

LEARNING MADE EASY



2nd Edition

# Borderline Personality Disorder

for  
**dummies**<sup>®</sup>  
A Wiley Brand



Recognize and understand  
the symptoms of BPD

Practice strategies for  
staying in control

Find support  
for loved ones

**Charles H. Elliott, PhD**

**Laura L. Smith, PhD**

Clinical psychologists and authors of  
*Quitting Smoking & Vaping For Dummies*



# Borderline Personality Disorder

2nd Edition

by Charles H. Elliott, PhD  
Laura L. Smith, PhD

for  
**dummies**<sup>®</sup>  
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## **Borderline Personality Disorder For Dummies®, 2nd Edition**

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# Introduction

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In the ten years since we wrote the first edition of this book, borderline personality disorder (BPD) treatment has expanded and improved. Increasingly, studies have managed to demonstrate that such treatment works and that people with BPD can expect to get better with treatment. This second edition describes these new strategies and reflects current thinking that justifies a more optimistic tone.

We intend this edition of *Borderline Personality Disorder For Dummies* to provide a comprehensive overview of this complex emotional and behavioral problem. Most readers without BPD will find that this information helps them to better understand the problem and to know how to relate to people with BPD better than they did before. People in close relationships with those who have BPD may find that a therapist can provide additional support.

If you have BPD, this book will help you better understand yourself and the people you care about. However, we strongly recommend that you also enlist the help of a mental health professional who is trained in treating BPD. BPD is one problem you don't want to deal with on your own. If you're using this book in collaboration with a therapist, we suggest that you take notes and write out your responses to the exercises we provide — whether on your computer, tablet, smartphone, or in an old-fashioned notebook. You probably also want to password-protect or guard your material because, after all, your notes are for you (and your therapist) and no one else.

If you're a therapist, this book can help you spot people with BPD more quickly and set better boundaries when

you're treating them. However, if you're new to the treatment of BPD, you'll definitely want additional training and education about this disorder.

## ***About This Book***

If you or someone you care about suffers from BPD, we appreciate the challenges and painful obstacles you face. The purpose of this book is to provide a comprehensive look at the symptoms, causes, and treatment of BPD. We strive to help people who have BPD and the people who care about them gain understanding about this complicated mental illness. Because treating BPD requires professional intervention, this book isn't designed as a standalone self-help program. However, you can certainly use it as an adjunct to psychotherapy. We share the belief with other professionals that clients benefit from being informed about their disorders, the suspected causes, and treatments that work.

We believe that stories and examples provide the best way to convey many ideas. Therefore, we use a lot of examples to illustrate our points throughout. The stories and cases we describe here represent composites of people with BPD whom we've known in our personal lives as well as in our practices. However, none of these stories depicts a true, recognizable portrayal of a specific person. Any resemblance to a specific person, alive or deceased, is completely coincidental.

Borderline personality disorder is a bit of a mouthful, so we shorten the term to BPD throughout this book. In addition, we often use phrases like "most people with BPD" or "people with BPD generally do this or that." We absolutely realize that BPD plays out differently in each person. In some ways, there's no such thing as "typical" or "most" in the BPD world. However, we'd need another

thousand pages to thoroughly discuss each variant and permutation involved in BPD. (See [Chapter 3](#) for a discussion of the many symptom constellations of BPD.) So, just to be clear, we don't mean "everyone who has BPD" every time we say "most."

## ***Foolish Assumptions***

We're going to take a wild guess here and assume that most people who read this book are interested in BPD. That interest may stem from your own emotional issues, or you may have concerns for someone you care about who has BPD-like symptoms.

On the other hand, you may be a professional who's looking for some accessible information that you can pass along to your clients. Or, maybe you want a few hints about dealing with difficult therapeutic issues. You may also be a student of psychology, counseling, social work, or psychiatry looking for a clear introduction to this complex problem.

## ***Icons Used in This Book***



**TIP** This icon appears to alert you to a specific insight or strategy for dealing with BPD. You may want to record some of these practical ideas.



**WARNING** This icon warns you about possible pitfalls or dangers that you need to be on the lookout for. Pay special attention to these icons.





**REMEMBER** This icon highlights the take-away message. Focus on the information and consider recording it.



**TECHNICAL STUFF** The Technical Stuff icon marks information that you don't have to read unless you're interested. We provide a little extra explanation next to this icon for those of you who like to delve into the discussion a little more.

## ***Beyond the Book***

Along with the material in this book, there is also a free Cheat Sheet that you can access on the web. The Cheat Sheet includes information on how to calm down quickly, tips for people who care about those who have BPD, and more. To access the Cheat Sheet, go to [www.dummies.com](http://www.dummies.com) and type "Borderline Personality Disorder For Dummies Cheat Sheet" in the search box.

## ***Where to Go from Here***

We stuff this book with loads of information about BPD, and lay it out so you can pick and choose what to read in any order you like. Use the table of contents and index to jump into whatever you want to know. Or take the conventional route of starting with [Chapter 1](#) and reading straight through from there.

Still not sure where to start? [Part 1](#) gives you an overview of BPD. [Part 2](#) takes a deep dive into the symptoms of BPD. In [Parts 3](#) and [4](#), you'll find how to

make the decision to get help and what sorts of treatments work. [Part 5](#) is for people who care about others who may have BPD or signs of BPD.

## **Part 1**

# **Mapping the Boundaries of Borderline Personality Disorder**

## **IN THIS PART ...**

Discover the ins and outs of Borderline Personality Disorder.

Find out the characteristics of a healthy personality.

Take a closer look at BPD symptoms.

Understand the multiple causes of BPD and how they interact.

# Chapter 1

## Exploring Borderline Personality Disorder

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### IN THIS CHAPTER

- » Taking a look at the characteristics of BPD
  - » Searching for BPD's causes
  - » Calculating the costs of BPD
  - » Seeking help for BPD through psychotherapy and medication
  - » Knowing how to help someone who has BPD
- 

A charming, exciting, intimate, intelligent, fun person suddenly turns mean, sluggish, angry, self-defeating, and dismal — a radical change for no obvious reason. What causes the unpredictable ups and downs from fear to rage, intimate intensity to distance, and euphoria to despair that some people experience on a daily basis? Borderline personality disorder (BPD), arguably the most common and debilitating of all the personality disorders, causes chaos and anguish for both the people who suffer from the disorder and those who care about them.

This book takes you inside the world of BPD and shows you what living with this disorder is really like. Unlike some books and articles about BPD, we strive to maintain a compassionate, kind perspective of those people who are afflicted with BPD. You may be reading this book because you know or suspect you have BPD or some of its major symptoms. If so, expect to find a wealth

of information about BPD and its causes. Discover hope as you read about effective treatments.

Perhaps you are a reader who cares about or loves someone who has BPD. By reading this book, you can discover why people with BPD do what they do as well as see how you can better relate to them. Finally, even if you're not in a close relationship with someone with BPD, you no doubt have a co-worker, neighbor, supervisor, or acquaintance who suffers from BPD, or at the very least, a few of its prominent symptoms. Even superficial relationships with people who have BPD can pose surprising challenges. This book can help you better understand what's going on and how to deal with the problems BPD creates for you.

If you're a therapist, you can use this book to expand your understanding of BPD. You can see how to deal with difficult therapeutic issues. You can also figure out how to set better boundaries while you simultaneously take care of both yourself and your clients.

In this chapter, we describe the basics of BPD in terms of how the disorder affects both the people who have it and the people who have relationships with them. We present what's known about the causes of BPD. We also tally up the costs of BPD for both the people who have it and the society they live in. Finally, we overview the major treatment options for BPD and show those of you who care about someone with BPD what you can do to help.

## ***Breaking Down Borderline Personality Disorder***

*Personalities* are the relatively consistent ways in which people feel, behave, think, and relate to others. Your

personality reflects the ways in which other people generally describe you — such as calm, anxious, easily angered, mellow, thoughtful, impulsive, inquisitive, or standoffish. All people differ from their *usual* personalities from time to time, but, for the most part, personalities remain fairly stable over time. (Check out [Chapter 2](#) for more on personality.)

For example, consider someone who has a generally jolly personality; this person enjoys life and people. However, when this person experiences a tragedy, you expect to see normal grief and sadness in this generally jolly person. On the other hand, someone with a personality disorder, such as BPD, experiences pervasive, ongoing trouble with emotions, behaviors, thoughts, and/or relationships. The following sections describe the core problems that people with BPD frequently experience.



TECHNICAL  
STUFF

The American Psychiatric Association has a manual that describes specific symptoms of BPD. The manual groups these symptoms into nine categories. In [Chapter 3](#), we describe those nine symptoms in some detail. In this chapter, we condense these nine symptom categories into four larger arenas of life functioning that are easier to digest.



REMEMBER

Although BPD has an identifiable set of symptoms, the specific symptoms and the intensity of those symptoms varies greatly from person to person.

## ***Unpredictable relationships***

People with BPD desperately want to have good relationships, but they inadvertently sabotage their efforts to create and maintain positive relationships over and over again. You may be wondering how they continually end up in rocky relationships.

Well, the answer lies in the fact that their desire for relationships is fueled by an intense need to fill the bottomless hole that they feel inside themselves. People with BPD ache to fill this hole with a sense of who they are, a higher level of self-esteem, and high amounts of outside nurturance, unconditional love, and adoration. But no one can fill such a huge personal chasm. Partners and friends may be defeated soon after they enter the relationship. Their attempts to make their friends who have BPD happy too often fail. The people with BPD reflexively respond to their friends' efforts with surprising disappointment, pain, and sometimes even anger.

This intense negative reaction confuses partners of people with BPD because people with BPD typically start out relationships with enthusiasm, warmth, and excitement. New partners may feel entirely enveloped by love and caring at the beginning of their relationships, but, repeatedly, things go terribly wrong.

What happens to turn a relationship so full of love and excitement into something full of pain and confusion? Well, many people with BPD fear abandonment above almost anything else. Yet, at the same time, they don't believe they're worthy of getting what they really want. They can hardly imagine that another person truly does love them. So, when their partners inevitably fail to fulfill their every need, they believe the next step is abandonment.



This conclusion simultaneously fuels the person with BPD with terror and rage. As a result, they push their partners away. Better to push someone away than to be pushed away, right? This series of reactions is extremely self-defeating, but it's born out of fear, not malice. See [Chapter 8](#) for more information about BPD relationships and [Chapter 18](#) for how you can work to improve them.

## ***Acting without thinking***

Human brains have built-in braking systems, which, in theory, are a lot like the ones that five-ton trucks use to slow down as they roll downhill. These brake systems come in handy when the trucks drive down steep mountains, or, in terms of the human brain, when the intensity of emotions flares up in certain situations. Unfortunately, most people with BPD have brake systems that are adequate for golf carts — not five-ton trucks — which are hardly enough to handle the weighty emotions that often accompany BPD.

*Brain brakes*, as we like to call them, keep people from acting without first thinking about the consequences of their actions. Like rolling dice in a game of craps, behaving impulsively rarely results in winning in the long run. Common impulsive behaviors in people with BPD include the following:

- » Impulsive spending
- » Gambling
- » Unsafe sex
- » Reckless (but not wreckless) driving
- » Excessive eating binges
- » Alcohol or drug abuse
- » Self-mutilation

» Suicidal behavior

See [Chapter 5](#) for a tour of the dangerous, reckless world of people who have BPD and [Chapter 15](#) for how to start inhibiting such impulsivity.

## ***Volatile emotions***

The emotional shifts of people with BPD are almost as unpredictable as earthquakes. They can also be just as shaky and attention grabbing. After people with BPD unleash their emotions, they usually don't have the ability to regain steady ground.

The rapidly shifting emotional ground of people with BPD causes the people around them to walk warily. In the same day, or even the same hour, people with BPD can demonstrate serenity, rage, despair, and euphoria. See [Chapter 6](#) for more information about this emotional drama and [Chapter 16](#) for how to try to control it.

## ***Confusing thoughts***

People with BPD also think differently than most people do. They tend to see situations and people in all-or-nothing, black-and-white terms with few shades of gray. As a result, they consider events to be either wonderful or awful, people in their lives to be either angels or devils, and their life status to be either elevated or hopeless.

Sometimes the thoughts of people with BPD travel even closer to the edge of reality. For instance, they may start thinking that other people are plotting against them. They may also distort reality to such a degree that they may seem briefly incoherent or psychotic. Psychosis entails difficulty understanding what is real versus not, including obviously false beliefs and seeing or hearing

things that others do not. Such departures from reality are usually brief.

People with BPD also sometimes perceive their bodies as being separate from themselves, which is called *dissociation*. They describe these occurrences as like looking down at what is happening to them from another vantage point. See [Chapters 9](#) and [10](#) for more information about the thought processes of people who suffer from BPD and [Chapter 19](#) for how to form more adaptive ways of thinking.

## ***Exploring the Origins of BPD***

If you trip over a log and hurt your leg, the cause of your pain is obvious. The doctor orders an X-Ray and discovers a fracture. She sets the leg and sends you home to rest. You know where the pain in your leg came from and what to do about it.

Similarly, if you plant a tomato seed in fertile soil, in a sunny spot, and then water regularly, you are likely to see tomatoes emerge after a few months. The origins of your tomatoes are obvious. You can be pretty sure that the seed, soil, sun, and care caused the tomatoes to grow.

In contrast, BPD doesn't seem to have a clear-cut cause, a consistent pattern of symptoms, or even a consistently predictable response to treatment. Nevertheless, different factors do seem to combine to increase a person's chances of getting BPD. Experts agree that biological, psychological, and social factors combine in highly complex ways that aren't always fully understood. These risk factors include the following:

- » **Trauma:** People with BPD often — but *not* always — have histories of abuse, neglect, or loss.
- » **Genetics:** BPD tends to run in families.
- » **Parenting:** Some people with BPD report having parents who told them that their feelings weren't important or accurate.
- » **Social and cultural:** Family instability, a culture that fosters individual needs and desires over those of the community, and even the angst of adolescence may all contribute to the high incidence of BPD in certain populations, at least in the Western world.
- » **Biology:** People with BPD appear to have differences in the way their brains work and the way the neurons in their brains communicate.

The multiple causes of BPD should increase compassion for the people who suffer from the disorder because these causes prove that people don't go through life asking for BPD. They acquire the disorder for reasons beyond their control. For more information on causes of BPD, refer to [Chapter 4](#).

## ***Counting the Costs of BPD***

BPD inflicts an amazing toll on sufferers, families, and society. For a long time, experts assumed that about 2 to 3 percent of the general population had BPD. However, some findings suggest that this estimate may have greatly underestimated the extent of the problem and that up to 6 percent of the population may warrant receiving this diagnosis at some point in their lives.

The next sections take a look at the personal costs, both physical and financial, of BPD for the people who suffer from BPD and the people who care about them.



**REMEMBER** In spite of the bleak topics we cover in the following sections, many people with BPD manage to have brilliant careers and live long, fairly successful lives. Furthermore, the passage of time typically results in reduced severity of BPD symptoms, and therapy can accelerate this process. In other words, don't give up, because you have many reasons for hope!

## ***Health costs***

Experts consider BPD one of the most severe mental illnesses. About 10 percent of the people with BPD eventually kill themselves, and many more of them seriously injure themselves in suicide attempts. Multiple studies conducted from the 1940s to the present have consistently found that people with severe mental illnesses (such as BPD) die young — shockingly, studies show that people with BPD live lives that are 20 to 25 years shorter than the lives of people without mental illnesses.

Many factors contribute to these premature deaths. First, people with mental disorders, including BPD, often resort to smoking cigarettes — an obvious risk factor — as a desperate coping strategy. Furthermore, people with mental illnesses usually have greater difficulty controlling impulses and, thus, find quitting even more daunting than other people do.

In addition, researchers find higher rates of obesity and diabetes among sufferers of BPD — researchers now consider both of these conditions to be almost as bad as cigarette smoking in terms of the health risks they pose. Additional risks that people with BPD carry with them

include heightened probabilities of heart disease and stroke. Unfortunately, some of the medications that mental health professionals use to treat mental illnesses make matters worse by leading to additional weight gain (and its accompanying increased risk for heart disease, stroke, and diabetes; see [Chapter 20](#) for more on medications and BPD treatment). Furthermore, people with chronic mental illnesses usually receive inadequate basic healthcare because they lack financial resources.

Accidental death rates and death from violence are also significantly higher in people with mental illnesses such as BPD. Risky, impulsive behaviors may result in unintentional deaths because of traffic accidents, drug overdoses, or sexually transmitted diseases. (See [Chapters 8](#) and [15](#) for more on impulsivity and BPD.) People with mental illnesses are also more likely to be homeless, which in turn creates additional risks due to poor nutrition, lack of healthcare, poor living conditions, and victimization.

### ***Financial and career-related costs***

BPD can exert a ruinous effect on employment and careers. People with BPD tend to be chronically underemployed — in part, because they may start out idealizing new job possibilities, only to end up disillusioned and disappointed when jobs don't live up to their inflated expectations. As we explain in [Chapter 7](#), people with BPD often experience problems with knowing who they are, which often causes them to drift from job to job because they don't know where they want to go in life. Finally, because many people with BPD struggle to get along with other people, they often lose or quit their jobs because of relationship problems in the workplace.