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Aims

NICE guidance (2009) advises not to use drug treatment specifically for Borderline Personality Disorder (BPD) or for the individual symptoms or behaviour associated with it. Despite this, the Prescribing Observatory in Mental Health (POMH UK, 2012) found that 82% of Personality Disorder patients with no co-morbid mental illness were prescribed at least one psychotropic medication. We aimed to assess characteristics of patients with BPD and their use of medication in an inpatient population.

Method

The population included 100 discharges from four acute inpatient wards in Sheffield, U.K., with a diagnosis of Emotionally Unstable Personality Disorder (F60.3 and F60.31) from April 2012 to April 2013.

Results

Of the 100 discharges, 69% were female, 91% unemployed, 59% single and 98% admitted under the Mental Health Act. Hospitalisation was usually after a crisis: 68% reported suicidal ideation, 37% a suicide attempt and 13% risk of harm to others. Most common co-morbid diagnoses were depression, (18%) illicit drug related disorders (7%), alcohol related disorders (5%) and schizophrenia (5%). Medications prescribed included antipsychotics (57%), antidepressants (66%), anxiolytics (38%), hypnotics (31%), and mood stabilisers (19%). Drug treatment specifically for BPD (e.g. repeated self-harm, marked emotional instability, risk-taking behaviour and transient psychotic symptoms) was prescribed to 80% of patients.

Conclusions

Findings highlight that despite national guideline recommendations, patients with BPD continue to be prescribed psychotropic medications in clinical practice. As most admissions are associated with crises, a comprehensive crisis plan including (only if indicated) appropriate use of medication is essential in helping during periods of distress.