

# Dual personality disorders: is there any characteristic that leads us toward antipsychotic prescription?

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## Objectives

Describe the different characteristics between subjects with personality disorders and comorbid substance use disorders (SUD) whether were prescribed (A) or not (NA) antipsychotic drugs during the admission on a dual diagnosis unit.

## Material and methods

Sociodemographic, clinical and administrative data of all patients diagnosed with personality disorder admitted to a dual diagnosis during 3-year period were collected. The psychiatric diagnosis was made according to DSM-IV-R criteria.

## Results

The total sample was comprised of 272 subjects (174 of A group and 98 of NA group). Predominantly male (65.5 %) with a mean age of  $37.6 \pm 7.7$  years and duration of admission of  $22.5 \pm 19.2$  days.

There were some significant differences between both groups (see Table 1). A group subjects (N = 174) were younger. Regarding its organic status had a higher prevalence of HIV and HCV-HIV comorbidity. Clinically, behavioral disruption was the main reason for psychiatric admission. Worse premorbid dysfunction were observed, higher psychiatric severity on admission measured by GEP and a background of higher number of previous psychiatric admissions.

With regard to substance use, in the A group patients main drug at the time of admission was cocaine and psychostimulants (while in the other group was alcohol). Cocaine, opioid and cannabis SUD were the most prevalent in this subjects who had an earlier first contact with nicotine, sedatives, alcohol, cocaine and psychostimulants as well as the age of problematic consumption of nicotine, sedatives and alcohol. Moreover, amount of cannabis consumption was higher and they also had a lower cumulative deprivation time for tobacco.

Antipsychotic treated patients show higher number of medications on final prescription and sedatives doses on mg of diazepam equivalents.

**Table 1. Significant differences between both groups on sociodemographic and clinical variables.**

	A N=174	NA N=98	p
Age (years) [mean, s.d]	36,76±8,10	41,39±9,65	p=0,001
HIV infection	15,5%	7,1%	p=0,043
HIV-HCV coinfection	15,0%	6,1%	p=0,031
Age first psychiatric admission unrelated to SUD (years) [mean, s.d]	21,9±6,0	30,6±5,7	p<0,001
Reason for admission			
Behavior disruption	37,0%	25,8%	p<0,001
Suicide temptatives	34,7%	46,4%	
Hallucinations/Delusions	11,0%	1,0%	
Other	17,3%	26,8%	
Premorbid dysfunction	1,72±0,95	1,40±0,99	p=0,021
Psychiatric severity on admission (GEP score)	11,46±4,69	10,16±4,71	p=0,048
Psychiatric hospitalisation	3,58±5,46	2,09±2,77	p=0,015
Primary drug of abuse			
Cocaine	42,1%	16,5%	p<0,001
Alcohol	32,2%	67,0%	
Heroine	7,6%	5,2%	
Methadone	2,3%	1,0%	
Sedatives	5,8%	9,3%	
Stimulants	0,6%	0,0%	
Cannabis	9,4%	1,0%	
Age first use of sedatives (years) [mean, s.d]	22,84±7,41	28,37±10,43	p<0,001
Age first use of alcohol (years) [mean, s.d]	14,45±3,41	16,31±7,34	p=0,012
Age onset of nicotine use (years) [mean, s.d]	13,92±4,27	15,32±4,29	p=0,024
Age onset of cocaine use (years) [mean, s.d]	19,27±5,81	24,58±10,30	p<0,001
Age onset of psychostimulants use (years) [mean, s.d]	18,16±4,85	20,71±5,38	p=0,031
Age onset of problem sedatives use (years) [mean, s.d]	24,15±8,45	31,97±12,63	p=0,012
Age onset of problem nicotine use (years) [mean, s.d]	14,88±4,71	16,63±4,57	p=0,011
Age onset of problem alcohol use (years) [mean, s.d]	19,88±6,54	23,21±9,55	p=0,006
Abstinencial nicotine accumulated period (months) [mean, s.d]	4,08±10,28	9,34±28,15	p=0,041
Cannabis consumption (units/day) [mean s.d]	13,90±14,17	7,48±12,01	p=0,004
Number of psychotropic medications at withdrawal	2,87±0,79	1,99±0,75	p<0,001
Sedatives doses (mg of diazepam)	33,62±49,88	17,49±33,07	p=0,005

## Conclusions

Those patients with worse premorbid functioning, higher severity of substance abuse and psychiatric status were more frequently prescribed with antipsychotic drugs.

## References

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