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Alcohol Dependence and Comorbid Personality Disorders: Antisocial and Borderline Symptom Analysis

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Introduction

➢ Alcohol dependence (AD) and personality disorders (PDs) are highly comorbid with an estimated 25.0% of individuals diagnosed with lifetime AD meeting criteria for at least one personality disorder.

➢ Previous research suggests a general PD factor, possibly representing interpersonal difficulties, is responsible for the high comorbidity between PDs and AD (Jahng et al., submitted).

➢ Jahng and colleagues (submitted) show that after controlling for this general PD factor, AD remains comorbid with two Cluster B PDs, antisocial personality disorder (ASPD) and borderline personality disorder (BPD).

➢ The purpose of this study is to determine which individual symptoms of ASPD and BPD are significantly associated with AD after controlling for demographics, conduct disorder, and the presence of other Axis II pathology.

Method

➢ The National Epidemiological Survey on Alcohol and Related Conditions (NESARC) is a nationally representative, face-to-face survey of approximately 40,000 people (Grant, Moore, et al., 2003).

➢ NESARC was conducted in 2 waves by the NIAAA. The first wave of data collection was from 2001-2002 and the second wave was from 2004-2005 and consisted of 87% of the original sample (Grant et al., 2008).

➢ All PDs were assessed in one of the two waves. Alcohol use was assessed at both waves using the AUDADIS-IV interview. 34,288 individuals with complete ASPD, BPD, and AD data were included in the current analyses.

Data Analysis

➢PD diagnoses were computed using the strategy proposed by Trull and colleagues (in press) which requires all PD criteria to be accompanied by distress or impairment in functioning.

➢A simultaneous logistic regression model was used to determine if individual ASPD and BPD criteria significantly predict lifetime AD when controlling for conduct disorder, presence of any personality disorder, and the other ASPD and BPD criteria.

Table 1. Logistic Regression Weights for BPD/ASPD Criteria Controlling for Sociodemograhpics, Conduct Disorder, and Axis II Psychopathology

ASPD Criteria	β	p
Failure to conform to social norms*	0.72	<0.01
Deceit	0.38	<0.01
Impulsivity	0.37	<0.01
Aggression	0.39	<0.01
Reckless disregard for safety*	1.08	<0.01
Irresponsibility	0.38	<0.01
Lack of remorse	0.01	0.87
BPD Criteria	β	p
Fear of abandonment	0.13	0.17
Unstable relations	0.11	0.23
Identity problems	-0.01	0.95
Impulsivity	0.39	<0.01
Suicidality	0.11	0.42
Affective instability	0.22	0.07
Emptiness	0.19	0.11
Anger	0.11	0.21
Transient dissociation	0.01	0.91

Note: *NESARC assessment directly or indirectly asks about driving under the influence of alcohol, making the ASPD and AD criteria partially redundant.

Results

➢Of the 34,288 individuals with complete data, 14.2% (n=4,880) met criteria for lifetime alcohol dependence.

➢All ASPD criteria except for "lack of remorse" remain significant predictors of AD (all ps <.0001) after controlling for the presence of other disorders and ASPD and BPD criteria.

➢Only two BPD criteria, impulsivity ($p < .0001$) and affective instability (p=.02) are significant predictors of AD after controlling for PD diagnoses and specified symptoms.

➢When the demographic variables age, gender, ethnicity, income, level of education, and marital status are added into the model (see **Table 1**), all of the ASPD criteria (except "lack of remorse") and the BPD criterion of impulsivity remain significant predictors, but the BPD criterion of instability is no longer significant (p=.07).

Discussion

➢These findings support previous research suggesting that AD-PD comorbidity is related to a common tendency for disinhibition, deviance proneness, and emotion dysregulation in both disorders (Trull, Sher, Minks-Brown, Durbin, & Burr, 2000).

➢The relationship pattern between ASPD symptoms and AD symptoms is consistent with previous research findings that suggest general social deviance/ an antisocial lifestyle are related to AD, but not "callous egocentricity", a core feature of psychopathy (Smith & Newman, 1990).