

PERSONALITY DISORDER

CLUSTER A *Weird*

PARANOID

- Don't trust others
- Think everyone is out to get them
- Easily aggravated

SCHIZOID

- Introverted
- No desire for friends
- Apathetic & limited range of emotions

SCHIZOTYPAL

- Odd, nerdy & awkward
- Magical thinking
- Social withdrawal

CLUSTER B *Wild*

ANTISOCIAL

- Psychopaths, exploit others without guilt
- Violate other's rights
- Criminals (often appear charming)

TREATMENT:

- ▶ Insufficient evidence to justify psychotherapy
- ▶ Insufficient evidence for pharmacotherapy
 - May be effective: nortriptyline, bromocriptine, phenytoin

BORDERLINE

- Drastic mood swings
- Poor impulse control
- Suicide & self-mutilation during emotional outbursts

TREATMENT:

- ▶ Substantial support for psychotherapy (DBT)
- ▶ Pharmacotherapy = symptom-based
 - Affective dysregulation = SSRI/haloperidol
 - Impulsive/aggressive = SSRI/haloperidol/lithium
 - Cognitive/perceptual = low-dose antipsychotic
- ▶ SGAs, mood stabilizers & omega-3 FA's = some benefits

HISTRIONIC

- Overly dramatic, colorful & flirtatious
- Need to be the center of attention

NARCISSTIC

- Egotistical, sense of entitlement, require recognition
- May exploit others for power and prestige

CLUSTER C *Wimpy*

AVOIDANT

- Wish they had friends but they don't
- Insecure & scared of rejection
- Very shy, feelings of adequacy

DEPENDENT

- Low self-esteem, cling, reliant on others
- Surrender important responsibility
- Regression

OBSESSIVE COMPULSIVE

- Extreme perfectionist, workaholics
- Organization lists, schedules
- Need to control everything

Descriptions for PDs from "Crash Course in PDs" video shown in class

TREATMENT

PSYCHOTHERAPY: dialectic behavioral therapy (DBT), cognitive behavioral therapy (CBT), interpersonal therapy (IPT), family-focused therapy, group therapy

PSYCHOTHERAPY: no meds specifically approved to treat PDs; several classes of psychiatric meds can be used to help with various symptoms accompanied with PD

- ▶ Antidepressants (SSRIs, SNRIs, TCA)
- ▶ Antipsychotics (FGA, SGA, TGA)
- ▶ Mood stabilizers
- ▶ Anxiolytics

NON-DRUG: avoid drugs and alcohol, journal writing, stay connected with family & friends, get involved, support group, relaxation & stress management