

**HEALTHY MINDS**  
**A WEEKLY COLUMN ALL ABOUT MENTAL WELLNESS**  
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**Paranoid Personality Disorder**



Paranoid Personality Disorder is, not surprisingly, a disorder marked by suspiciousness and distrust of others, to the extent that these activities are continual, very stressful, and prevent a person from functioning to his or her full capabilities. If the paranoia is caused by a psychotic disorder, such as schizophrenia, or by a medical condition (such as temporal lobe epilepsy), then this diagnosis cannot be made.

The symptoms usually start in late adolescence or early adulthood and can seriously affect education, employment and relationships.

People with Paranoid Personality Disorder often have difficulty making close friendships or relationships because they are so suspicious, and sometimes hostile or ready to fight or argue. This behavior will often, in turn, bring out an unfriendly response in others, which then makes the person with PPD feel justified in their original suspicions. They are always on the lookout for slights and insults, or clues to their suspicions. They doubt the loyalty of friends, the fidelity of partners, and often think that others are trying to harm or exploit them, or that information about them will be used against them. They misinterpret harmless remarks as put-downs, they hold grudges and do not easily forgive imagined insults or slights, often seeing them as attacks on their character; as a result, they counterattack, sometimes angrily.

These individuals often need to control others; they are narrow-minded, critical of others, and cannot work well with others. They find it hard to take criticism themselves and often get involved in lawsuits. Some think that they are very important and seek and exercise power and may have delusions of grandeur. They may hold strong stereotypical views over other cultural or racial groups who they find inferior, and sometimes will form alliances and groups with others of the same mind, as cults or hate groups.

There is no medical or laboratory test for this disorder, but it appears in from one-half of one percent up to two and one-half percent of the general population. It is also more common in men than in women, but for either sex it usually endures. It is also more common in those who have close blood relatives with Schizophrenia and Delusional Disorders. A persistent and more severe Paranoid Personality Disorder may evolve into Delusional Disorder or Schizophrenia. Other disorders may also co-exist with this condition, such as major depression, agoraphobia (fear of open spaces), obsessive-compulsive disorder, alcohol and substance abuse, and other personality disorders, which I will discuss in future articles).

There are some treatments for Paranoid Personality Disorder involving both medications and psychotherapy, but initiating treatment may be very difficult because of the client's suspicious nature. Getting a client to change his or her behavior through talk therapy can

be helped by family and self-help programs, and even advocacy programs run by others who are managing their own problem behavior. Medications are the least effective means of helping those afflicted with this disorder, and psychotherapy the most effective. Establishing a trusting relationship between the client and the therapist is key to providing the maximum help, although sufferers rarely initiate the therapy, and are quick to terminate it at the slightest hint of suspicion.

All in all, the outlook for those with Paranoid Personality Disorder is not very promising, but it is not hopeless and should not be ignored or allowed to deteriorate further.

**TIP OF THE WEEK:** “Something’s gonna kill me eventually!” I hear those words all the time when I talk to people about quitting smoking. Hopefully it will be something quick and painless, rather than a slow withering away caused by lung disease. A massive research study had shown recently that there is another possible side-effect of smoking: the abdominal aortic aneurism, a swelling of the abdominal aorta causing great and continuous pain, and sometimes bursting, often causing death, to the tune of 15,000 per year. According to this study, documented in a recent edition of the British Medical Journal, post-menopausal women who currently smoke are **NINE TIMES** more likely to get an AAA than those who never smoked, and more than four times as likely than women who quit smoking.

Another recent study in Cancer Research shows that nicotine, even through second-hand smoke, can promote the growth of cancerous breast tumors. Please think and act in a positive way if you continue smoking. Don’t do it around loved ones, and don’t let others smoke around you. Would you let them play around with a loaded gun at a family gathering?