Borderline Personality Disorder (BPD)
A Guide to Symptoms, Treatment, and Recovery

Picture yourself on shifting sands—the ground beneath your feet constantly changing and throwing you off balance, leaving you scared and defensive. That’s what it’s like to have borderline personality disorder (BPD). For people with BPD, almost everything is unstable: their relationships, their moods, their thinking, their behavior, and even their identity. It’s a frightening and painful way to live. But there is hope. There are effective BPD treatments and coping skills that can help you feel better and back in control of your thoughts, feelings, and actions.

What is borderline personality disorder (BPD)?

If you have borderline personality disorder (BPD), you probably feel like you’re on a rollercoaster—and not just with your emotions or relationships, but your sense of who you are. Your self-image, goals, and even your likes and dislikes may change frequently in ways that feel confusing and unclear.

People with BPD tend to be extremely sensitive. Some describe it as feeling like an exposed nerve ending. Small things can trigger intense reactions. And once upset, you have a hard time calming down. It’s easy to understand how this emotional volatility and inability to self-soothe leads to relationship turmoil and impulsive—even reckless—behavior. When you’re in the throes of overwhelming emotion, you’re unable to think straight and stay grounded. You may say hurtful things or act out in dangerous or inappropriate ways that make you feel guilty and ashamed later on. It’s a painful cycle that can feel impossible to escape. But it’s not.
BPD is treatable

In the past, many mental health professionals had trouble treating borderline personality disorder (BPD), so they came to the mistaken conclusion that there was little to be done. But we now know that BPD is treatable. In fact, the long-term prognosis for BPD is better than those for depression and bipolar disorder. However, it requires a specialized approach. Bottom line: most people with BPD can and do get better—and they can do so fairly rapidly with the right treatments and support.

Healing is a matter of breaking the dysfunctional patterns of thinking, feeling, and behaving that are causing you difficulty and distress. It's not easy to change lifelong habits. Choosing to pause, reflect, and then act in new ways will feel unnatural and uncomfortable at first. But with time you'll form new habits that help you maintain your emotional balance and stay in control.

Recognizing borderline personality disorder

Do you identify with the following statements?

- I often feel "empty."
- My emotions shift very quickly, and I often experience extreme sadness, anger, and anxiety.
- I'm constantly afraid that the people I care about will abandon me or leave me.
- I would describe most of my romantic relationships as intense, but unstable.
- The way I feel about the people in my life can dramatically change from one moment to the next—and I don't always understand why.
- I often do things I know are dangerous or bad for me, such as driving recklessly, having unsafe sex, binge drinking, doing drugs, or going on spending sprees.
- I've attempted to hurt myself, engaged in self-harm behaviors such as cutting, or threatened suicide.
- When I'm feeling insecure in a relationship, I tend to lash out or make frantic gestures to keep the other person close.

If you identify with several of the statements, you may be suffering from borderline personality disorder. Of course, you need a mental health professional to make an official diagnosis as BPD can be easily confused with other issues. But even without a diagnosis, you may find the self-help tips in this article helpful for calming your inner emotional storm and learning to control self-damaging impulses.
Signs and symptoms

Borderline personality disorder (BPD) manifests in many different ways, but for the purposes of diagnosis, mental health professionals group the symptoms into nine major categories. In order to be diagnosed with BPD, you must show signs of at least five of these symptoms. Furthermore, these symptoms must be long-standing (usually beginning in adolescence) and pervasive across many areas of your life.

The 9 symptoms of BPD

1. **Fear of abandonment.** People with BPD are often terrified of being abandoned or left alone. Even something as innocuous as a loved one getting home late from work or going away for the weekend can trigger intense fear. This leads to frantic efforts to keep the other person close. You may beg, cling, start fights, jealously track your loved one’s movements, or even physically block the other person from leaving. Unfortunately, this behavior tends to have the opposite effect—driving others away.

2. **Unstable relationships.** People with BPD tend to have relationships that are intense and short-lived. You may fall in love quickly, believing each new person is the one who will make you feel whole, only to be quickly disappointed. Your relationships either seem perfect or horrible, with nothing in between. Your lovers, friends, or family members may feel like they have emotional whiplash from your rapid swings between idealization and devaluation, anger, and hate.

3. **Unclear or unstable self-image.** When you have BPD, your sense of self is typically unstable. Sometimes you may feel good about yourself, but other times you hate yourself, or even view yourself as evil. You probably don’t have a clear idea of who you are or what you want in life. As a result, you may frequently change jobs, friends, lovers, religion, values, goals, and even sexual identity.

4. **Impulsive, self-destructive behaviors.** If you have BPD, you may engage in harmful, sensation-seeking behaviors, especially when you’re upset. You may impulsively spend money you can’t afford, binge eat, drive recklessly, shoplift, engage in risky sex, or overdo it with drugs or alcohol. These risky behaviors may help you feel better in the moment, but they hurt you and those around you over the long-term.

5. **Self-harm. Suicidal behavior** ([articles/suicide-prevention/suicide-prevention.htm](http://articles/suicide-prevention/suicide-prevention.htm)) and deliberate self-harm is common in people with BPD. Suicidal behavior includes thinking about suicide, making suicidal gestures or threats, or actually carrying out a
suicide attempt. Self-harm (/articles/anxiety/cutting-and-self-harm.htm) includes all other attempts to hurt yourself without suicidal intent. Common forms of self-harm include cutting and burning.

6. **Extreme emotional swings.** Unstable emotions and moods are common with BPD. One moment, you may feel happy, and the next, despondent. Little things that other people brush off can send you into an emotional tailspin. These mood swings are intense, but they tend to pass fairly quickly (unlike the emotional swings of depression or bipolar disorder), usually lasting just a few minutes or hours.

7. **Chronic feelings of emptiness.** People with BPD often talk about feeling empty, as if there’s a hole or a void inside them. At the extreme, you may feel as if you’re “nothing” or “nobody.” This feeling is uncomfortable, so you may try to fill the hole with things like drugs, food, or sex. But nothing feels truly satisfying.

8. **Explosive anger.** If you have BPD, you may struggle with intense anger (/articles/relationships-communication/anger-management.htm) and a short temper. You may also have trouble controlling yourself once the fuse is lit—yelling, throwing things, or becoming completely consumed by rage. It’s important to note that this anger isn’t always directed outwards. You may spend a lot of time being angry at yourself.

9. **Feeling suspicious or out of touch with reality.** People with BPD often struggle with paranoia or suspicious thoughts about others’ motives. When under stress, you may even lose touch with reality—an experience known as dissociation. You may feel foggy, spaced out, or as if you’re outside your own body.

### Common co-occurring disorders

Borderline personality disorder is rarely diagnosed on its own. Common co-occurring disorders include:

- depression (/home-pages/depression.htm) or bipolar disorder (/home-pages/bipolar-disorder.htm)
- substance abuse (/home-pages/addictions.htm)
- eating disorders (/home-pages/eating-disorders.htm)
- anxiety disorders (/home-pages/anxiety.htm)

When BPD is successfully treated, the other disorders often get better, too. But the reverse isn’t always true. For example, you may successfully treat symptoms of depression and still struggle with BPD.
Most mental health professionals believe that borderline personality disorder (BPD) is caused by a combination of inherited or internal biological factors and external environmental factors, such as traumatic experiences in childhood.

### Brain differences

There are many complex things happening in the BPD brain, and researchers are still untangling what it all means. But in essence, if you have BPD, your brain is on high alert. Things feel more scary and stressful to you than they do to other people. Your fight-or-flight switch is easily tripped, and once it’s on, it hijacks your rational brain, triggering primitive survival instincts that aren’t always appropriate to the situation at hand.

This may make it sound as if there’s nothing you can do. After all, what can you do if your brain is different? But the truth is that you can change your brain. Every time you practice a new coping response or self-soothing technique you are creating new neural pathways. Some treatments, such as mindfulness meditation, can even grow your brain matter. And the more you practice, the stronger and more automatic these pathways will become. So don’t give up! With time and dedication, you can change the way you think, feel, and act.

### Personality disorders and stigma

When psychologists talk about “personality,” they’re referring to the patterns of thinking, feeling, and behaving that make each one of us unique. No one acts exactly the same all the time, but we do tend to interact and engage with the world in fairly consistent ways. It’s why people are often described as “shy,” “outgoing,” “meticulous,” “fun-loving,” and so on. These are elements of personality.

Because personality is so intrinsically connected to identity, the term “personality disorder” might leave you feeling like there’s something fundamentally wrong with who you are. But a personality disorder is not a character judgment. In clinical terms, what “personality disorder” means is that your pattern of relating to the world is significantly different from the norm (in other words, you don’t act in ways that most people expect) and causes consistent problems for you in many areas of your life, such as your relationships, your career, and your feelings about yourself and others. Most importantly, these patterns can be changed!
Self-help tips: 3 keys to coping with BPD

1. Calm the emotional storm
2. Learn to control impulsivity and tolerate distress
3. Improve your interpersonal skills

Self-help tip 1: Calming the emotional storm

As someone with BPD, you’ve probably spent a lot of time fighting your impulses and emotions, so acceptance can be a tough thing to wrap your mind around. But accepting your emotions doesn’t mean approving of them or resigning yourself to suffering. All it means is that you stop trying to fight, avoid, suppress, or deny what you’re feeling. Giving yourself permission to have these feelings can take away a lot of their power.

Try to simply experience your feelings without judgment or criticism. Let go of the past and the future and focus exclusively on the present moment. Mindfulness techniques (/harvard/benefits-of-mindfulness.htm) can be very effective in this regard.

- Start by observing your emotions, as if from the outside.
- Watch as they come and go (it may help to think of them as waves).
- Focus in on the physical sensations that accompany your emotions.
- Tell yourself that you accept what you’re feeling right now.
- Remind yourself that just because you’re feeling something doesn’t mean it’s reality.

Do something that stimulates one or more of your senses

Engaging your sense is one of the quickest and easiest ways to quickly self-soothe. You will need to experiment to find out which sensory-based stimulation works best for you (/articles/stress/quick-stress-relief.htm). You’ll also need different strategies for different moods. What may help when you’re angry or agitated is very different from what may help when you’re numb or depressed. Here are some ideas to get started:

**Touch.** If you’re not feeling enough, try running cold or hot (but not scalding hot) water over your hands; hold a piece of ice; or grip an object or the edge of a piece of furniture as tightly as you can. If you’re feeling too much, and need to calm down, try taking a hot bath or shower; snuggling under the bed covers, or cuddling with a pet.
**Taste.** If you’re feeling empty and numb, try sucking on strong-flavored mints or candies, or slowly eat something with an intense flavor, such as salt-and-vinegar chips. If you want to calm down, try something soothing such as hot tea or soup.

**Smell.** Light a candle, smell the flowers, try aromatherapy, spritz your favorite perfume, or whip up something in the kitchen that smells good. You may find that you respond best to strong smells, such as citrus, spices, and incense.

**Sight.** Focus on an image that captures your attention. This can be something in your immediate environment (a great view, a beautiful flower arrangement, a favorite painting or photo) or something in your imagination that you visualize.

**Sound.** Try listening to loud music, ringing a buzzer, or blowing a whistle when you need a jolt. To calm down, turn on soothing music or listen to the soothing sounds of nature, such as wind, birds, or the ocean. A sound machine works well if you can’t hear the real thing.

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**Reduce your emotional vulnerability**

You’re more likely to experience negative emotions when you’re run down and under stress. That’s why it’s very important to take care of your physical and mental well-being.

Take care of yourself by:

- Avoid mood-altering drugs
- Eating a balanced, nutritious diet
- Getting plenty of quality sleep
- Exercising regularly
- Minimizing stress
- Practicing relaxation techniques
Tip 2: Learn to control impulsivity and tolerate distress

The calming techniques discussed above can help you relax when you’re starting to become derailed by stress. But what do you do when you’re feeling overwhelmed by difficult feelings? This is where the impulsivity of borderline personality disorder (BPD) comes in. In the heat of the moment, you’re so desperate for relief that you’ll do anything, including things you know you shouldn’t—such as cutting, reckless sex, dangerous driving, and binge drinking. It may even feel like you don’t have a choice.

Moving from being out of control of your behavior to being in control

It’s important to recognize that these impulsive behaviors serve a purpose. They’re coping mechanisms for dealing with distress. They make you feel better, even if just for a brief moment. But the long-term costs are extremely high.

Regaining control of your behavior starts with learning to tolerate distress. It’s the key to changing the destructive patterns of BPD. The ability to tolerate distress will help you press pause when you have the urge to act out. Instead of reacting to difficult emotions with self-destructive behaviors, you will learn to ride them out while remaining in control of the experience.

For a step-by-step, self-guided program that will teach you how to ride the “wild horse” of overwhelming feelings, check out our free Emotional Intelligence Toolkit (/articles/mental-health/emotional-intelligence-toolkit.htm). The toolkit teaches you how to:

- get in touch with your emotions
- live with emotional intensity
- manage unpleasant or threatening feelings
- stay calm and focused even in upsetting situations

The toolkit will teach you how to tolerate distress, but it doesn’t stop there. It will also teach you how to move from being emotionally shut down to experiencing your emotions fully. This allows you to experience the full range of positive emotions such as joy, peace, and fulfillment that are also cut off when you attempt to avoid negative feelings.
A grounding exercise to help you pause and regain control

Once the fight-or-flight response is triggered, there is no way to “think yourself” calm. Instead of focusing on your thoughts, focus on what you’re feeling in your body. The following grounding exercise is a simple, quick way to put the brakes on impulsivity, calm down, and regain control. It can make a big difference in just a few short minutes.

Find a quiet spot and sit in a comfortable position.

Focus on what you’re experiencing in your body. Feel the surface you’re sitting on. Feel your feet on the floor. Feel your hands in your lap.

Concentrate on your breathing, taking slow, deep breaths. Breathe in slowly. Pause for a count of three. Then slowly breathe out, once more pausing for a count of three. Continue to do this for several minutes.

In case of emergency, distract yourself

If your attempts to calm down aren’t working and you’re starting to feel overwhelmed by destructive urges, distracting yourself may help. All you need is something to capture your focus long enough for the destructive impulse to go away. Anything that draws your attention can work, but distraction is most effective when the activity is also soothing. In addition to the sensory-based strategies mentioned previously, here are some things you might try:

Watch something on TV. Choose something that’s the opposite of what you’re feeling: a comedy, if you’re feeling sad, or something relaxing if you’re angry or agitated.

Do something you enjoy that keeps you busy. This could be anything: gardening, painting, playing an instrument, knitting, reading a book, playing a computer game, or doing a Sudoku or word puzzle.

Throw yourself into work. You can also distract yourself with chores and errands: cleaning your house, doing yard work, going grocery shopping, grooming your pet, or doing the laundry.

Get active. Vigorous exercise is a healthy way to get your adrenaline pumping and let off steam. If you’re feeling stressed, you may want try more relaxing activities such as yoga or a walk around your neighborhood.

Call a friend. Talking to someone you trust can be a quick and highly effective way to distract yourself, feel better, and gain some perspective.
Tip 3: Improve your interpersonal skills

If you have borderline personality disorder (BPD), you’ve probably struggled with maintaining stable, satisfying relationships, including with lovers, co-workers, and friends. This is because you have trouble stepping back and seeing things from other people’s perspective. You tend to misread the thoughts and feelings of others, misunderstand how others see you, and overlook how they’re affected by your behavior. It’s not that you don’t care, but when it comes to other people, you have a big blind spot. Recognizing your interpersonal blind spot is the first step. When you stop blaming others, you can start taking steps to improve your relationships and your social skills.

Check your assumptions

When you’re derailed by stress and negativity, as people with borderline personality disorder often are, it’s easy to misread the intentions of others. If you’re aware of this tendency, you can check your assumptions. Remember, you’re not a mind reader! Instead of jumping to conclusions (usually negative), consider alternative meaning and motivations. For example, let’s say your partner was abrupt with you on the phone and you’re feeling insecure and afraid they’ve lost interest in you.

Stop to consider alternative explanations. Maybe your partner is under pressure at work. Maybe he’s having a stressful day. Maybe he hasn’t had his coffee yet. There are many different possibilities.

Ask the person to clarify their intentions. One of the simplest ways to check your assumptions is to ask the other person what they’re thinking or feeling. Double check what they meant by their words or actions. Instead of asking in an accusatory manner, try a softer approach: “I could be wrong, but it feels like...” or “Maybe I’m being overly sensitive, but I get the sense that...”

Put a stop to projection

Do you have a tendency to take your negative feelings and project them on to other people? Do you lash out at others when you’re feeling bad about yourself? Does feedback or constructive criticism feel like a personal attack? If so, you may have a problem with projection.

To fight projection, you’ll need to learn to apply the brakes—just like you did to curb your impulsive behaviors. Tune in to your emotions and the physical sensations in your body. Take note of signs of stress: rapid heart rate, muscle tension, sweating, nausea, light-
headedness. When you’re feeling this way, you’re likely to go on the attack and say something you’ll regret later. Pause and take a few slow deep breaths. Then ask yourself the following three questions:

1. Am I upset with myself?
2. Am I feeling ashamed or afraid?
3. Am I worried about being abandoned?

If the answer is yes, take a conversation break. Tell the other person that you’re feeling emotional and would like some time to think before discussing things further.

**Take responsibility for your role**

Finally, it’s important to take responsibility for the role you play in your relationships. Ask yourself what you are doing that may be contributing to problems. How do your words and behaviors make your loved ones feel? Are you falling into the trap of seeing the other person as either all good or all bad? As you make an effort to put yourself in other people’s shoes, give them the benefit of the doubt, and reduce your defensiveness, you’ll start to notice a difference in the quality of your relationships.

**Diagnosis and treatment**

It’s important to remember that you can’t diagnose borderline personality disorder on your own. So, if you think that you or a loved one may be suffering from BPD, it’s best to seek professional help at some point on your journey. BPD is often confused or overlaps with other conditions, so you need a mental health professional to evaluate you and make an accurate diagnosis. Try to find someone with experience diagnosing and treating BPD.

**The importance of finding the right therapist**

The support and guidance of a qualified therapist can make a huge difference in BPD treatment and recovery. Therapy has the potential to be a safe space where you can start working through your relationship and trust issues and “try on” new coping techniques and ways of being.

An experienced professional will be familiar with BPD therapies such as dialectical behavior therapy (DBT) and schema-focused therapy. But while these therapies have been shown to be helpful in treating BPD, it’s not always necessary to follow a specific treatment approach. Many experts believe that most BPD cases can be successfully treated with weekly therapy that involves education about the disorder, family support, and social and emotional skills training.
It’s important to take the time to find a therapist you feel safe with—a someone who seems to get you and makes you feel accepted and understood. Take your time finding the right person. But once you do, make a commitment to therapy. You may start out thinking your therapist is going to be your savior, only to be disillusioned and feel they have nothing to offer. Remember that these swings from idealization to demonization are a symptom of BPD. Try to stick it out with your therapist and allow the relationship to grow. And keep in mind that change, by its very nature, is uncomfortable. If you don’t ever feel uncomfortable in therapy, you’re probably not progressing.

Don’t count on a medication cure

Although many people with BPD take medication, the fact is that there is very little research showing it to be helpful. What’s more, in the U.S., the FDA has not approved any medications for the treatment of BPD. This doesn’t mean that medication is never helpful—especially if you suffer from co-occurring problems such as depression or anxiety—but it is not a cure for BPD itself. When it comes to BPD, therapy is much more effective. You just have to give it time. However, your doctor may consider medication if:

- you have been diagnosed with both BPD and depression or bipolar disorder
- you suffer from panic attacks or severe anxiety
- you begin hallucinating or having bizarre, paranoid thoughts
- you are feeling suicidal or judged to be at risk of hurting yourself or others

Authors: Melinda Smith, M.A. and Jeanne Segal, Ph.D. Last updated: March 2018.