

Affect dysregulation and Dissociation in Substance Use Disorder patients with comorbid Borderline Personality Disorder or Post Traumatic Stress Disorder.

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To examine whether BPD SUD patients have more overregulation of emotion than BPD or SUD patients only and to examine whether overregulation in BPD SUD patients is moderated by dissociation. And to examine whether PTSD patients with SUD have...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Personality disorders and disturbances in behaviour
Study type	Observational non invasive

Summary

ID

NL-OMON38696

Source

ToetsingOnline

Brief title

Affect dysregulation and dissociation in SUD BPD or SUD PTSD

Condition

- Personality disorders and disturbances in behaviour

Synonym

Addiction, BPD, Emotion regulation problems, PTSD, Trauma

Research involving

Human

Sponsors and support

Primary sponsor: GGZ Bouman

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Affect dysregulation, BPD, dissociation, PTSD

Outcome measures

Primary outcome

A significant difference in overregulation will be expected between BPD SUD en BPD patients and a significant difference in dissociation between PTSD SUD and PTSD patients.

Borderline classification will be determined with the BPD-SI.

PTSD classification will be determined with the ZIL and VBE.

Alcohol or drugs addiction will be measured with a clinical Interview and severity with the Europ-ASI, section III.

Dissociation will be measured with the DES and SDQ.

Secondary outcome

Dissociation will be measured with the DES and SDQ. The NLV will be administered to exclude low intelligence.

Affect Dysregulation which will be measured with the EI\IOV-56 and with the SIDES rev-sr.

Study description

Background summary

Affect or emotion dysregulation is known as a core component in Borderline Personality Disorder (BPD) and trauma-post traumatic stress disorder (PTSD).

Affect dysregulation consists of two forms: underregulation and overregulation. Under regulation has been defined as an impairment of modulation of affect. Overregulation has been defined as a suppression or repression of affective awareness or expression. Deficits in emotion regulation are also found in substance-dependent patients (SUD). Although overregulation in substance use disorders and borderline personality disorders is researched separately, overregulation in patients with both features is largely unstudied. In the present study we expect to find more overregulation symptoms in patients with both disorders than in patients with a single disorder (BPD or SUD). Furthermore, although PTSD symptoms appear to affect many individuals who have SUD, the role of dissociation in PTSD SUD patients is largely unknown. More knowledge about the role of dissociation in PTSD will add to the development of effective treatment. We expect to find more symptoms of dissociation in patients with both disorders than in patients with a single disorder (PTSD or SUD). Measures of dissociation were also used to assess whether the relationship between SUD and overregulation is moderated by dissociation. Although earlier research has indicated that dissociation seems to play a moderating role in emotion regulation problems including overregulation, its specific role in BPD SUD patients remained unclear. We expect to find a moderating role of dissociation in BPD SUD patients. Measures of affect dysregulation were used to assess whether the relationship between SUD and dissociation is moderated by affect dysregulation. We expect to find a moderating role of affect dysregulation in PTSD SUD patients.

Study objective

To examine whether BPD SUD patients have more overregulation of emotions than BPD or SUD patients only and to examine whether overregulation in BPD SUD patients is moderated by dissociation. And to examine whether PTSD patients with SUD have more dissociation than PTSD patients without SUD or SUD patients only. Further it will be studied

whether the dissociation symptoms in PTSD SUD patients are moderated by affect dysregulation.

Study design

cross sectional design.

Study burden and risks

patients will be tested Individually In one session of approximately of 2X45 minutes, with a short break of fifteen minutes in between. Because of the non-invasive character of the interviews and questionnaires and because testing Is part of usual care, the burden and risks associated with participation are considered low.

Contacts

Public

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

BPD SUD patients:

- Patients between 18 - 60 years, referred to Bouman GGZ
- Diagnosis of borderline personality disorder, confirmed by BPD-SI interview
- Diagnosis of a substance use disorder (alcohol or drugs), confirmed by a clinical interview
- Willing to participate in this project
- Abstinent for alcohol or drugs by at least one week
- Understand Dutch language;

PTSD patients:
Same criteria as BPD SUD patients, except diagnosis of BPD. Instead, diagnosis of PTSD, confirmed by ZIL and VBE self-report lists.;

- SUD patients:
- Patients between 18-60 years, referred to Bouman GGZ
 - Diagnosis of substance use disorder (alcohol and/or drugs), confirmed by a clinical interview
 - Willing to participate in this project
 - Abstinent for alcohol or drugs by at least one week
 - Understand Dutch language
 - Absence of DSM-IV borderline personality disorder, confirmed by BPD-SI interview
 - Absence of DSM-IV PTSD, confirmed by ZIL and VBE.

Exclusion criteria

- Cognitive or mental impairments that make self-reports impossible
- Instable somatic illness that make self-reports impossible.
- Low intelligence
- Suicidality: severe suicide ideation or suicide planning

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active

Primary purpose: Diagnostic

Recruitment

NL
Recruitment status: Recruitment stopped
Start date (anticipated): 26-03-2014
Enrollment: 150
Type: Actual

Ethics review

Approved WMO
Date: 12-03-2014
Application type: First submission
Review commission: TWOR: Toetsingscommissie Wetenschappelijk Onderzoek Rotterdam e.o. (Rotterdam)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL46569.101.13

Study results

Date completed: 13-11-2015

Actual enrolment: 144