

Abstract

Background: Comorbidity of depressive illness and personality disorder occurs frequently. However, the question of whether the presence of comorbid personality disorder adversely influences the treatment outcome in depression remains unanswered with conflicting evidence from existing literatures.

Objective: The aims of this meta-analysis were to evaluate the currently available literature and to determine if personality disorder was indeed an independent predictor of response in the treatment of depression, and its impact in different modalities of treatment of depression.

Methods: Relevant English literatures published before March 2017 were retrieved from MEDLINE, EMBASE, PsycINFO, Cochrane Library, AMED, and CINAHL Complete; complemented by a hand-search of references listed in previous narrative or systematic reviews. All randomized controlled trials (RCTs) and observational studies that looked into the outcome of treatment in depression in patients with or without comorbid personality disorder, in which both depression and personality disorders were properly assessed, were included. Screening of studies and data

extraction were performed independently by 2 reviewers. Extracted data were converted to odds ratio effect sizes for dichotomous outcome, and to standardized mean difference for continuous outcome. Random-effects meta-analysis and secondary analyses were carried out.

Results: 44 studies, including 11 RCTs & 33 observational studies, were included in meta-analysis. Although meta-analysis of observational studies tended to support the notion that comorbid personality disorder was associated with poorer treatment outcome in depression, their methodological weaknesses (large between-study heterogeneity and publication bias) limited the value of their results, and such a finding was not supported by the meta-analysis of RCTs. There was a tendency for depressed subjects with comorbid personality disorder to have poorer treatment outcome to psychological treatment, compared to pharmacological treatment. The difference in pre-treatment depression severity in those with or without comorbid personality disorder did not appear to have influenced our results.

Conclusions: Although data quality and methodological issues of included primary studies might limit our conclusions, this review suggested that, in contrary to

The impact of personality disorder on outcome of depression

some clinicians' assumption, the presence of comorbid personality disorder did not necessarily worsen treatment outcome in depression.

Keywords: Depressive disorder; Personality disorder; Treatment outcome; Review;

Meta-analysis