

GPM & ICD-11 in Practice

Integrating generalist frameworks

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Agenda

Background

Conceptualizing GPM in
dimensional terms

GIT-PD group

Ongoing study

Background Malmö -Trelleborg

- Two parallel projects related to PD:
- Training and supervision in GPM, initiated in 2020
- Early preparation for the transition to ICD-11, involving online training and workshops since 2023.
- Between 2022-2025: 280% increase in F608 (other specified PDs).
- From 18 to 69 patients.

Guidelines for personality disorder treatment

- Adapt and apply treatment for BPD to other personality disorders.
- BPD criteria primarily reflect general personality dysfunction and severity rather than forming a distinct syndrome, suggesting they capture core aspects of impaired personality functioning across disorders.

(Ekelius , 2017; Bateman et al., 2015; Sharp et al., 2015)

Implementation & Development:

- **Psychoeducation:** 6-session group implemented.
- **GPM Workshop:** Adapted for ICD -11.
- **Group Intervention:**
 - Standalone for milder cases.
 - Foundation for team -based GPM in severe cases.

Key components of the dimensional system

ICD-11/ AMPD	GPM
<p>Personality functioning (PF): Ability to understand/regulate self and manage relationships Stable <i>and</i> fluctuating.</p>	<p>Impairments interact with hypersensitivity.</p> <p>Principles: strategies for addressing impairments.</p> <p>Overlap with mechanism of change.</p>
<p>Personality traits : Enduring, maladaptive patterns. Largely genetically determined. Resistant to change, including from treatment.</p>	<p>Hypersensitivity specified and dynamic conceptualization of traits.</p>
<p>Severity in terms of PF.</p>	<p>Increased severity: more triggers <i>and</i> stronger reactivity to triggers.</p>

(Allen et al., 2022; Blay et al., 2023; Miskewicz et al., 2015; Sinnaeve et al., 2021; Wright et al., 2015)

Introduction to GIT -PD

- GIT-PD based on DSM-5 AMPD, aligned with our development work.
- Generalist approach: no specialist expertise required.
- Access to materials from Joost Hutsebaut.
- Pilot project started in 2025.

The GIT-PD Group Model

- Organized around Personality Functioning:
 - 4 Modules (Identity, Self-Direction, Empathy, Intimacy)
 - 8 sessions per module
- Added: A fifth module for skill consolidation.
- 90 minutes:
 - Review of homework.
 - Introduction of the day's theme (mixed methods: reflection, discussion, role-play).
 - Assignment of new homework.

Patient Group, pilot.

- All patients diagnosed with moderate personality disorders (ICD-11) with the following traits:
- Detachment (4 patients) – comparable to avoidant personality disorder (DSM -5).
- Anakastia (ICD-11)/ Rigid perfectionism & perservation (AMPD) (4 patients) – comparable to obsessive -compulsive personality disorder; two of these also narcissistic traits.

Patient Evaluations, pilot.

Metric	Module 1 Identity	Module 2 Self -direction	Module 3 Empathy	Module 4 Relationships
Sessions Quality (mean value) <i>How useful was the session?</i>	4.0	3.6	4.1	3.8
Utility <i>Will it help you in daily life?</i>	4.0	4.2	4.5	4.2
Peer Learning <i>Did you learn from others?</i>	4.4	4.4	4.3	4.5

Scale: 1 (Not at all) → 5 (Very much)

Experiences and Adjustments

- GIT-PD v GPM: More psychologizing, focus on the formation of maladaptive patterns in interaction with the environment and upbringing factors.
- In our group (not inherent to GIT-PD): At times a drift from addressing shared features of personality disorders to examining universal difficulties inherent to human experience.
- Adjustments:
 - Earlier focus on Self-Direction
 - More focus on coherence-models

Ongoing study - background

- Paradigm shift → therapeutic void
- RnD funding (FOUU)
- 8 patients diagnosed with PD other than BPD, as defined by ICD-11. Moderate difficulty levels. Aim was n 8-11 and moderate to severe difficulty
- Patients are recruited from a 6 sessions psychoeducational group intervention on personality disorders
- No selection based on trait domain specifiers (apart from borderline as an exclusion criteria for main problem formulation)

Ongoing study - outcomes

- Main purpose: is it a reasonable intervention to offer?
 - Patients' experienced benefit, relevance and comprehensibility (focus group interview)
 - Feasibility
- Tendencies toward change in regards to
 - Personality function and prominent traits (LPFS BF 2.0, PID -5 BF+M 36)
 - Symptom levels (PCL -90)
 - Life quality (MANSA)
 - Motivation to change (PCMS)

Ongoing study - layout



SCL-90
MANSA
PID-5 BF+M
36
LPFS BF 2.0
PCMS

PCMS

SCL-90
MANSA
PID-5 BF+M
36
LPFS BF 2.0
PCMS

PCMS

PCMS

SCL-90
MANSA
PID-5 BF+M
36
LPFS BF 2.0
PCMS

FOCUS
GROUP

Thank you!

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