

BORDERLINE PERSONALITY DISORDER IN THE ACUTE INPATIENT PSYCHIATRIC ASSESSMENT UNIT OF HELEN JOSEPH HOSPITAL

Dr. Laila Paruk

A research report submitted to the Faculty of Health Sciences, University of Witwatersrand, in partial fulfilment of the requirements for the degree of

Master of Medicine in the branch of Psychiatry

Supervisor: Adj. Prof. ABR Janse van Rensburg

Johannesburg, 2013

DECLARATION

I, Dr. Laila Paruk, declare that this research	ch report is my own work. It is being
submitted in partial fulfilment of the require	ements for the degree of Master of
Medicine in the branch of Psychiatry. It has	as not been submitted before for any
degree or examination at this or any other	University.
	_
day of	2013

DEDICATION

This work is dedicated to my three boys - Sharif, Ziyad and Mateen - for their unconditional love and support throughout the course of this research report.

ACKNOWLEDGEMENTS

I would like to acknowledge:

- My supervisor, Adj.Prof. Bernard Janse van Rensburg, for his support and guidance.
- Ass.Prof. Elena Libhaber, for her assistance with the planning of the statistical analysis of the data.
- Dr. Alison Bentley, for assisting with the interpretation of processed data.

ABSTRACT

The aim of this report was to establish the profile of all the patients with borderline personality disorder admitted to the Acute Inpatient Psychiatric Assessment Unit at the Helen Joseph Hospital over the course of one year.

A retrospective record review was conducted to investigate the prevalence, demographics, reasons for admission, treatment and length of stay of the group of patients that was selected based on discharge diagnosis and DSM-IV-TR criteria, that were admitted throughout the course of 2010. The follow-up plan upon discharge was also reviewed.

Statistical data analysis revealed findings mainly in keeping with international norms. The length of stay of patients with borderline personality disorder exceeded the average length of stay of all the patients in the ward in 2010, which illustrates that these patients are above-average users of resources.

Patients with borderline personality disorder were shown in the review to be extremely inconsistent with regards to scheduled follow up plans, however significantly used emergency services at the hospital. Implementation of targeted prevention and early intervention strategies, based on systematised programs such as dialectical behavioural therapy and mentalisation-based therapy, may be useful in addressing this.

This report supports further research into the utilisation of services available for patients with borderline personality disorder in the wider context of both psychiatric and psychological interventions in Southern Gauteng.

DOCUMENT OVERVIEW

Declaration	ii
Dedication	iii
Acknowledgments	iv
Abstract	٧
Document overview	vi
Table of contents	vii
Table of figures	ix
List of tables	xi
Table of appendices	xii

TABLE OF CONTENTS

Pa	ge
Chapter 1 Introduction	
1.1 Literature review	1
1.2 Study objectives	5
Chapter 2 <u>Methods</u>	
2.1 Study design1	7
2.2 Study population1	7
2.3 Data collection17	7
2.4 Data analysis18	8
2.5 Ethics	9
Chapter 3 Results	
3.1 Age	20
3.2 Gender2	1
3.3 Ethnicity2	22
3.4 Number of previous admissions	22
3.5 Reasons for admission2	23
3.6 DSM IV criteria2	:5
3.7 Co-morbidities	7
3.8 Treatment on discharge2	8
3.9 Length of stay30	0
3.10 Discharge plan3	0
Chapter 4 Discussion3	3
Chapter 5 Conclusion39	9
References44	4

۸n	nondicos		
Λþ	pendices	 	

- 1. Appendix A. Management of Personality Disordered Patients on Ward 2
- 2. Appendix B. Data sheet
- 3. Appendix C. Letter of approval of protocol
- 4. Appendix D. Ethics clearance by the Human Research Ethics Committee of the University of the Witwatersrand (M110210).

TABLE OF FIGURES

Figure 1: Proportion of patients with borderline personality disorder admitted to	
the acute psychiatric unit at HJH during 2010	20
Figure 2: Age categories of patients with borderline personality disorder admitted	
to the acute psychiatric unit at HJH during 2010	21
Figure 3: Gender of patients with borderline personality disorder admitted to the	
acute psychiatric unit at HJH during 2010	21
Figure 4: Race of patients with borderline personality disorder admitted to the	
acute psychiatric unit at HJH during 2010	22
Figure 5: Number of previous admissions of patients with borderline personality	
disorder admitted to the acute psychiatric unit at HJH during 2010	. 23
Figure 6: Reasons for admission of patients with borderline personality disorder	
admitted to the acute psychiatric unit at HJH during 2010	. 24
Figure 7: Multiple reasons for admission of patients with borderline personality	
disorder admitted to the acute psychiatric unit at HJH during 2010	. 24
Figure 8: Number of patients fulfilling DSM-IV-TR criteria for borderline	
personality disorder admitted to the acute psychiatric unit at HJH during 2010	25
Figure 9: Number of classes of medication on discharge of patients with borderline)
personality disorder at HJH during 2010	. 28
Figure 10: Type of medication on discharge of patients with borderline personality	
disorder admitted to the acute psychiatric unit at HJH during 2010	. 29

Figure 11: Length of stay of patients with borderline personality disorder admitted	
to the acute psychiatric unit at HJH during 2010	30
Figure 12: Discharge plans for patients with borderline personality disorder admitted to the acute psychiatric unit at HJH during 2010	. 31
Figure 13: Tracking of patients after being discharged with a diagnosis of	
borderline personality disorder	. 32

LIST OF TABLES

Table 1: Diagnosis given by treating doctor to patients with borderline personality
disorder admitted to the acute psychiatric unit at HJH during 2010 26
Table 2: Comparison of BPD diagnosis per clinical data and per DSM IV-TR
diagnostic criteria
Table 3 : Co-morbidities of patients with borderline personality disorder admitted to
the acute psychiatric unit at HJH during 201027

5. **TABLE OF APPENDICES**

Appendix A. Management of Personality Disordered Patients on Ward 2

Appendix B. Data sheet

Appendix C. Letter of approval of protocol

Appendix D. Ethics clearance by the Human Research Ethics Committee of the University of the Witwatersrand (M110210).