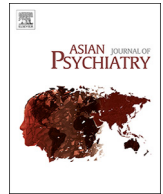




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# Psychological impact of coronavirus outbreak on borderline personality disorder from the perspective of mentalizing model: A case report

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## 1. Introduction

The coronavirus disease (COVID-19) is a global public health emergency (World Health Organization, 2020). Along with this outbreak is a parallel pandemic of fear, anxiety, and depression. The virus does not only affect physical health but also emotional well-being of all mankind, bringing substantial psychosocial impact on every member of the society. During this unprecedented outbreak, necessary measures had been taken to contain the virus transmission by mass indoor quarantine and social distancing. In Malaysia, movement control order has been implemented throughout the country as a containment measure battling this pandemic (Tang, 2020).

Many people find their everyday lives irrevocably changed by these restrictive measures, as they find themselves needing to confine at home for a prolonged and unknown amount of time. Despite for safety concern, practicing social distancing and self-quarantine would be distressing for some. Although these negative feelings and thoughts are universal, the emotionally vulnerable group could be more substantially influenced by their emotional responses. One subgroup of these population is people with borderline personality disorder (BPD) where their vulnerability is attributable to the underlying hyper-responsiveness to stress compared with normal controls (Wingenfeld et al., 2010).

Much of the difficulties faced by people with BPD like affective dysregulation, chronic feeling of emptiness, fear of abandonment and interpersonal dysfunction are manifestations of an undermined mentalizing capacity due to the early emotional neglect by their significant attachment figures and subsequent life adversity (Bateman & Fonagy, 2016). Evidence showed that due to the insecure or disorganized attachment, there is an over-activation of the attachment system which lead to its operation at a heightened sense (Bateman & Fonagy, 2016). In times of global crisis like these, the arousal triggered destabilized their mental stability which lead to disruption in daily functioning.

We would like to highlight with the help of a psychodynamic therapy session of a client with BPD, the effect of the current Malaysian movement control restriction had intensified her feeling of emptiness and aggravated her fear of abandonment. Subsequently, we also attempted to offer a formulation about these difficulties based on the

mentalizing model of BPD.

## 2. Case report via excerpt of a psychodynamic psychotherapy session

*Therapist (T): How have u been, A?*

*Client A: I have been experiencing an actual emotional downfall due to this whole lockdown situation. I am genuinely feeling sad and upset about things. It takes me sometime to figure out why I'm feeling so. It is due to the fact that I feel neglected and lonely, not by my family because they are constantly around me, but by my friends.*

*T: Can you share with me more about this feeling of being neglected?*

*A: It's because my friends don't message me. And I really miss those times of being able to talk to them in person. I know people keep telling me that this lockdown is affecting everyone, and it makes sense why this would happen. But in my opinion, it shouldn't be an excuse for you not to reach out to somebody. We can still call. You can still message me. I don't need a text every day, but if you're going to be like going for weeks without contacting me, then I will be very concerned of what's stopping you. Unless you've explained to me that you are not used to this kind of communication, otherwise, I'm not going to be able to understand why you're unable to just strike up a conversation with me.*

*T: Alright, when u mentioned that u feel your friends have abandoned you, did you try to reach out to them?*

*A: Yea, I do. I have been reaching out to them more often than I will normally do because obviously we can't see each other. I tried to strike up a conversation with them. Again, I had to dig deep for topics in order for them to come up with something to reply on.*

*T: Has this been the case ever since the lockdown started?*

*A: Actually this has always been the case even before these. I cannot sit quietly with someone because I personally will feel extremely uncomfortable and get very self-conscious at that moment. So, I will probably try to find ways to keep the conversation going on and not letting it die down. With this lockdown, it has become more intense. It is like getting worst essentially.*

*T: What is it about the silence that makes you feel uncomfortable?*

*A: Silence gets me very self-conscious. So, I will be panicking and start to overthink. Generally, I will feel very antsy because I assume that silence tends to be that person is annoyed with me, upset with me, or just bored of*

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me. Basically, I just worried that I am not a likeable person.

### 3. Discussion

To date, there is no empirical study yet to investigate the emotional responses of individuals with BPD in times of pandemic outbreak. The core deficits of BPD were activated with the escalating feeling of abandonment, worsened by the current need of mass indoor quarantine and social distancing. The spiralling funnel of emptiness and abandonment fear could further deepen the negative feeling and thought about oneself and others.

As delineated in the case above, the client with BPD was speaking about how indoor quarantine triggered a profound sense of isolation, despite having her family around. During the session, she verbalized her intensified feelings of emptiness and how she was fearful of being left out by her friends when no one seemed to reach out to her readily. That imagined threat of abandonment thus triggered frantic efforts to avoid those negative feelings, to the extent of contacting her friends more often and deliberately creating topics of conversation.

A lot of studies have supported the observation that individuals with BPD are readily perceiving and intensely reacting to any possibility of social rejection. By and large, their inclination to experience and subsequent painful intolerance to aloneness make them hypersensitive to social situations (Gunderson & Lyons-Ruth, 2008), coupled with a constant need to get reassurance from others to relieve themselves from feelings of emptiness. When these attachment needs are not readily fulfilled, the intense level of arousal generated by a hyperactive attachment system will further compromise the less well-developed mentalizing capacity (Bateman & Fonagy, 2016).

This could be further highlighted by the patient's mentalizing profile as she switched rapidly from controlled to automatic mentalizing by becoming overly sensitive and non-reflective of her friends' situation. Much of her perspectives were not reasoned out when she failed to see how others did not reach out to her during the home quarantine period. There was also an imbalance of the self-versus other mentalizing domain when she was concerned about self-internal state and feared of "disappearing", to the extent of attempting to control others by *forcing them* to maintain conversation with her. In addition, she was overly sensitive to external signs of intimacy such as the frequency of contacts made by her friends and silence from the others. Lastly, her dysregulated emotions were not balanced by cognitive appraisal, thus giving rise to catastrophizing of feelings.

During high arousal state, effective mentalization was compromised and people fell back to prementalizing modes of thinking (Bateman & Fonagy, 2016). The first would be psychic equivalence when thought and feeling were experienced as being *real* and true. In the above case, the thought of being abandoned and the subjective feeling of emptiness were transformed to the absolute certainty with a distorted reality, thus creating a concrete understanding of the whole situation that her friends were *indeed* abandoning her. Subsequently, there was teleological drive wish to get attention from her friends by actively monitoring for any external evidence of perceived affection. Only friends who made any forms of contacts with her were considered as those who

would really care for her. All these prementalizing modes dictated her expectation and responses to others in a distorted manner during social interaction.

In conclusion, public health measures during coronavirus outbreak such as the social distancing and mass indoor quarantine could intensify the feeling of emptiness and aggravate the fear of abandonment among people with BPD, coupled with other distressing emotions. Further empirical studies are needed to investigate the functioning and responses of people with BPD during this pandemic in order to advance our understanding about the internal processes associated with borderline personality disorder.

### 4. Ethical statement

We have obtained an informed consent from the patient. The patient's details have also been kept anonymize. The report also meets the ethical guidelines and meets the legal requirements in the country in which data were collected - Malaysia.

### 5. Financial support and sponsorship

Nil.

### 6. Consent for publication

Written informed consent was obtained from the patient.

### 7. Declaration of Competing Interest

There are no conflicts of interest.

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