

Abstract

In this dissertation the results of an empirical study about the diagnostic and differential diagnostic of borderline personality disorder (BPD) are presented.

This study contains the exploration of the internal structure of BPD defined in DSM-IV (APA, 1994). A dimensional order of the nine borderline-criteria is established by factor analysis and forms one conception of the disorder.

Furthermore the diagnostic efficiency of each borderline-criterion is reckoned. The criteria of BPD are ranked in accordance to their meaning for the diagnostic process. In this context features of diagnostic efficiency (e.g. specificity, sensitivity, kappa, overall classification rate etc.) are illustrated and discussed for each criterion.

Moreover borderline-symptoms beyond the DSM-IV-criteria are explored. Clinical features and symptoms are assessed by diverse questionnaires. Their correlation to borderline-criteria and their meaning for diagnostic issues are examined. Especially emotional variables and interpersonal problems proved to be important in this context.

Therefore one crucial point of the study was the exploration of interpersonal problems of borderline-patients. The correlation of interpersonal items and other clinical symptoms is explained. Based on interpersonal problems borderline-patients are divided into four subgroups. These groups differ particularly in the behavioural dimensions "character of contact" and "willingness to contact". Hypotheses on treatment strategies for the four subgroups are defined. Proposals for modifying and differentiating the diagnostic process are made as well.

Furthermore the study compares borderline-patients with other psychiatric patients. The results show great differences between borderline- and non-borderline-patients. Besides other subgroups of borderline-patients (e.g. according to comorbidity, demographic variables and treatment setting) are explored. Correlations between borderline-criteria and clinic-psychological symptoms are also explored and explained. Conclusions for diagnostic and treatment of the disorder are discussed.