



This pamphlet has been written to explain Borderline Personality Disorder, also known as BPD. If you have any questions or comments after reading this, please discuss this with your case manager or doctor.

What is Borderline personality disorder?

BPD is a term used to describe a pattern of problems that usually start in adolescence or early adulthood and affect most areas of life, causing the person significant distress over a number of years. It is possible to have many of these problems or only a few. They include:

Unstable emotions

People with BPD usually describe that their emotions (feelings) often change suddenly. One minute they feel OK, the next they feel very sad or angry or anxious. This is often confusing for the person with BPD and for other people. People with BPD often describe trouble controlling their temper and can feel angry very easily, resulting in fights or verbal or physical outbursts.

Problems with identity, self-image and thinking

People with BPD often describe feeling that they don't know who they really are or feel that their sense of who they are is unstable. Sometimes this is described as a disturbing feeling of being empty or 'hollow' inside. When stressed, people with BPD sometimes describe unusual experiences, such as feeling like suddenly everything is no longer real, like they are in a dream, or they might become overwhelmed by their suspicion of other people. These experiences usually go away when no longer stressed.

Relationship problems

People with BPD often experience difficulties managing their relationships with others. Their relationships are often intense but stormy, with lots of break-ups and reunions. They can suddenly shift from feeling like others are 'perfect' to feeling angry, betrayed and let down. Some people with BPD describe a sense of panic when a relationship ends or even just at the thought that it might end. This can lead them to behave in desperate ways in order to stop people from leaving them.

Behaviour

People with BPD usually describe acting before they think through the consequences of their actions. This is called impulsive behaviour. As a result, they often end up doing things that they later regret or take risks that are likely to lead to harmful consequences. Commonly, this involves spending money that they don't really have, unplanned or uncontrollable drug and alcohol use or taking risks with sexual behaviour. A common and serious form of impulsive behaviour in BPD involves repeated thoughts of suicide or repeated acts of deliberate self-harm, such as self-cutting or self-poisoning ('overdosing'). This is often done during periods of intense distress, sadness, anger or irritability. Often, people describe using these methods to manage their feelings but like other forms of impulsive behaviour, they often regret it later.

What causes BPD?

Scientific research tells us that personality characteristics are shaped by the interaction of the genes we are born with and the environment in which we grow up. Painful experiences, such as loss, abuse or other traumatic events are common in BPD but there is no single 'cause' of BPD. It is likely that a combination of factors leads to BPD and that this combination might differ for each individual.

How common is BPD?

BPD occurs in approximately 3% of young people in the community. It is more common in females than males and also more common in young people than older people.

Isn't this just 'normal adolescence'?

While any one of the problems described above might be familiar to young people, it is the number and severity of the problems that make BPD a mental health problem. BPD improves over time. However, young people who have some or all of the features of BPD have an increased risk of serious problems that can continue into adulthood. These include persistent BPD, drug and alcohol problems, depression, relationship problems and suicide.



What can treatment do?

Specialised mental health treatment for BPD is effective. There is now scientific research showing that early intervention for BPD is also effective. The Early Intervention approach to BPD aims to help young people with some or many of the features of BPD, before problems become established. It is also usual for people with BPD to have other mental health, social and educational or work problems at the same time and these problems also need to be addressed.

DISCUSS



Services at Orygen Youth Health - Clinical Program (OYH-CP) www.oyh.org.au

Orygen Youth Health Clinical program is able to assist some young people (15-24) with BPD and BPD features who live in Western or Northwestern Metropolitan Melbourne.

To make a referral or get some advice contact the **OYH-CP** Triage worker on 1800 888 320 or via the paging service on 03 9483 4556.

For children and teenagers under 15 years of age living in Western or Northwestern Metropolitan Melbourne contact RCH Mental Health Service on 1800 445 511.

For further information regarding mental health and information in other languages visit:

- > www.betterhealth.vic.gov.au
- > www.sane.org.au
- > www.healthinsite.gov.au
- > www.borderlinepersonalitydisorder.com
- > www.bpddemystified.com
- > www.reachout.com.au