Schizotypal personality disorder inside and outside the schizophrenic spectrum


Department of Psychology, Center for Research in Clinical Psychology, Oslo University, PO Box 1039, Blindern, N-0315 Oslo, Norway

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Abstract

The concept of schizotypal personality disorder has been heavily discussed since its introduction into the official classification of mental disorders in DSM-III. The aim of this study was to investigate the difference between schizotypal personality disorder within and outside the genetic spectrum of schizophrenia. Schizotypals with and without schizophrenic cotwins and first-degree relatives were compared, with individuals with other mental disorders and no mental disorders as controls. It appeared that only inadequate rapport and odd communication were more pronounced among schizotypals within, compared to schizotypals outside the schizophrenic spectrum. Schizotypals outside the schizophrenic spectrum, however, scored higher than schizotypals inside the schizophrenic spectrum on ideas of reference, suspiciousness, paranoia, social anxiety, self-damaging acts, chronic anger, free-floating anxiety and sensitivity to rejection. Interestingly, the four last features are seldom observed among schizotypals inside the schizophrenic spectrum. Monozygotic non-schizophrenic cotwins of schizophrenics score high on inadequate rapport, odd communication, social isolation and delusions/hallucinations. Monozygotic non-schizophrenic cotwins of schizotypals outside the schizophrenic genetic spectrum score high on illusions, depersonalization, derealization and magical thinking. Negative schizotypal features appear to be inside the schizophrenic spectrum, while positive borderline-like features are outside having another genetic endowment. © 2002 Elsevier Science B.V.

Keywords: Schizophrenia; Schizotypal; Borderline; Positive schizotypy; Negative schizotypy

The borderline between neuroses, psychoses and character deviance has been designated by different words: pseudoneurotic schizophrenia, pseudopsychopathic neurosis, preneuroses, borderline schizophrenia, latent psychoses, latent schizophrenia, ambulatory schizophrenia, and finally, schizotypia.

Spitzer et al. (1979) made an effort to differentiate between those patients who were similar to non-psychotic relatives of patients with schizophrenia and those with borderline features who were outside the schizophrenia familial spectrum. Their point of departure was the concept of borderline schizophrenia from the Danish adoption studies (Kety et al., 1968), and Gunderson and Singer’s (1975) list of features of borderline conditions from the literature. The factor analytic differentiation, based on clinicians’ ratings of their patients, formed the basis for the two DSM-III
diagnoses; schizotypal (SPD) and borderline personality disorders (BPD), the former supposedly related to schizophrenia, the latter describing an unstable personality deviation outside the schizophrenic spectrum. Gunderson and Siever (1985) later showed that SPD did not satisfactorily describe the features of the adopted-away relatives of patients with schizophrenia. A number of articles in an issue of Schizophrenia Bulletin in 1985 (Gunderson and Siever, 1985; Kendler, 1985; Siever, 1985; Torgersen, 1985) maintained that the criteria of SPD should be changed, if a “true” schizotypal personality disorder were to be defined.

The articles in this issue of Schizophrenia Bulletin in 1985 did not result in any substantial change in the criteria of SPD and BPD in DSM-III-R. However, together with a later article of Zanarini et al. (1990), there arose a ninth criterion: “transient, stress-related paranoid ideation or severe dissociative symptoms” which was included in BPD in DSM-IV.

One way to search for the “true” schizotypal schizophrenia-related SPD is to go back to the original process and look for features among the relatives of schizophrenic patients. Perhaps the most potent method is to examine the characteristics of the non-schizophrenic cotwins of schizophrenic patients. In a study by Torgersen et al. (1993), odd behavior, odd speech, inappropriate affects and excessive social anxiety were more often observed among especially the MZ cotwins of patients with schizophrenia.

The aim of this study is to investigate a broad realm of schizotypal-borderline features among persons with SPD who are cotwins and not cotwins of schizophrenic individuals. Our hypothesis was that personality features inside the spectrum of schizophrenia would be more withdrawn, eccentric, affect-inhibited and less flamboyant than outside the spectrum.

1. Methods

The subjects are partly from the earlier mentioned twin study (Torgersen et al., 1993), and partly from the extended sample (Torgersen et al., 2000). The zygodity testing by means of a questionnaire (Torgersen, 1979) and sampling is described elsewhere (Onstad et al., 1993; Torgersen et al, 2000). Baron’s (1980) Schedule for Interviewing Borderlines (SIB) including Schedule for Schizotypal Personalities (SSP) and Schedule for Borderline Personalities (SBP) was applied to assess schizotypal and borderline features. The Structured Clinical Interview for DSM-III Axis I (SCID-I) was used to diagnose schizophrenia (Spitzer and Williams, 1985a) and the Structured Clinical Interview for DSM-III-R Axis II (SCID-II-R) to diagnose personality disorders (Spitzer and Williams, 1985b). The reliability of the diagnoses was assessed on the basis of ratings by two independent judges listening to the recorded interview made by a third person. The Kappa coefficient between the three raters was 0.94 for schizophrenia and 0.79 for schizotypal personality disorder.

The sample was separated into four groups (Table 1). Group 1 consists of individuals with schizotypal personality disorder who are MZ or DZ cotwins or first-degree relatives of the schizophrenic index twins. Group 2 consists of individuals with schizotypal personality disorder who are not relatives of individuals with schizophrenia. Group 3 are individuals with other axis I and axis II disorders who are not cotwins or first-degree relatives of those with schizophrenia or schizotypal personality disorder. Finally, group 4 consists of individuals without psychiatric disorders who are also not cotwins or first-degree relatives of individuals with schizophrenia or schizotypal personality disorder. No schizophrenic individuals are included in the groups.

The mean age of group 1 was 45.0 years, standard deviation 11.9 and range 32–69. The mean age of group 2 was 44.1 years, standard deviation 13.7 and range 21–77 years. The mean age of group 3 was 52.1 years, standard deviation 14.3 and range 19–87 years. Finally, the mean age of group 4 was 52.9 years, standard deviation 15.5 years and range 19–87 years. The difference was statistically significant \( p > 0.05 \) with Bonferroni correction (one-way analysis of variance, \( F \)-ratio = 4.07, \( p = 0.0071 \)) between group 2 on the one hand and groups 3 and 4 on the other hand. The frequency of women was 36% in group 1, 59% in group 2, 63% in group 3 and 47% in group 4 (\( \chi^2 = 14.8, p = 0.002 \)).

2. Results

Table 1 presents the differences between the four groups on schizotypal and borderline features measured by SIB (SSP and SBP) and converted to standard
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