Understanding Mental Disorders

Personality Disorders - Borderline Personality Disorder

Maria's Story

Maria, a single woman without a job, sought therapy at age 33 for treatment of depressed mood, chronic thoughts of killing herself, and having no social contact for many months. She had spent the last 6 months alone in her apartment, lying in bed, eating junk food, watching TV, and doing more online shopping than she could afford. Maria was the middle of three children in a wealthy immigrant family.

The father was said to value work success over all else. He often cursed at and hit all three children, Maria most of all. She felt alone through her school years and had bouts of feeling depressed. Within her family, she was known for angry outbursts. She had done well in high school but dropped out of college because of problems with a roommate and a professor. She had a series of jobs with the hope that she would return to college, but she kept quitting because "bosses are idiots." These "traumas" always left her feeling bad about herself ("I can't even succeed as a clerk!") and angry at her bosses ("I could run the place better than any of them").

She had dated men when she was younger but after a few weeks of "bliss at finding the perfect partner," she would feel hurt and angry when they did not pay enough attention to her or return her calls fast enough. She would end the relationship before they could "hurt me even more."

Maria sometimes cut herself (would make herself bleed using a knife on purpose) when she was feeling empty and depressed. She said that she was often "down and depressed," but that dozens of times for 1–2 days, she would act on impulse with great risk to her safety. This involved drug abuse and reckless driving. Doing these things would often make her feel better.

She had been in psychiatric treatment since age 17 and had stayed in a psychiatric hospital three times after overdoses. During the session, Maria described shame at her lack of job success. She believed she was very able and simply didn't know why she hadn't done better in life. Toward the end of the first session, she became angry with the doctor after he glanced at the clock (asking him, "Are you bored?"). In terms of social contact, she said she knew people who lived in her building, but most of them had become "frauds or losers." There were a few people from school who were "online friends" on social Web sites who were doing "big things all over the world."

Maria was diagnosed with *borderline personality disorder* and *major depressive disorder*. She could not stay at jobs or in school and has problems with anger control, reckless acts, self-harm (such as cutting), feeling empty, and paranoid thoughts. Maria refused prescribed medications, stating, "When I take those drugs, I have no feelings. I can't even cry at a sad movie." Instead, she was referred for a form of psychotherapy called dialectical behavior therapy or DBT. It helps people know and manage their thoughts and feelings and teaches calming methods. DBT helped Maria learn how to feel more in control of her extreme feelings, as well as when she felt

empty or paranoid. She learned skills to stop judging herself and others. After many months, she was able to get and keep a job. She was slowly able to have more healthy friendships with both women and men, but still struggled at times to get along with others.

Learn more and purchase *Understanding Mental Disorders* at
www.psychiatry.org/UnderstandingMentalDisorders.

DSM is the manual used by clinicians and researchers to diagnose and classify mental disorders. The American Psychiatric Association (APA) published the DSM-5 in 2013, culminating a 14-year revision process. For more information, go to
www.DSM5.org.

APA is a national medical specialty society whose more than 36,000 physician members specialize in the diagnosis, treatment, prevention and research of mental illnesses, including substance use disorders. Visit the APA at www.psychiatry.org. For more information, please contact theAPA at press@psych.org.