



A video courtesy of [Dr. Lea Watson](#), Geriatric Psychiatrist. I have learned a great deal from Dr. Watson over the years and this video is worth your time if you take care of anyone with Borderline Personality disorder. And we all do. The concepts are also effective in caring for all patients so this is time well spent.

Simple Definition

BPD is a mental health condition where a person has an extremely hard time regulating their emotions and maintaining a stable sense of who they are. Their relationships tend to swing dramatically between “this person is perfect” and “this person is terrible” — sometimes within the same day. They have an intense fear of being abandoned and may go to extreme lengths to prevent it, even when the threat isn’t real. Their moods can shift rapidly, they often feel empty inside, and they may act impulsively or harm themselves as a way of coping with overwhelming emotional pain.

Clinical Example

A 26-year-old woman presents after an ED visit for superficial self-cutting following a text argument with her boyfriend. Her outpatient therapist notes a pattern since adolescence: she rapidly idealizes new relationships (“he’s the only person who gets me”), then devalues them after perceived slights (“he’s just like everyone else — he’ll leave”). She has quit three jobs impulsively after conflicts with supervisors, has had two prior ED visits for overdose after breakups, and describes a chronic sense of inner emptiness. She acknowledges her mood can shift from baseline to intense rage or despair within minutes over minor triggers, but rarely sustains a low mood for more than a day or two — helping distinguish her presentation from MDD or bipolar disorder.

Clinical pearls: BPD has high comorbidity with PTSD, MDD, and substance use. DBT (dialectical behavior therapy) is the evidence-based first-line treatment. The affective instability is *reactive* (minutes to hours), which helps distinguish it from bipolar cycling.



DSM-5 Criteria (Clinical)

A pervasive pattern of instability in interpersonal relationships, self-image, and affect, with marked impulsivity, beginning in early adulthood, present in multiple contexts, manifested by **5 or more** of the following:

1. Frantic efforts to avoid real or imagined abandonment
2. Unstable and intense interpersonal relationships alternating between idealization and devaluation (**splitting**)
3. Persistently unstable self-image or sense of self (identity disturbance)
4. Impulsivity in ≥ 2 self-damaging areas (spending, sex, substances, reckless driving, binge eating)
5. Recurrent suicidal behavior, gestures, threats, or self-mutilating behavior
6. Affective instability due to marked mood reactivity (dysphoria, irritability, or anxiety usually lasting hours, rarely days)
7. Chronic feelings of emptiness
8. Inappropriate, intense anger or difficulty controlling anger
9. Transient, stress-related paranoid ideation or severe dissociative symptoms

Rule out: not attributable to a substance or another medical condition

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