

## **P-858 - CASE REPORT - SHOWING A PATIENT WITH PRONOUNCED DIAGNOSTIC DILEMMA**

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In this text we are showing a patient with a very complex “life story”, dominated by extreme difficulties in the developmental period, strong family complications and personal problems, which probably significantly influenced the development of later psychological difficulties. The clinical picture is dominated by symptoms of borderline personality disorder (BPD), but also shows symptoms that would fall under bipolar affective disorder (BD) and cyclothymia. During the screening of the patient and during treatment, we tried to resolve the resulting diagnostic dilemma. Some authors even believe that BPD falls into the BD spectrum of disorders, whereas others insist on the viewpoint that it is a comorbidity of two separate entities. For clinical practice, the important fact is that BD and BPD multiplies the risk of suicidal patients, which requires prompt and adequate combined treatment. The primary psychopharmacological methods are used for BD, while primary psychotherapeutic treatment is used for BPD.

In this study, we'll in detail deal with the comorbidity of BD and BPD, which are becoming more frequent psychiatric comorbidities, while emphasizing individual and integrative psychopharmacological therapies as the only approach that can act on several factors and ensure the best possible treatment outcome.