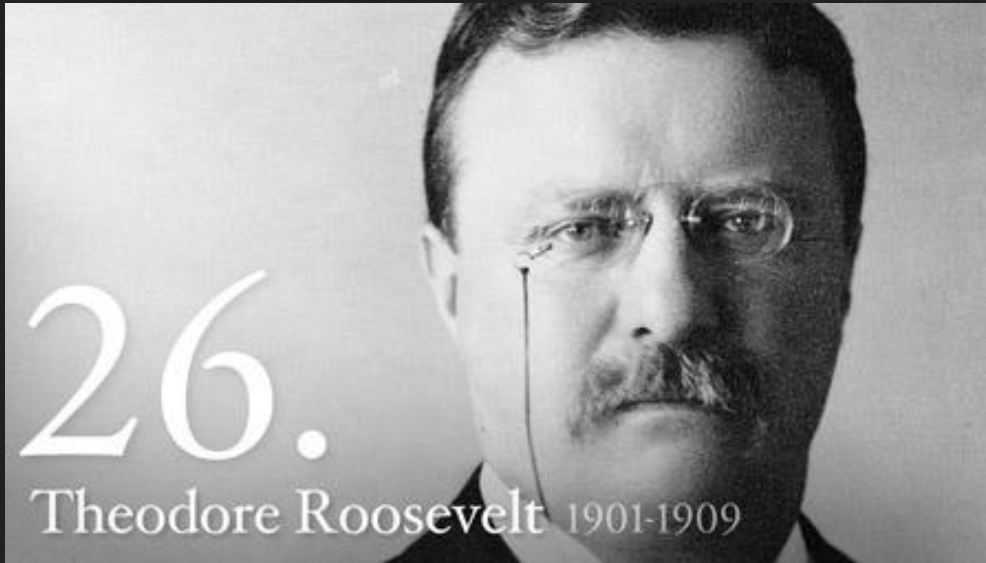


PERSONALITY DISORDERS: CLUSTER B

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26.

Theodore Roosevelt 1901-1909



32

Franklin D. Roosevelt 1933-1945

Case Vignette:

- **Huda** is a 25 yr-old single female teacher. She had an episode -of at least 2 weeks duration- of low mood associated with loss of interest, isolation, crying spells, excessive guilt feelings, death wishes, suicidal ideation and reduction in libido. Her mother has history of bipolar disorder and one of her sisters had post-partum psychosis.
- When she was 20 years, she had an episode of irritable mood, talkativeness, hyperactivities, decrease need for sleep, taking off her clothes in front of her adult brother. It lasted for 3 week.

Case Development 2:

- Premorbidly, she described herself with chronic sense of boredom, and having difficulties to keep friends.

Personality Traits

- ⦿ Characteristic ways of **thinking, feeling, and behaving** that are stable across time and across situations
- ⦿ Considered to be a **disorder** when
 - Traits are inflexible and maladaptive
 - Cause significant functional impairment and/or distress

The Question

- Are people with personality disorders qualitatively different from people without?

OR

- Are personality disorders simply extreme versions of otherwise normal personality variations?

The Answer

- Personality disorders are probably best thought of as **extremes** on one or more personality dimensions

Three Clusters

- Cluster **A**: odd/eccentric
- Cluster **B**: dramatic/erratic
- Cluster **C**: anxious/fearful

Cluster B: Dramatic or Erratic

- ⦿ Antisocial
- ⦿ Borderline
- ⦿ Histrionic
- ⦿ Narcissistic

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Antisocial Personality Disorder

- Pervasive pattern of disregard for and violation of the **rights** of others since age 15



Antisocial: DSM-IV-TR

- At least 3 sx
 - Failure to conform to **social norms** with respect to lawful behavior (repeated arrests)
 - **Deceitfulness** (repeated lying, use of aliases, conning)
 - **Impulsivity**, failure to plan ahead
 - Irritability and **aggressiveness** (repeated fights)
 - **Reckless** disregard for safety of others
 - Consistent **irresponsibility** (no steady employment, doesn't honor financial obligations)
 - **Lack of remorse** (indifferent to or rationalizes having hurt, mistreated, or stolen from others)

Antisocial: DSM-IV-TR (continued)

- Must be at least 18
- Evidence of **conduct** disorder prior to age 15
 - Violation of basic rights of others and major social rules
 - Aggression toward people and/or animals
 - Destruction of property
 - Deceitfulness or theft
 - Serious violation of rules (stays out all night, truant)

Psychopath

- ⦿ Antisocial personality disorder overlaps with personality trait called “psychopath”
 - Glib or superficial charm
 - Grandiose sense of self-worth
 - Proneness to boredom/need for stimulation
 - Pathological lying
 - Conning/manipulative
 - Lack of remorse
- ⦿ Not all psychopaths display aggressiveness that is a DSM-IV-TR criterion for antisocial personality

Antisocial: Treatment

- Prognosis for adults is poor
- Best strategy is to intervene with “high risk” children
 - Teach parents to use behavioral management principles to reduce problem behavior and increase prosocial behavior
 - Research suggests such programs reduce antisocial behavior

تتذكرونها؟ شخصية أي



Violent mood swings... Chronic depression...
Self-destructive tendencies...

**I HATE
YOU -
don't leave me**

**UNDERSTANDING
THE BORDERLINE
PERSONALITY**

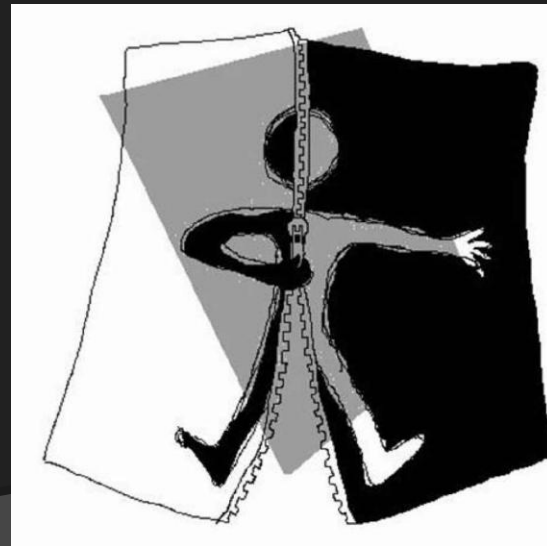
JEROLD J. KREISMAN, M.D., & HAL STRAUS

Cluster B: Dramatic or Erratic

- ⦿ Antisocial
- ⦿ **Borderline**
- ⦿ Histrionic
- ⦿ Narcissistic

Borderline Personality Disorder

- Pervasive pattern of **instability** of interpersonal relationships, self-image, and affect marked by impulsivity



Borderline: DSM-IV-TR: at least 5 sx

- ⦿ Frantic efforts to avoid real or imagined **abandonment**
- ⦿ Intense and unstable interpersonal relationships
 - Alternate between extremes of idealization and devaluation
- ⦿ Unstable **self-image** or sense of self
- ⦿ **Impulsivity** in at least 2 areas that are potentially self-damaging (sex, money)

Borderline: DSM-IV-TR (continued)

- recurrent suicidal behavior or **self-mutilation**
- emotional **instability** due to marked reactivity of mood
- chronic feelings of **emptiness**
- inappropriate, intense **anger**
- transient, stress-related **paranoid thoughts** or dissociative sx

Borderline: Causes

- ⦿ Family studies
 - Suggest genetic link
 - Suggest that BPD is linked to mood disorders
- ⦿ Early trauma
 - 91% report h/o childhood sexual or physical abuse
- ⦿ One theory
 - Child who has biological vulnerability to emotional dys-regulation and is raised by invalidating family

Borderline: Treatment

- ⦿ Few controlled studies
- ⦿ Medical
 - Many respond positively to antidepressants and Lithium

Borderline: Treatment (continued)

○ Psychological

- Dialectical behavior therapy **DBT**
 - Help people cope with stressors that trigger suicidal behaviors
 - Teach patients how to identify and regulate their emotions
 - Teach problem solving
 - Re-exposure to prior traumatic events to extinguish fear
 - Trust own responses, rather than depend on others for validation
- Reduces suicide attempts, dropouts from treatment, and hospitalizations

video

Cluster B: Dramatic or Erratic

- ⦿ Antisocial
- ⦿ Borderline
- ⦿ **Histrionic**
- ⦿ Narcissistic

Histrionic Personality Disorder

- Pervasive pattern of excessive emotionality and attention seeking



Histrionic: DSM-IV-TR: at least 5 sx

- ⦿ Uncomfortable when not the center of attention
- ⦿ Inappropriate sexually seductive or provocative behavior
- ⦿ Rapidly shifting and shallow expression of emotions
- ⦿ Consistently uses physical appearance to draw attention to self

Histrionic: DSM-IV-TR (continued)

- Speech is excessively impressionistic and lacking in detail
- Shows self-dramatization, theatricality, and exaggerated expression of emotion
- Highly suggestible
- Considers relationships to be more intimate than they actually are

Histrionic: Causes and Treatment

- Very little research
- Try to teach more appropriate ways of expressing their needs and getting their needs met
 - Point out costs associated with manipulative style



Cluster B: Dramatic or Erratic

- ⦿ Antisocial
- ⦿ Borderline
- ⦿ Histrionic
- ⦿ **Narcissistic**

Narcissistic Personality Disorder

- Pervasive pattern of grandiosity, need for admiration, and lack of empathy



Narcissistic: DSM-IV-TR: at least 5 sx

- ⦿ Grandiose sense of self-importance
 - Example: exaggerates achievements and talents
- ⦿ Preoccupied with fantasies of unlimited success, power, beauty, etc.
- ⦿ Believes he/she is special and unique
 - Can only be understood by or associate with other special high status people
- ⦿ Requests excessive admiration
- ⦿ Sense of entitlement
 - Unreasonable expectations for favorable treatment

Narcissistic: DSM-IV-TR (continued)

- Interpersonally exploitative
- Lacks empathy
- Often envious of others, or believes others are envious of him/her
- Arrogant, superior behaviors or attitudes

إيه أد بنحبكم تعرفوا لو
عليه لكم بنمشي اللي التراب حتى لتندروا

برشلونه؟ يشجع واحد كم



Narcissistic: Causes

- Little research
- One theory:
 - Grandiosity is a defense against very fragile self-esteem
 - Develops because parents do not respond with approval to child's displays of competency

قال عمر بن الخطاب رضي الله عنه
"ما وجد أحد في نفسه كبرا، الا لمهانة يجدها في نفسه"



Narcissistic: Treatment

- Little research
- Therapy focuses on grandiosity, sensitivity to evaluation, and lack of empathy

Defense Mechanisms



Sigmund
Freud

Psychoanalysis

Freud's Topographical Model

- Conscious
- Preconscious
- Unconscious

Freud's Structural Model

- Id
 - Ego
 - Superego
-
- The interplay between these structures is referred to as “the psychodynamics of the personality”.

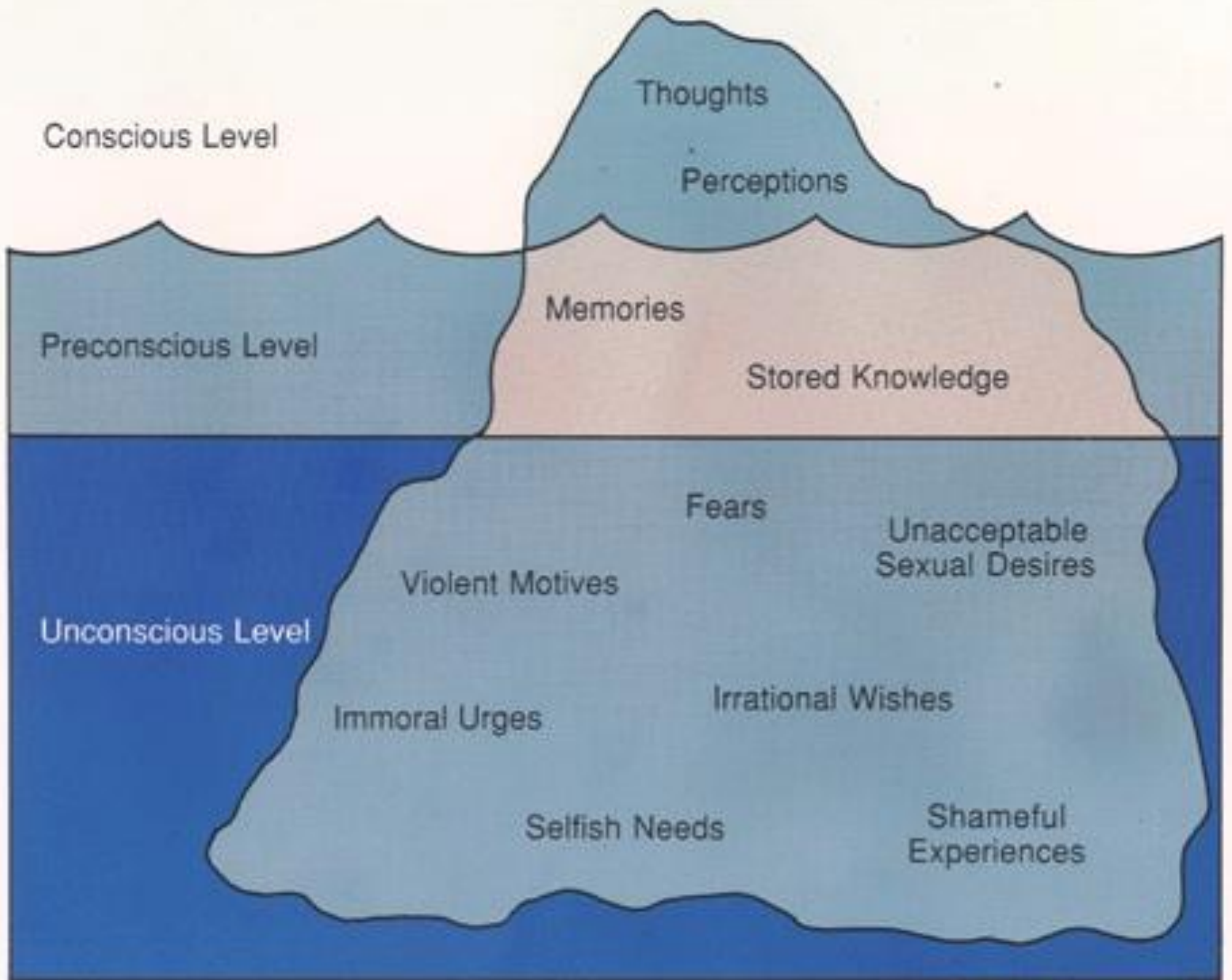
Freud's Conception of the Human Psyche

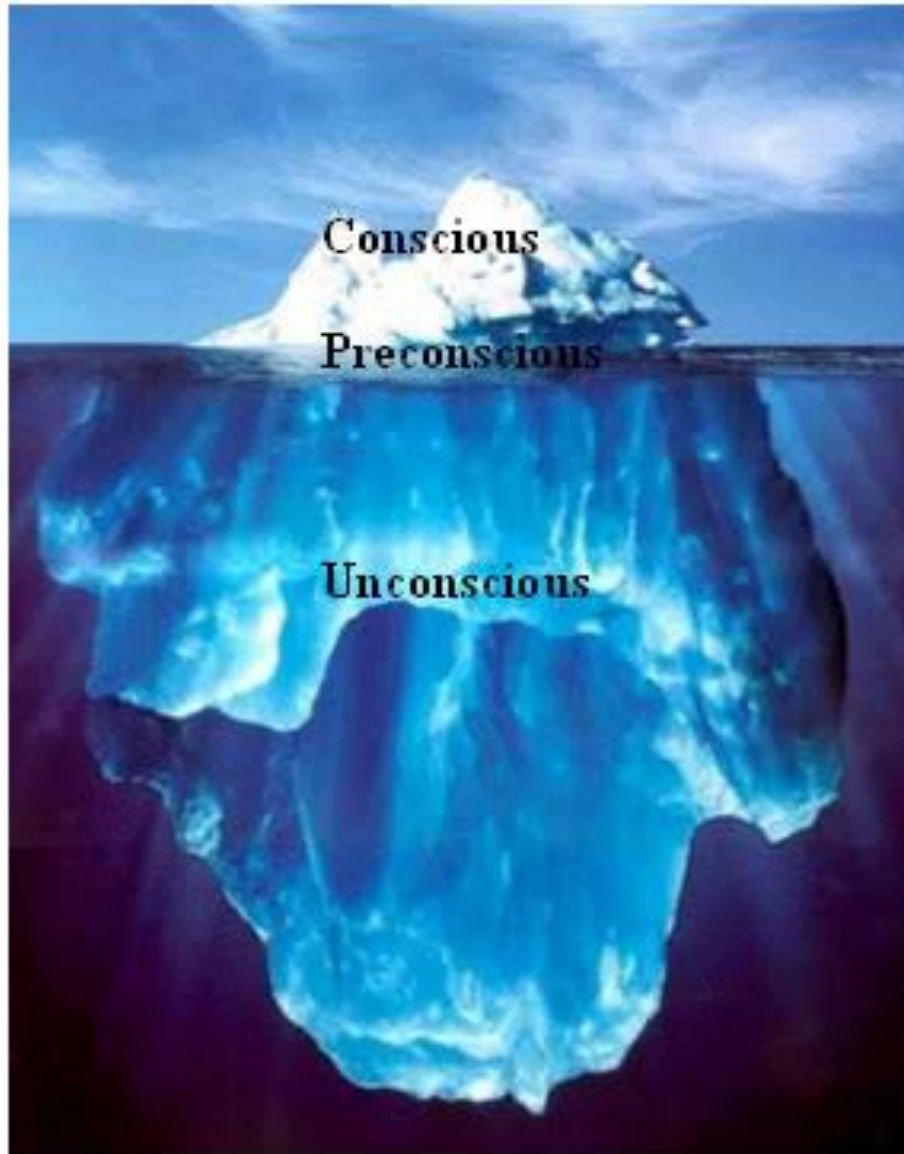
(The Iceberg Metaphor)



Nonconscious

*Note: Ego is freefloating
in all three levels





Conscious

Preconscious

Unconscious

Defense mechanisms

(DSM-IVTR, 2000)

- Defense mechanisms (or coping styles) are automatic psychological processes that protect the individual **against anxiety** and from the awareness of internal or external dangers or stressors.
- Individuals are often **unaware** of these processes as they operate.
- Defense mechanisms mediate the individual's reaction to emotional conflicts and to internal and external stressors.

DEFENSE MECHANISMS

● They are divided into:

1. **Mature**: altruism, anticipation, asceticism, humor, sublimation, suppression.
2. **Immature**: acting out, blocking, hypochondriasis, identification, introjection, passive-aggressive behavior, projection, regression, schizoid fantasy, somatization.

DEFENSE MECHANISM

- **Neurotic**: controlling, displacement, dissociation, externalization, inhibition, intellectualization, isolation, rationalization, reaction formation, repression, sexualization.
- **Narcissistic**: denial, distortion, primitive idealization, projection, projective identification, splitting.

- **Introjection:** an external object is symbolically taken in and assimilated as part of oneself
- **Identification**
- **Denial:** direct rejection of traumatic sensory data. (against external world)
- **Splitting:**

Defense Mechanisms

Displacement

Discharging pent-up feelings, usually of hostility, on objects less dangerous than those that initially aroused the emotion.

Examples:

After her new baby brother came home from the hospital the parents discovered Cheryl had dismembered her favorite doll.

Mark slams the door to the classroom after failing the exam.

Rationalization

Justifying one's failures with socially acceptable reasons instead of the real reasons.

Examples:

After Carla rejected him, Phil told friends he didn't think she was attractive, and he wasn't crazy about her anyway.

Jack told his parents he got a C in psychology because all the As and Bs went to students who cheated on tests.

Reaction formation

Transforming anxiety-producing thoughts into their opposites in consciousness.

Examples:

John has unconscious hostility toward his father but he acts very affectionate toward him.

Lucy dresses in provocative clothes although she fears she is unattractive.

Regression

Returning to more primitive levels of behavior.

Examples:

After Sue Ann's baby brother was born, she began to suck her thumb.

Mary was homesick and anxious when she started college. She slept with her favorite teddy bear again.

Repression

Blocking a threatening memory from consciousness.

Examples:

People held in concentration camps may not be able to remember what happened while there

Abuse victims sometimes don't recall events from their childhood

Denial

Refusing to admit that something unpleasant is happening, or that a taboo emotion is being experienced.

Examples:

16-year old Tom was using drugs, but his parents didn't believe the principal when told them about the problem.

50-year old Bill wears clothes that you'd see on teenagers and he drives a sports car.

Thank you