Borderline Personality Disorder: New Findings and Current Controversies
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Overall, there is a reasonable body of evidence that Borderline Personality Disorder (BPD) as defined in DSM-IV-TR represents a cohesive class that should be represented as a specific PD type in DSM-V, in spite of internal heterogeneity and criteria that represent a hybrid of environment-reactive symptoms and dimensional traits. Population prevalence of BPD from pooled data is estimated to be slightly greater than 1%. History of parental neglect or inconstancy is common, along with considerable though not invariable early life experience of abuse. Studies suggest substantial heritability of BPD, and the genetic and neurobiological contributors to BPD appear prominent in the serotonin system. Imaging data suggest decreased volume in limbic and anterior cingulated regions, presumably correlated with difficulties with impulse control and emotion regulation. Longitudinally, significant remission rates have been observed, suggesting that BPD is less “enduring” than previously believed. Published randomized controlled trials have demonstrated efficacy of a number of types of psychotherapy to treat patients with BPD. In this presentation, these areas will be reviewed in greater detail.