



Dansk Psykiatrisk Selskabs årsmøde 2022

## Behandling af Borderline personlighedsforstyrrelse – nu og i fremtiden



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REGION SJÆLLAND  
PSYKIATRIEN



*- vi er til for dig*

# Præsentationer

- Erik Simonsen: intro
- Mie Jørgensen: unge med BPD, tidlig indsats
- Ole Jakob Storebø: Cochrane reviews om behandling
- Bo Bach: Borderline specifikation (mønster) i ICD-11

## 10 hyppigst anvendte diagnoser i Danmark (aktions- og hoveddiagnose) 2001-2007

20.0 paranoid skizofreni

10.2 psykisk lidelse forårsaget af alkohol

43.2 tilpasningsreaktion

**60.3 emotionel ustabil personlighedsstruktur**

32.1 depressiv enkelepisode, moderat grad

**60.9 ændret personlighedsstruktur, uspecificeret**

33.1 periodisk depression, moderat grad

43.9 belastningsreaktion, uspecificeret

20.9 skizofreni, forløb ubestemt

99.9 psykisk lidelse, uspecificeret

Munk-Jørgensen P et al.:  
World Psychiatry 2010;9:183-4

## Sidste 5 års ph.d.-afhandlinger om BPD Psykiatrisk Forskningsenhed, Region Sjælland

- **Maria Willer Meisner:** Borderline conditions. A psychopathological study (2021)
- **Emma Beck:** Mentalization-based treatment in groups for adolescents with borderline personality disorder: a randomized controlled trial (2020)
- **Mie Sedoc Jørgensen:** Early Intervention for Adolescents with Borderline Personality Disorder (BPD) – Findings from a systematic review and a randomized controlled trial comparing Mentalization-based group therapy to treatment as usual for adolescents with BPD or BPD features (2020)
- **Tine Harpøth:** Positive affect in Borderline Personality Disorder. Using diary methods in daily life and single-case intervention research (2019)
- **Marianne Skovgaard Thomsen:** Neuropsychological functioning in women with Borderline Personality Disorder: a clinical study of cognitive dysfunctions associated with childhood trauma, Borderline Personality dimensions and changes in cognition after six months of Mentalization Based Therapy (2016)
- **AFHANDLINGER KAN DOWNLOADES**

Vol. 132 No. 1 January 1975

**THE AMERICAN JOURNAL  
OF PSYCHIATRY**

John G. Gunderson & Margaret T. Singer

**Defining Borderline Patients**

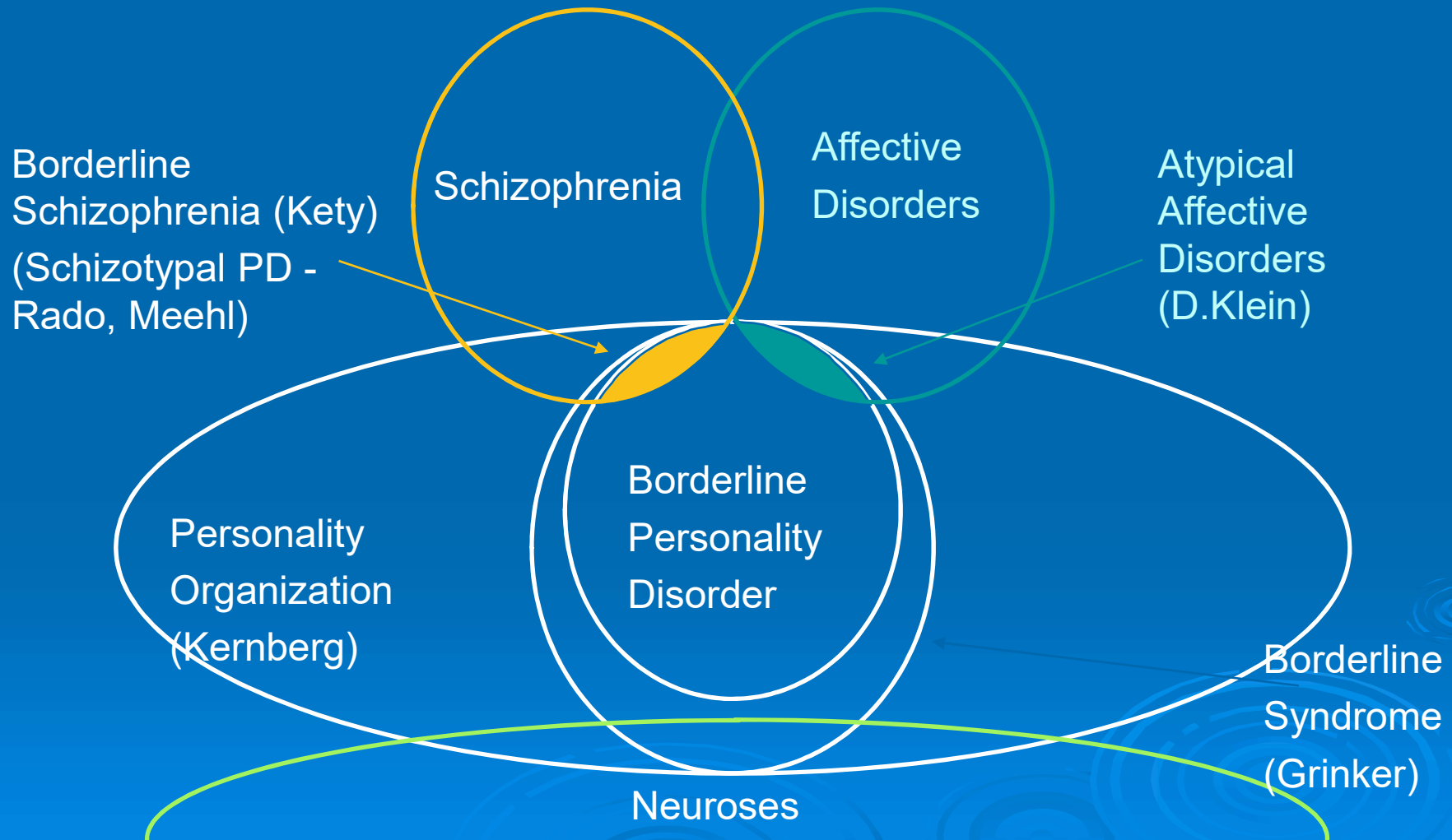
# Borderline personlighedsforstyrrelse

1. Desperate anstrengelser på at undgå at blive svigtet eller forladt i virkeligheden eller i fantasien
2. Mønster med ustabile og intense interpersonelle forhold kendetegnet ved en svingen mellem ekstremer af idealisering og nedvurdering
3. Identitetsforstyrrelse: markant og vedholdende ustabil selvopfattelse eller selvforneelse
4. Impulsivitet på mindst to områder, som er potentielt selvskadende (fx forbrug, sex, stofmisbrug, hensynsløs kørsel, ædeflip). (NB: inddrag ikke suicidal adfærd eller selvmutilerende adfærd dækket af punkt 5)

# Borderline personlighedsforstyrrelse

5. Gentagne tilfælde af suicidal adfærd, gestus eller trusler eller selvmutilerende adfærd
6. Affektlabilitet, som skyldes en markant stemningsreaktivitet (fx intens episodisk dysfori, irritabilitet eller angst, der som regel varer nogle få timer og sjældent mere end nogle få dage)
7. Kronisk følelse af tomhed
8. Upassende, intens vrede eller vanskeligheder ved at kontrollere vrede ( fx hyppige udslag af temperament, konstant vrede, gentagne tilfælde af fysiske slagsmål)
9. Forbigående, stressrelaterede paranoide forestillinger eller svære dissociative symptomer

## Concepts of Borderline Disorders (Gunderson)





# BPD differentialdiagnostik

**Schizophrenia (1970's)**

**Depression (1980's)**

**PTSD (1990's) – angsttilstande.....**

**Bipolar disorder II (2000's)**

No. 379. Vol. 89. 1994

Proceedings of the Scandinavian Symposium on  
Borderline Conditions

April 16-17, 1993, Copenhagen, Denmark

Editors: Erik Simonsen, Raben Rosenberg & Morten Birket-Smith

## **Borderline Personality Disorder: Ontogeny of a Diagnosis**

**Am. Journal Psychiatry (2009); 166 (5): 530-9**


“Borderline personality disorder has moved from being a psychoanalytic colloquialism for untreatable neurotics to becoming a valid diagnosis with significant heritability and with specific and effective psychotherapeutic treatments.

Nonetheless, patients with this disorder pose a major public health problem, while they themselves remain highly stigmatized and largely neglected”

John Gunderson



# Kliniske spørgsmål

- Social prognose dårlig, kan vi sætte tidligt ind?
  - Mange specialiserede psykoterapier, er der evidens for det virker og hvad med psykofarmakologisk behandling?
  - Hvordan vil borderline ptt. være beskrevet i ICD-11, hvordan vil behandlingen blive?
- 



## Welfare consequences of early-onset Borderline Personality Disorder: a nationwide register-based case-control study

Lene Halling Hastrup<sup>1</sup> · Poul Jennum<sup>2</sup> · Rikke Ibsen<sup>3</sup> · Jakob Kjellberg<sup>4</sup> · Erik Simonsen<sup>1,5</sup>


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### Abstract

Information regarding welfare consequences of early onset of Borderline Personality Disorder (BPD) is limited. This nationwide study aimed to estimate the educational and employment outcome and health care costs of patients with early-onset BPD compared with matched controls. All patients (< 19 years) with first diagnosis of BPD in the Danish Patient Register (NPR) during the period 1983–2015 were included. Health care costs and socioeconomic variables were extracted from national registers. A total of 171 patients was compared with 677 controls. At the age of 20 years, BPD patients had reached a statistically significantly lower educational level (including lower primary school grades) and employment status compared with the controls. When adjusting for the parents' educational level, BPD patients were nearly 22 times more likely to be unemployed (OR = 21.7, 95% CI 11.9, 39.6), and nearly 15 times more likely to be on disability pension (OR = 14.8, 95% CI 5.0, 43.9) than controls. Furthermore, the total health care costs were more than 8 times higher in the BPD group. Early onset of BPD was associated with lower educational and vocational outcome and increased health care costs as early as at the age of 20 years. Even after controlling for parents' lower socioeconomic status, the patients have poorer outcome than the control group. This underlines that initiatives to support patients in finishing school and secondary education is highly needed. Future prevention and early intervention programs should target patients with early-onset BPD and their families.

15 gange højere risiko for pension, kommunerne må sætte ind, behandlingspsykiatrien fange BPD tidligere

# Evidens for behandling af Borderline?

  
Cochrane Database of Systematic Reviews

**Psychological therapies for people with borderline personality disorder (Review)**


Storebø OJ, Stoffers-Winterling JM, Völlm BA, Kongerslev MT, Mattivi JT, Jørgensen MS, Faltinsen E, Todorovac A, Sales CP, Callesen HE, Lieb K, Simonsen E

Storebø OJ, Stoffers-Winterling JM, Völlm BA, Kongerslev MT, Mattivi JT, Jørgensen MS, Faltinsen E, Todorovac A, Sales CP, Callesen HE, Lieb K, Simonsen E.  
Psychological therapies for people with borderline personality disorder.  
Cochrane Database of Systematic Reviews 2020, Issue 5. Art. No.: CD012955.  
DOI: 10.1002/14651858.CD012955.pub2.

[www.cochranelibrary.com](http://www.cochranelibrary.com)

Psychological therapies for people with borderline personality disorder (Review)  
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Cochrane Database of Systematic Reviews

**Pharmacological interventions for people with borderline personality disorder (Review)**

Stoffers-Winterling JM, Storebø OJ, Pereira Ribeiro J, Kongerslev MT, Völlm BA, Mattivi JT, Faltinsen E, Todorovac A, Jørgensen MS, Callesen HE, Sales CP, Simonsen E, Lieb K

Stoffers-Winterling JM, Storebø OJ, Pereira Ribeiro J, Kongerslev MT, Völlm BA, Mattivi JT, Faltinsen E, Todorovac A, Jørgensen MS, Callesen HE, Sales CP, Simonsen E, Lieb K.  
Pharmacological interventions for people with borderline personality disorder.  
Cochrane Database of Systematic Reviews 2018, Issue 2. Art. No.: CD012956.  
DOI: 10.1002/14651858.CD012956.

[www.cochranelibrary.com](http://www.cochranelibrary.com)

Pharmacological interventions for people with borderline personality disorder (Review)  
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# ICD-11 personlighedsforstyrrelser

de generelle kriterier

selvet & interpersonel funktion,  
områder af personligheden påvirket,  
ubehag og funktionsnedsættelse

vurdering af sværhedsgrad

Intet, problemer, mild, moderat, svær

trækdomæner

negativ affektivitet  
tilbagetrækning  
dyssocialitet  
manglende hæmning  
anankasme

 borderline mønster

DSM borderline kriterier plus ekstra

## Borderline specifikation (ICD-11)

De 9 kriterier fra DSM-5: men ekstra er tilføjet som uddybende beskrivelser:

Usikkert negativt selvbillede

En følelse af fremmedhed, at være anderledes, isoleret og ensom

Hypersensitivitet overfor afvisning, problemer med at etablere og vedligeholde tillid i forhold samt mistydning af sociale signaler (social kognition)