

COMPARISON OF DBT AND "TREATMENT AS USUAL" IN SUICIDAL AND SELF-MUTILATING BEHAVIOR

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Despite the significant morbidity and mortality, little is known about effective treatments for suicidal and self-mutilating behaviors. Patients with borderline personality disorder are particularly at risk for these behaviors. Approximately 10% of patients with borderline personality disorder commit suicide. Furthermore, about 70-80% of patients who self-mutilate have borderline personality disorder. Therefore, development of treatment for these behaviors is vital.

DBT is the only empirically validated treatment that has shown a reduction in self-injury in borderline personality disorder. The original validation study by Linehan was a one year design with a year follow-up. The current study is a pilot project examining efficacy in a six month treatment comparing DBT to treatment as usual. Fifteen patients were enrolled in DBT and were matched with patients receiving treatment as usual in the community. A preliminary analysis at three months was conducted. All patients were diagnosed with borderline personality disorder and all were female. The baseline mean number of suicide attempts did not differ between the DBT and TAU groups (DBT= 2.1±3.2; TAU=2.3±3.6; $t < 1$). Assessments of Beck Hopelessness Scale, Hamilton Depression Scale, Beck Depression Inventory and Global Assessment Scale did not differ between the groups at three months. However, self-rated suicide ideation declined more significantly in the DBT groups as did suicidal urges and urges to self-mutilate. Actual self-mutilation behaviors showed a greater decrease in the DBT group (DBT mean=1.4±1.5; TAU mean=2.2±1.9; $t=2.19$; $p < .05$) at twelve weeks. Neither group had a suicide attempt. These results provide additional support for the efficacy of DBT and suggest that a shortened treatment course may also be effective.