

Variety of DBT interventions with therapists effective at reducing suicide attempts

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A variety of dialectical behavior therapy (DBT) interventions helped to reduce suicide attempts and nonsuicidal self-injury acts in a randomized clinical trial of women with borderline personality disorder who were highly suicidal, according to an article published online by *JAMA Psychiatry*.

DBT is a multicomponent therapy for individuals at high risk for <u>suicide</u> and for those with multiple severe mental disorders, particularly those who have marked impulsivity and an inability to regulate emotions. The components of DBT include <u>individual therapy</u>, group skills training, between-session telephone coaching and a therapist consultation team. The importance of DBT skills training compared with the other components has not been studied directly, according to study background.

Marsha M. Linehan, of the University of Washington, Seattle, and coauthors set out to evaluate the importance of the skills training component by comparing three treatment groups: skills training plus case management to replace individual therapy (DBT-S), DBT individual therapy plus activities group to replace skills training so therapists instead focused on the skills patients already had (DBT-I); and standard DBT, which included skills training and individual therapy. The DBT Suicide Risk Assessment and Management protocol was used with all patients in the study.

The study included 99 women (average age 30) who had borderline



personality disorder with at least two suicide attempts and/or nonsuicidal self-injury (NSSI) acts in the last five years, an NSSI act or <u>suicide</u> attempt in the eight weeks before screening, and a suicide attempt in the past year. Of the women, 33 were randomized to each of the three treatment groups: standard DBT, DBT-S or DBT-I.

The authors found all three treatments reduced suicide attempts, suicide ideation, medical severity of intentional self-injury, use of crisis services due to suicidality and improved reasons for living.

"Contrary to our expectations, standard DBT was not superior to either comparison condition for any suicide-related outcome, and no significant differences were detected between DBT-S and DBT-I. Thus, all three versions of DBT were comparably effective at reducing suicidality among individuals at high risk for suicide. ... More research is needed before strong conclusions can be made as to what is the best DBT intervention for highly suicidal individuals," the study concludes.

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