

Machine Learning Approach in Predicting Treatment Response in Emotionally Unstable Personality Disorder

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Abstract— Emotionally Unstable Personality Disorder (EUPD) presents unique challenges due to its complex and heterogeneous nature, often leading to varied treatment responses. This exploratory study aims to develop and assess the feasibility of a machine learning model for predicting treatment response in individuals diagnosed with EUPD. The research was conducted by a clinical psychologist with expertise in machine learning and treatment outcome analysis. Retrospective clinical data from 15 individuals diagnosed with EUPD were analyzed using advanced machine-learning techniques. Demographic information, clinical assessment, and treatment history served as predictors of treatment response. Supervised learning algorithms, including random forest and neural networks, were employed to identify patterns and relationships within the data. Cross-validation and bootstrapping techniques enhanced the models' performance and generalizability.

The sample consisted of 15 individuals with EUPD who had received treatment and had comprehensive records available. Ethical guidance was strictly followed, with informed consent obtained and participant privacy protected through rigorous anonymization procedures. The data was stored to maintain confidentiality. Treatment response was assessed using outcome measures such as symptom improvement, remission rates, and quality of life evaluations. The machine learning model aimed to identify predictors of treatment success and provide insights into the complex dynamics influencing treatment outcomes. The results indicated the development of a promising predictive model with preliminary accuracy. The model showed potential in predicting treatment response, offering initial guidance for clinicians in obtaining treatment planning and enhancing patient well-being. While the sample size was limited, the exploratory study contributes to the growing precision of the mental health care field. It underscores the feasibility of utilizing machine learning to personalize interventions for individuals with EUPD.

Keywords— Emotionally Unstable Personality Disorder, Machine Learning, Personality Disorder, Treatment Response Prediction, Data-Driven Decision Making, Psychotherapy

INTRODUCTION

The emotionally unstable personality disorder, commonly known as borderline personality disorder, is a significant psychiatric disorder that incorporates affective instabilities, impulsive actions, and unstable relationships (APA, 2013). When it comes to the occurrence of EUPD, the rate is in the range of 1-2%, and thus, those sufferers consume a disproportionately high amount of mental health services (Chekroud et al., 2021). It is noteworthy that patients with EUPD often present with depressive, anxious, or substance use disorders, all these aspects affecting the treatment options. However, as will be described below, therapeutic interventions with EUPD patients are somewhat diverse, including, but not limited to, Dialectical Behavior Therapy (DBT) and medication management; yet, the treatment response varies substantially and is unpredictable (Schmitgen et al., 2019).

Therefore, previous work developing schemas for treatment plans for patients with EUPD was mainly based on clinical experience and the application of standardized assessment forms. However, this is usually imprecise in allowing for particular patients' targeted efforts, thus leading to less-than-desirable treatment outcomes most of the time (Schmitgen et al., 2019). As a result of the polymorphism of EUPD symptoms and interactions between different biopsychosocial factors in the development of the disorder, it takes work to outline clear recommendations for organizing the treatment process. Realizing clinicians often need more adequate means regarding the treatments of the specific intervention they undergo without having applicable guidelines for predicting the response to the particular treatment (Marti-Puig et al., 2022).

Over the last few years, ML has indeed been presented as a reliable tool for tackling such difficulties through improvement of the treatment planning and the patients' individualization in EUPD treatment programs. The capabilities of ML models include data analysis of large and complex computational datasets to reveal patterns that may be difficult for clinicians to identify; thus, in the context of EUPD and the assessment of the probable outcomes of the treatments, it provides a data-driven approach (Chekroud et al., 2021). With the help of ML algorithms, the researcher can address the following questions about the relationships between many clinical variables: demographic factors, disease severity, and genetic profiles with treatment response predictors, which help determine which patients are likely to benefit from a particular treatment. Nevertheless, the presented study has several limitations, which are discussed below about the rationale of using ML in EUPD treatment prediction (Marti-Puig et al., 2022). Data accuracy, model interpretability, and the questions of patients' rights in using ME in clinics must be

solved to make this approach reasonable. In addition, data for learning and testing ML models are needed, which could be a concern since mental health data is often considered private (Schmitgen et al., 2019).

METHOD

Study Design and Participants

The study employed a retrospective design, analyzing data from 15 individuals diagnosed with Emotionally Unstable Personality Disorder (EUPD). The sample was drawn purposively so that the participants' extensive clinical records were available for data analysis, which made it possible to have detailed data on the participants' demography, clinical description, and treatment history (Shahpesandy et al., 2021). Due to the nature of the study and the population involved, the retrospective design was efficient because it did not require patient interventions, which is especially beneficial when working with patients with EUPD. All the participants consented to have their data used in the research. The study followed the appropriate ethical standards concerning identifying the participants and handling their data (Ikhtabi et al., 2022).

Data Collection

Data were meticulously extracted from clinical records to ensure a robust dataset for analysis. This study also sought to determine if demographic data impacted treatment; hence, data on age, gender, and SES was obtained. Clinical evaluations offered more specific data regarding the manifestations of EUPD and the presence of possibly related disorders that might interfere with response to treatment (Adewole et al., 2024). The type and the period the participant had spent undergoing therapy were recorded concerning the treatment. The research tools for measuring treatment efficacy comprised baseline and follow-up NECSS, remission rates, and the quality of life scale. Such measures facilitated a judgment on the effectiveness of the given forms of treatment and offered a reference point about the specified sample (Wang et al., 2023).

Machine Learning Techniques

This study used modern methodologies like advanced ML to analyze the gathered data and estimate the treatment outcomes. More specifically, it is necessary to use supervised learning techniques like random forests and neural networks because of the specifics of the clinical data containing numerous non-linear relationships (Sarker, 2021). Random forests were especially beneficial for determining which input attributes best contributed to the desired prognosis. These variables were the most important in pointing to appropriate treatment methods and their expected outcomes. The technique improves the predictive accuracy of individual models while making them more easily interpretable: its avoidable attributes are built through decision trees. On the other hand, neural networks were applied to treatment prognosis since

the models can capture complicated dependencies in the data (Faouzi & Colliot, 2023). The study aimed to enrich the specific accuracy of the treatment planning and provide data support to the EUPD manager.

Evaluation Methods

Two evaluation methods were used to enhance the robustness of the developed machine-learning models: Cross-validation and Bootstrapping. Cross-validation allowed for splitting the dataset into a training and test set, which optimized the level of accuracy during model testing while simultaneously reducing the possibilities of over-training. This method allowed for mining the models' capacity to face unseen data and, therefore, be helpful in practical medicine (Faouzi & Colliot, 2023). Another method that was used was cross-validation because, after its analysis, it was possible to evaluate the variance of the model's predictions and thereby increase the confidence in the model regarding the extent of its predictability. The bootstrapping process offered a more comprehensive examination of the predictive models. The study repeatedly took a random sample of the given data set and estimated the variation in the model's performance. These assessment approaches meant that this study's findings were statistically and clinically relevant, as required before additional proof of using ML in planning EUPD management could proceed (Lasfar et al., 2024).

RESULTS & DISCUSSION

Model Performance

The material used in this research and the employment of the machine learning models displayed great possibilities in predicting treatment outcomes among patients with EUPD. Most crucial, when it comes to the analysis of the indicators that impact the result of treatment, the accuracy of the random forest model was also acceptable. It was likewise effective in looking for other variables like the severity of the first manifestations and the kinds of provided remedies. It propounded the recommendation that these are the pertinent forces that distinguish the likelihood of the outcome of a treatment strategy (Wai et al., 2024). The strength of this model is its ability to assess the clinical data's interaction and non-linearity; it provides a sound framework for identifying how significantly various factors influence patient recovery.

Consequently, the accuracy of the treatment prognosis using the neural network model also remained relatively high. This was particularly useful for capturing complicated coupled relationships in the dataset samples, with which this Model's architecture is perfectly compatible as it is for the neural network-inspired pattern-detecting machine (Wai et al., 2024). Based on the neural network's performance output, it becomes possible to segment multiple inputs and predictors and provide a more detailed picture of the response to treatment. However, as the study lies in the formative perspective, the results might be slightly hypothetical and could be edited to create more reliability for the improved Model.

Predictors of Treatment Response

The models unveiled some key indices of treatment response and were satisfying in depicting which dimensions of EUPD patients ensure better treatment prognosis. These variables were noted to have independent effects on self-reported patient compliance, which suggests that demographic characteristics, including age and gender, might affect patients' compliance with different treatment procedures (Myklebost et al., 2022). Another group of such specific factors was referenced as clinical elements, such as the degree of the symptoms observed in a patient or his/her general status. They draw attention to the necessity for these specific aspects of an individual patient's condition in performing detailed clinical evaluations for developing individual treatment plans (Hogg et al., 2023).

Furthermore, the models accentuated the treatment history in terms of the type and duration of treatment, understanding that the approach used influenced treatment results. According to these results, integrating individual treatment plans targeted at patients' demographic and clinical characteristics may enhance the therapy outcomes in EUPD (Myklebost et al., 2022). Identifying these predictors forms the basis for other research and points to the role of AI-derived techniques in enhancing treatment management in the clinical context. These predictors will assist clinicians who may need to alter treatments to improve the patient's outcomes and utilize the resources (Hogg et al., 2023).

IMPLICATIONS FOR CLINICAL PRACTICE

This study's discovery advocates the use of machine learning (ML) as the new level of managing EUPD in clinical practice. Through rich treatment response prediction, technical approaches of ML provide solid solutions to facilitate the personalization of treatment and care by boosting treatment efficacy and, thus, the well-being of the patients (Sanchez-Martinez et al., 2022). This approach is critical because it considers patients' profiles and their corresponding needs to match the therapeutic approaches that can be utilized to raise the effectiveness of health services and the satisfaction of patients with the services offered (Taye, 2023). If it is possible to predict which treatments are most effective within the context of a specific patient population, healthcare could be managed much more efficiently.

LIMITATIONS AND FUTURE RESEARCH

Despite the promising findings, this study's primary limitation is its small sample size, which may constrain the generalizability of the results. Therefore, the study's findings should be corroborated by a more representative population in the future to test these prediction models due to their potential generalization to populations (Sanchez-Martinez et al., 2022). Furthermore, using more complex machine learning algorithms and considering other variables could improve the models' performance and application range. Future studies should also carry out research with long-term follow-up to evaluate

empirical risk predictive models' real-world durability and efficacy and enable a more refined comprehensive evaluation of the effectiveness and stability of treatment approaches in EUPD (Taye, 2023).

CONCLUSION

This exploratory study demonstrates the feasibility of using machine learning to predict treatment responses in Emotionally Unstable Personality Disorder. This study shows that ML can help personalize this process in mental health care in a big way, as it will help the clinician get all the facts required to tailor the course of treatment for the individual patient. However, the study has limitations, and one of its areas for improvement was the sample size. Hence, utilizing ML in designing interventions to enhance treatment outcomes is relevant. Further research should incorporate more extensive and diverse participant populations and apply more sophisticated machine-learning methods to corroborate and build upon these findings. These endeavors could improve the delivery of care modes that would help manage EUPD and, hence, the welfare of the patients. The increased use of ML in the context of the existing field's progress could broadly redefine current approaches to identifying and treating mental health disorders.

Competing Interests

The authors declare no competing interests regarding the publication of this manuscript.

Data Availability

The data supporting the findings of this study are available from the corresponding author upon reasonable request, due to the confidentiality of the patient information used in this study.

REFERENCES

- [1]. Adewole, K. S., Alozie, E., Hawau Olagunju, Nasir Faruk, Ruqayyah Yusuf Aliyu, Agbotiname Lucky Imoize, Abdulkarim, A., Yusuf Olayinka Imam-Fulani, Garba, S., Bashir Abdullahi Baba, Hussaini, M., Oloyede, A. A., Abdullahi, A., Rislán Abdulazeez Kanya, & Dahiru Jafaru
- [2]. Usman. (2024). A systematic review and meta-data analysis of clinical data repositories in Africa and beyond recent development, challenges, and future directions. *Discover Data*, 2(1). <https://doi.org/10.1007/s44248-024-00012-4>
- [3]. Chekroud, A. M., Bondar, J., Delgadillo, J., Doherty, G., Wasil, A., Fokkema, M., Cohen, Z., Belgrave, D., DeRubeis, R., Iniesta, R., Dwyer, D., & Choi, K. (2021). The promise of machine learning in predicting treatment outcomes in psychiatry. *World Psychiatry*, 20(2), 154–170. <https://doi.org/10.1002/wps.20882>
- [4]. Faouzi, J., & Colliot, O. (2023). *Classic Machine Learning Methods* (O. Colliot, Ed.). PubMed; Humana. <https://www.ncbi.nlm.nih.gov/books/NBK597496/>

- [5]. Hogg, E., Adamopoulos, P. G., & Krebs, G. (2023). Predictors and moderators of treatment response in cognitive behavioral therapy for body dysmorphic disorder: A systematic review. *Journal of Obsessive-Compulsive and Related Disorders*, p. 38, 100822–100822. <https://doi.org/10.1016/j.jocrd.2023.100822>
- [6]. Ikhtabi, S., Pitman, A., Toh, G., Birken, M., Pearce, E., & Johnson, S. (2022). The experience of loneliness among people with a “personality disorder” diagnosis or traits: a qualitative meta-synthesis. *BMC Psychiatry*, 22(1), 130. <https://doi.org/10.1186/s12888-022-03767-9>
- [7]. Lasfar, R., & Gergely Tóth. (2024). The difference of model robustness assessment using cross-validation and bootstrap methods. *Journal of Chemometrics*. <https://doi.org/10.1002/cem.3530>
- [8]. Marti-Puig, P., Capra, C., Vega, D., Llunas, L., & Solé-Casals, J. (2022). A Machine Learning Approach for Predicting Non-Suicidal Self-Injury in Young Adults. *Sensors*, 22(13), 4790. <https://doi.org/10.3390/s22134790>
- [9]. Myklebost, S. B., Gjestad, R., Inal, Y., Hammar, Å., & Nordgreen, T. (2022). Predictors of Treatment Response to an Internet-Delivered Intervention Targeting Residual Cognitive Symptoms After Major Depressive Disorder. *Frontiers in Psychiatry*, 13. <https://doi.org/10.3389/fpsyt.2022.795698>
- [10]. Sanchez-Martinez, S., Camara, O., Piella, G., Cikes, M., González-Ballester, M. Á., Miron, M., Vellido, A., Gómez, E., Fraser, A. G., & Bijmens, B. (2022). Machine Learning for Clinical Decision-Making: Challenges and Opportunities in Cardiovascular Imaging. *Frontiers in Cardiovascular Medicine*, 8. <https://doi.org/10.3389/fcvm.2021.765693>
- [11]. Sarker, I. H. (2021). Machine Learning: Algorithms, Real-World Applications and Research Directions. *SN Computer Science*, 2(3), 1–21. Springer. <https://doi.org/10.1007/s42979-021-00592-x>
- [12]. Schmitgen, M. M., Niedtfeld, I., Schmitt, R., Mancke, F., Winter, D., Schmahl, C., & Herpertz, S. C. (2019). Individualized treatment response prediction of dialectical behavior therapy for borderline personality disorder using multimodal magnetic resonance imaging. *Brain and Behavior*, 9(9). <https://doi.org/10.1002/brb3.1384>
- [13]. Shahpesandy, H., Mohammed-Ali, R., Oakes, M., Al-Kubaisy, T., Cheetham, A., & Anene, M. (2021). Management of 201 individuals with emotionally unstable personality disorders: A naturalistic observational study in a real-world inpatient setting. *Neuro Endocrinology Letters*, 42(3), 200–212. <https://pubmed.ncbi.nlm.nih.gov/34279863/>
- [14]. Taye, M. M. (2023). Understanding of Machine Learning with Deep Learning: Architectures, Workflow, Applications and Future Directions. *Computers*, 12(5), 91–91. <https://doi.org/10.3390/computers12050091>
- [15]. Wai Lim Ku, & Min, H. (2024). Evaluating Machine Learning Stability in Predicting Depression and Anxiety Amidst Subjective Response Errors. *Healthcare*, 12(6), 625–625. <https://doi.org/10.3390/healthcare12060625>

- [16]. Wang, W., Ferrari, D., Haddon-Hill, G., & Vasa Čurčin. (2023). Electronic health records as a source of research data. *Neuromethods*, pp. 197, 331–354. https://doi.org/10.1007/978-1-0716-3195-9_11