Childhood Maltreatment, Emotional Dysregulation, and Psychiatric Comorbidities (poster)

Yael Dvir
University of Massachusetts Medical School, yael.dvir@umassmed.edu

Brian Denietolis
University of Massachusetts Medical School, Brian.Denietolis@umassmed.edu

Follow this and additional works at: http://escholarship.umassmed.edu/psych_pp

Part of the Child Psychology Commons, Mental and Social Health Commons, Mental Disorders Commons, and the Psychiatry Commons

Repository Citation
http://escholarship.umassmed.edu/psych_pp/736

This material is brought to you by eScholarship@UMMS. It has been accepted for inclusion in Psychiatry Publications and Presentations by an authorized administrator of eScholarship@UMMS. For more information, please contact Lisa.Palmer@umassmed.edu.
Objectives
- Developmental effects of childhood maltreatment on emotional dysregulation and psychiatric sequelae
- Emotion regulation and its developmental neurobiology
- Research evidence for associations between childhood traumatization, emotional dysregulation, and psychiatric co-morbidities in children, adolescents and adults

Emotion Dysregulation & Childhood Trauma
ED: “The impaired ability to regulate and/or tolerate negative emotional states. Plays a part in many psychiatric conditions including anxiety and mood disorders
- CT: associated with interpersonal trauma and post-traumatic stress associated with a wide range of psychosocial, developmental, and medical impairments in children, adolescents and adults
ED is a core feature that may help account for this heightened risk

Emotion Regulation
Interplay between emotional and cognitive operations:
Selecting/modifying situations with emotional significance
- Developing/modyifying attention
- Integrating Information
- Making Judgement decisions
Selecting behavioral responses
Some emotions are generated automatically/regulated automatically
Other emotions require “meaning analysis” and are regulated with behavioral control

Neurobiology of Emotion Regulation
The generation of emotion occurs as an interaction/series of actions:
- Bottom-up (brain stem and limbic system to higher cortical regions)
- Top-down (frontal cortex to brain and brainstem areas via the amygdala)

Responses to emotional tasks are widely distributed throughout the brain:
- Higher cortical areas are not limited to emotional regulation
- Limbic regions are not restricted to emotion activation
- Rather, emotional regulation involves a widely distributed functional network with bidirectional associations among many emotion-related brain regions

Childhood Trauma & Psychiatric Comorbidities
The consequences of trauma vary from individual to individual and over time for the same individual
Many traumatized children do not develop PTSD or any other disorder
But those who experience significant trauma in childhood are at increased risk for a number of psychiatric disorders including:
- Attachment insecurity
- PTSD
- Depression and anxiety disorders
- Eating disorders
- Substance abuse
- A dissociative variant of PTSD
- Personality disorders

Traumatized children also are at risk for:
- Self-harm and sexualized behavior
- Anger
- Poor impulse control
- Attention difficulties

Revisiting neurobiological correlates in maltreated children and adolescents is associated with increased risk for PTSD and other comorbidities, such as depression and substance use disorder
A number of terms have been used to describe children who have experienced early, recurrent and severe interpersonal trauma:
- Developmental Trauma Disorder
- Complex Trauma

Psychiatric Comorbidities
Adults who experienced early life trauma continue to be at risk for:
- Anxiety and affective disorders
- Addictions
- Psychotic illnesses
- Personality disorders
- Dissociative identity disorder
- Suicidal/self-harm behavior
- Revictimization
- Multiple physical problems, including diabetes, heart disease, immune disorders, and chronic obstructive pulmonary disease

Emotional Development
Maltraeted children (sexual trauma, neglect):
- Deficits in delays in understanding and regulating emotions
- Anticipate a negative reaction to display of negative emotions (ashamed/anger to parents and peers)

These deficits can be taught as part of clinical interventions (Shipman &2000; 2005)
Caregiver representations in maltreated children:
- Disorganized, vague, and negatively-toned internal representations of caregivers
- Problems with emotional dysregulation
- Aggression
- Increased social competence (peer rejection) (Shields et al. 2001)
- Neglected preschool children had more difficulty discriminating emotional expressions and identifying discrete emotions

Physically abused children displayed a response bias for angry faces over neutral
Neglected children showed a response bias for happy faces over neutral

Conclusions
Complex and bi-directional relationship between childhood trauma and emotional development
Childhood trauma is associated with:
- Reduced ability to understand and regulate emotions mediated by relationalattachment with caregivers and peers
- Heightened levels of internalizing and externalizing pathology
- Impaired social functioning beginning in childhood and continuing into adulthood

References
Childhood maltreatment, emotional dysregulation, and psychiatric comorbidities: Yael Dvir, Julian D. Ford, Michael Hill, and Juan A. Fraser, Harvard review of psychiatry (2014)

Borderline Personality Disorder Precursor
Conceptualized/behavioral/emotional dysregulation as potential precursors to BPD in childhood
- affective negativism
- irritability
- liability
- impulsivity
- extreme conflict/stagoue in interpersonal relationships with peers and adults
- suicidal/self-harm behavior

Found consistent evidence of a relationship between history of maltreatment and all of the notions of dysregulation (Rogers 2009)

Re-victimization
ED underlying mechanism for risky sexual behavior and sexual re-victimization among young victims of child sexual and physical abuse

A history of childhood physical and sexual abuse was highly associated with increased risk for adolescent/adult rape
- More than 1/3 of women sexually re-victimized

Emotional dysregulation appearing to be a mediating factor

Other sexually risky behaviors (higher lifetime number of sexual partners including strangers) predicted by measures of emotional dysregulation
The severity of physical and sexual re-victimization is predicted by childhood sexual abuse

Maltreated children have a history of sexual abuse in their own childhoods: risk for impairment in their internal attachment representations and attachment behavior with their daughters
Daughters showed impairment in emotional-regulation, risk for exposure to sexual abuse (Min, Tolin, 2011, Hill 2009)