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Title: *Assessment of Pharmacotherapeutic Management of Patients with Borderline Personality Disorder at a Small Mental Health Facility*

Abstract

Purpose Borderline personality disorder (BPD), according to the American Psychiatric Association, is a condition characterized by intense emotions, poor self-image, impulsivity, and an inability to main stable personal relationships. While there is no medication to treat the condition, there has been success with cognitive behavioral therapy (CBT) as well as treating symptoms caused by the condition. BPD can be complicated further by the fact that it is common to be present with other psychiatric conditions. Due to co-occurring conditions it is very likely for patients with BPD to be on several medications. This is caused by tendency to only add medications to a patient, worrying that removing any medications once a patient has achieved a therapeutic state could result in a relapse. The medications with the best data for treating patients with with BPD are aripiprazole, valproic acid, lamotrigine, and topiramate. In addition there is data showing that antidepressants are not helpful and benzodiazepines may be more harmful than helpful to these patients. This project was designed to assess what kind of medications patients the patients were on and how those medications lined up with the current best practices for the treatment of BPD.

Methods A list of all patients at Family Care Health Center(FCHC) in St. Louis, Missouri who had a listed diagnosis of BPD were identified. Patient charts were reviewed to see: where the patient was receiving primary mental health care, co-occurring psychiatric conditions, current psychiatric medications, the number of psychiatric medications each patient was on, participation in CBT, and whether or not the patient had experienced a past traumatic event. The patient list was coded and both the patient list and data sheet documents were password protected. After collected the medication was compared to current best practices, to assess the appropriateness of therapy for the patient.

Results A total of 33 patient charts were reviewed. X patients (%) received their primary mental health care from FCHC. Only 2 (6.1%) of patients had BPD with no co-occurring conditions, with the most common co-occurring conditions being depression with 13 cases (39.4%) and bipolar disorder with 10 cases (30.3%). For psychiatric medications antidepressants were the most used class with 37 instances, followed by anti-psychotics with 18 instances, then mood stabilizers with 10 instances, and finally benzodiazepines with 7 instances. The average number of medications a patient was on was 2.21. There were 20 patients (60.6%) participating in CBT. Finally 17 patients (51.5%) had experienced a traumatic event. However, in regard to experiencing a traumatic event, if a patient had not brought up the topic in the sessions at FCHC it would not be known for this study.

Conclusion Since BPD regularly