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Sustained efficacy of dialectical behaviour therapy for borderline personality disorder

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Abstract

Dialectical Behaviour Therapy (DBT) is considered one of the most promising treatments for borderline personality disorder (BPD). Recently, we reported significantly positive effects of 12 months DBT on parasuicidal behaviour and impulsivity in a mixed group of female BPD patients with and without substance abuse. Fifty-eight women with BPD were randomly assigned to either 52 weeks of DBT or treatment as usual (TAU). Follow-up assessment took place at 78 weeks, i.e., 6 months after discontinuation of DBT. Participants were clinical referrals from addiction treatment and psychiatric services. Outcome measures included parasuicidal behaviour, impulsivity and substance abuse. Six months after treatment discontinuation, the benefits of DBT over TAU in terms of lower levels of parasuicidal and impulsive behaviours, and in alcohol use, sustained. No differences between the treatment conditions were found for drug abuse. In conclusion, DBT seems to have a sustained effect on some of the core symptoms

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of BPD and on alcohol problems in a mixed population of female borderline patients with and without substance abuse problems.

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1. Introduction

Borderline Personality Disorder (BPD) is a persistent and severe mental disorder ([American Psychiatric Association, 1994](#)). It is, therefore, extremely important to develop and test treatment interventions with beneficial effects that sustain beyond the actual treatment period and that significantly improve the course of BPD. In a recent 12 months randomized controlled trial, we replicated the positive short-term effects of Dialectical Behaviour Therapy (DBT) originally reported by the developer of DBT ([Verheul et al., 2003](#); [Linehan, Armstrong, Suarez, Allmon, & Heard, 1991](#)).

With the exception of some data from a small, naturalistic follow-up study ($n = 39$: DBT = 19; TAU = 20), currently no data are available on the long-term efficacy of DBT in the treatment of BPD ([Linehan, Heard, & Armstrong, 1993](#)). This study examines whether the treatment results, observed at the end of treatment, sustain over 6 months follow-up.¹

2. Method

2.1. Participants

This study is a randomized controlled trial, comparing 58 female borderline patients in a mixed population of borderline patients with ($n = 31$) and without ($n = 27$) substance abuse problems recruited from mental health institutions ($n = 39$) and addiction treatment services ($n = 19$). Patients were randomized to either 12 months Dialectical Behaviour Therapy (DBT: $n = 27$) or treatment as usual (TAU: $n = 31$). More detailed information about the design of the study can be found in an earlier publication ([Verheul et al., 2003](#)). All therapists who referred patients for the trial were requested to formally agree with the study conditions, including both termination of other treatment if the patient would be assigned to DBT and willingness to provide TAU if not assigned to DBT. The inclusion criteria were: female, age 18–65 years, DSM-IV diagnosis of BPD according to the Structured Clinical Interview for DSM-IV Axis II (SCID-II; [Spitzer, Williams, Gibbon, & First, 1990](#)) with at least six diagnostic criteria of BPD present. The exclusion criteria were: a DSM-IV diagnosis of bipolar disorder or (chronic) psychotic disorder, insufficient command of the Dutch language, and severe cognitive impairments. The presence of co-morbid substance abuse problems was based on severity ratings on the European version of the Addiction

¹In 1999 Linehan examined the efficacy of an extended and changed DBT program (DBT-S) for drug-dependent BPD patients. The implications of this study for our research findings are discussed in [van den Bosch, Verheul, Schippers, and van den Brink \(2002\)](#).

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