

Dual Pathology and Personality Disorder

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Editorial Note

Dual pathology, dual diagnosis, dual disorder or dual diagnosis is defined as the concurrence of a mental disorder and a substance use disorder in the same person, dual pathology has been associated with personality characteristics that suggest more maladaptive behaviours, fewer resources for recovery and maintenance of abstinence and worse prognosis, compared to those who only have one disorder [1].

On the other hand, personality disorders are inflexible and maladaptive variants of personality traits that cause either significant functional impairment or subjective distress [1].

The high prevalence of substance use in patients with personality disorder has been highlighted in many studies. In fact, its prevalence is between 10 and 14% in psychiatric patients and in addicts in treatment between 34 and 73% [2].

Several investigations have demonstrated the presence of high rates of comorbidity between personality disorders and substance use disorders, an epidemiological study carried out by Regier et al. Using DSM-III criteria, it was possible to establish that antisocial personality disorder was present in 10-20% of the subjects with alcohol abuse or dependence, while, in individuals with said personality disorder, 50-70% presented an additional diagnosis of alcohol abuse or dependence [2].

The concomitant presence of a personality disorder has implications for the clinic, prognosis, and treatments of substance use disorder, and the presence of a comorbid disorder is associated with a worse response and a worse prognosis for substance use disorder. As well as a high rate of early dropouts from treatment programs [3].

The psychiatric pathology most frequently associated with substance use, in patients with dual pathology, is personality disorders, followed by schizophrenic disorder. The rest of psychiatric diagnoses occupy a percentage of less than 10%. Personality disorder is a predisposing and premorbid factor for substance use. Traits such as impulsivity, isolation or bad mood would facilitate the use of these, the most frequent being alcohol, cocaine and sedatives. On the other hand, it has been reported that antisocial, borderline and paranoid personality disorders are the most frequent. Frequently associated with substance use [4].

Despite all that is exposed here and the advances in research that have been carried out on this topic, we are still a long way from knowing the complex relationship between addictive disorders and other mental disorders, being more complex if possible with personality disorders. The diagnosis of personality disorders in

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substance addicts has been and continues to be a controversial issue, especially regarding the difficulty of assessing dysfunctional traits that could suggest transitory conditions secondary to addictive problems rather than true personality disorders, however, important points have been highlighted to which special attention should be paid in the future in order to reduce mortality as a result of the fusion of these disorders, also highlighting that these disorders not only affect the person suffering from them, but also bring serious problems repercussions for the family and even for society itself, thus making it clear that substance use disorder would present a high prevalence in patients with personality disorders and vice versa and that it would also be associated with a high social, economic and social burden. General health [5].

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