

Personality Disorders

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Epidemiology

- Estimated prevalence rate in the general population is 10%
- NESARC-R 2010 Prevalence based on DSM-IVR

Personality Ds	Great Britain	NESARC-R
Paranoid	0.7	1.9
Schizoid	0.8	0.6
Schizotypal	0.1	0.6
Any Cluster A	1.6	2.1

Epidemiology



Personality Ds	Great Britain	NESARC-R
Antisocial	0.6	3.8
Borderline	0.7	2.7
Histrionic	--	0.3
Narcissistic	--	1.0
Any Cluster B	1.2	5.5

Epidemiology



Personality Ds	Great Britain	NESARC-R
Avoidant	0.8	1.2
Dependent	0.1	0.3
Obsessive-Compulsive	1.9	1.9
Any Cluster C	2.6	2.3
Any Personality Ds	10.1	9.1

What is a personality disorder-DSM 5?



- Associated with significant difficulties in self-appraisal and self-regulation, as well as with impaired interpersonal relationships.
- The patterns deviate markedly from the expectations of an individual's culture and manifest in two or more of the following areas: cognition, affectivity, interpersonal relationships, and impulse control (seen in other mental disorders thus confusion).
- Personality disorders are enduring patterns of inner experience and behavior that are inflexible and pervasive which cause clinically significant distress or impairment in social, occupational and other areas of functioning

What is a personality disorder-DSM 5?

- The pattern is stable and of long duration, and its onset can be traced back at least to adolescence or early adulthood.
- The enduring pattern is not better explained as a manifestation of consequence of another mental disorder.
- The enduring pattern is not attributable to the physiologic effects of a substance (drug/EtOH, medication) or another medical condition (TBI).

Cluster C Personality DS

Avoidant PD



- A pervasive pattern of social inhibition, feeling of inadequacy, and hypersensitivity to negative evaluation, beginning in early adulthood and presents in a variety of contexts, as indicated by four (or more) of the following:
 - 1. Avoids occupational activities that involve significant interpersonal contact because of fears of criticism, disapproval, or rejection.
 - 2. Is unwilling to get involved with people unless certain of being liked.

Cluster C Personality DS

Avoidant PD



- 3. Shows restraint within intimate relationships because of the fear of being shamed or ridiculed.
- 4. Is preoccupied with being criticized or rejected in social situations.
- 5. Is inhibited in new interpersonal situations because of feeling of inadequacy.

Cluster C Personality DS

Avoidant PD



- 6. View self as socially inept, personally unappealing, or inferior to others.
- 7. Is unusually reluctant to take personal risks or to engage in any new activities because they may prove embarrassing.

Cluster C Personality Disorders Dependent PD



- A pervasive and excessive need to be taken care of that leads to submissive and clinging behavior and fears of separation, beginning by early adulthood and present in various contexts, as indicated by five (or more) of the following:
 - 1. Has difficulty making everyday decisions without an excessive amount of advice and reassurance of others.
 - 2. Needs other to assume responsibility for most major areas of his or her life.

Cluster C Personality Ds

Dependent PD



- 3. Has difficulty expressing disagreement with others because of fear of loss of support or approval. (**Note:** Do not include realistic fears of retribution.)
- 4. Has difficulty initiating projects or doing things on his or her own (because of lack of self-confidence in judgment of abilities rather than lack of motivation or energy).
- 5. Goes to excessive lengths to obtain nurturance and support from others, to the point of volunteering to do things that are unpleasant.

Cluster C Personality Ds

Dependent PD



- 6. Feels uncomfortable or helpless when alone because of exaggerated fears of being unable to care for himself or herself.
- 7. Urgently seeks another relationship as a source of care and support when a close relationship ends.
- 8. Is unrealistically preoccupied with fears of being left to take care of himself or herself.

Cluster C Personality Ds

Obsessive-Compulsive PD



- A pervasive pattern of preoccupation with orderliness, perfection, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency, beginning in early adulthood and present in a variety of contexts, as indicated by four (or more) of the following:
 - 1. Is preoccupied with details, rules, lists, order, organization, or schedules to the extent that the major point of the activity is lost.
 - 2. Shows perfectionism that interferes with task completion (eg is unable to complete a project because his or her own strict standards are not met).

Cluster C Personality Ds

Obsessive-Compulsive PD



- 3. Is excessively devoted to work and productivity the the exclusion of leisure activities and friendships (not accounted for by obvious economic necessity).
- 4. Is over conscientious, scrupulous, and inflexible about matters of morality, ethics, or values (not accounted for by culture or religious identification).
- 5. Is unable to discard worn-out or worthless objects even when they have no sentimental value.

Cluster C Personality Ds

Obsessive-Compulsive PD



- 6. Is reluctant to delegate tasks or to work with others unless they submit to exactly his or her way of doing things.
- 7. Adopts a miserly spending style toward both self and others; money is viewed as something to be hoarded for future catastrophes.
- 8. Shows rigidity and stubbornness.