

EW0439

The Situational Dysphoria Scale (SITDS): development and validation of a self-report questionnaire for assessing situational dysphoria in borderline patients

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Introduction According to contemporary phenomenological literature, dysphoria is the background mood characterizing patients with borderline personality disorders (BPD). In particular circumstances, it can take the form of a state of pressure, urge to act, and quasi-explosion, which is very dependent on situational triggers. There are currently no instruments able to measure this situational form of dysphoria.

Objectives To develop and analyze psychometric properties of the Situational Dysphoria Scale (SITDS), a self-report questionnaire that measures situational dysphoria.

Aims To validate the SITDS for a future use in routine clinical practice and, more generally, to assess different forms of dysphoria in BPD in a more precise way.

Methods The preliminary 58-item SITDS was administered to 105 BPD patients, along with other conceptually similar (Nepean Dysphoria Scale) and conceptually distinct (Cynical Distrust Scale, Inventory of Interpersonal Problems-47, empathy quotient, and borderline personality severity Index-IV) instruments. The psychometric characteristics (reliability, internal structure, convergent and divergent validity) of the SITDS were then examined.

Results The final 24-item SITDS (with each item rated on three subscales: internal pressure, urge to act, and quasi-explosion) demonstrated excellent internal consistency ($\alpha = .91$). A three-cluster solution was found, with clusters pertaining to personal events, interpersonal events, and environmental events. There were medium to strong correlations with NDS, and weaker but still significant correlations with CynDis, IIP-47, EQ, and BPDSI-IV.

Conclusions The SITDS is a useful and easy-to-handle instrument for measuring situational dysphoria. Further research in clinical samples is needed.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Are patients with emotionally unstable personality disorder overmedicated?

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Emotionally Unstable Personality Disorder (EUPD) is often considered as treatment resistant clinical challenge. While effectiveness of psychological therapies for EUPD is widely acknowledged, there is less supportive evidence for pharmacotherapy use and patients with EUPD are perceived as overmedicated.

Objectives and aims The purpose of the study was to review prescribing guidelines and clinical practices for EUPD.

Methods MEDLINE and PsycINFO were searched for all English-language articles published 2000–2016 and containing the keywords “emotionally unstable personality disorder”, “borderline personality disorder”, “pharmacotherapy”, “drug treatment” and “treatment guidelines”.

Results NICE guidelines (2009) recommend pharmacotherapy should not be used for EUPD but for comorbid conditions only. In line with the American Psychiatric Association practice guideline, the Dutch and German guidelines recommend antipsychotics for cognitive-perceptual symptoms. However, in contrary to mood stabilisers they question the efficacy of antidepressants on impulsivity and affective dysregulation.

Studies on clinical practice showed 68% of borderline patients without comorbid disorder in UK were using antidepressants, 59% antipsychotics, 59% sedatives and 23% mood stabilizers. Similar results reported Paolini et al with polypharmacy in 83.5% of cases.

Conclusions All international guidelines recommend psychological therapies as the first-choice in EUPD treatment but diverge with respect to pharmacotherapy use. NICE and Australian guidelines abstain from psychotropics what may prevent to some degree counterproductive polypharmacy, but also can refrain from temporary pharmacological support when needed. More RCTs for pharmacotherapy use in EUPD are needed but meanwhile using pharmacotherapeutic algorithms for specific symptom domains might be the way forward.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0441

The purpose of this research was standardizing the questionnaire of personality disorder cluster A

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Introduction As more or less stable personality traits of the person, temperament, intellect and body is what makes an individual unique compatibility with the environment.

Objective The purpose of this research was standardizing the questionnaire of personality disorder cluster A. On the basis of realizing criterion standard, DSM- 5.

Method 1303 people from universities of Tehran and Alborz provinces (753 females and 550 males) were examined by using the randomized sampling method. The questions of the questionnaire were conformed Dr. ShahramVaziri on the basis of Iran s population and culture. Then the reliability was tested and accomplished simultaneously Millon(MCMI-III) questionnaire.

Result After computing the correlation scales of Millon test with each of the questions, 20 questions that showed the highest correlation and diagnosis coefficient were chosen and scored again in next stage.

Conclusions Investigating the psychometric component of three scales (Paranoid 60%, Schizoid 66%, Schizotypal 59%) shows that they are reliable and defensibly valid. It can be said that questions related to all three measures paranoid, schizoid and schizotypal of acceptable psychometric properties and reliability are desirable.

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