

Intimate Portrait: Otto Kernberg, MD

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Being a Therapist features intimate portraits of psychotherapists in their own work spaces. An excerpt of his interview with Otto Kernberg, MD, follows.



I like to work on the limits of our knowledge. I treat mostly patients with personality disorders—those with particularly severe cases. In recent years, I have developed a technique of formal psychoanalytic therapy for those with severe personality disorders, transference-focused psychotherapy.

We look at personality as something so rigid and petrified. The truth is, it's a dynamic structure. And there are ways to modify rigidity and serious limitations in personality function.

One has to differentiate the higher levels of neurotic personality organization from the more severe personality disorders or borderline personality organization. In the relatively milder personality disorders, we find certain rigidities of behavior. Normal aspects of behavior get lost in some areas and repetitive, nonadaptive patterns appear, particularly when it comes to love and sexuality, work and profession, or social life and creativity. In any of these areas, inhibitions or inappropriate behavior may limit the effectiveness and the well-being of the individual. The person shows inflexible behavioral patterns that don't depend on the free will. They have become automatized, autonomous, and self-perpetuated.

In severe personality disorders, all the adaptation and social life of the individual are disturbed . . . the core symptom we call identity diffusion. It refers to a lack of integration of the concept of self and others. The individuals' experience of their feelings, or affect states, determines different views of themselves and others that shift from one affect state to the next. It can't be pushed together. So an individual can't really tell who he or she is because he shifts from contradictory states he cannot put together.

These individuals have the same problem with other people. They have great difficulty in integrating

their shifting views of others under the impact of their changing affects. It is hard for them to grasp the essence of the personality of others. They cannot assess themselves or predict their own behavior reasonably.

A person with a borderline personality organization, for example, experiences intense affects of love, hatred, fear, rage, anger, envy, or sadness. Under such affect states, he loses the capacity to assess where he stands and what he feels, what he should do and what other people feel or think or are doing. It brings about a forced judgment about what is going on and how to behave with other people. These people don't know how to understand their own feelings, how to control them, and what to do with them.

This leads to erroneous selection of partners; it generates insecurity, loss of self-esteem, anxiety, sexual difficulties, inhibitions in love and professional life, and all the symptoms of personality disorders.

I try to explain all this as clearly and as fully as patients are able to understand. I'm very straightforward with my patients, and treatment that we have developed and researched in the Personality Disorders Institute at Cornell, which I direct, is geared toward resolving the profound internal conflicts and contradictions these patients experience.

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