How does intention shape neural processing of moral conflict in **borderline personality disorder?**

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Background

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- Borderline personality disorder (BPD), is a mental disorder characterized by interpersonal problems like trust and forgiveness [1, 2].
- Numerous studies on BPD has focused on trust [3], rejection sensitivity [4], and fairness perception [5], less is known about how they attribute intentions in moral conflict.
- Medial Frontal Negativity (MFN), a neural marker of conflict monitoring [6] and moral evaluation [7], may help elucidate the mechanisms underlying these attribution biases in BPD. •

Aim

- Investigate whether BPD patients differ in intention interpretation compared to controls.
- Examine how these differences influence behavioral and neural conflict processing.

Methods

Analyses Preprocessing

- Semi-manual ICA rejection for artifact removal
- Bandpass filter (0.1–30 Hz), epoching (-200 to 500 ms)
- Baseline subtraction: 200 ms pre-stimulus.

Participants

- 15 BPD and 15 Controls (18-50 years old) 0 Age-sex matched (12 \bigcirc , 3 \bigcirc)
- The aimed sample size is N = 126 (63 per group) 0

For BPD: Stable antidepressive medication min. two weeks before the study onset

Experimental setup





- **• F1** establishes scene
- F2 presents action
- F3 confirms intention

EEG setup \bullet

System: 32-channel EEG with BrainAmp amplifier **Electrode Placement:** 10-20 system, focus on Cz **Impedance:** Kept below $10 \text{ k}\Omega$.

Behavioral Results

A. Accidental harm perceived as intentional: Group comparison



C. MFN Amplitude group differences



Discussion

- BPD patients exhibit heightened neural sensitivity to both harm conditions and increased behavioral misinterpretation of accidental intent, suggesting a broader difficulty in moral reasoning beyond just intention attribution, potentially linked to emotional dysregulation and increased threat perception.
- Future work will expand the dataset and examine MFN-behavior correlations, potentially provide insights into disrupted interpretation, conflict detection, and social cognition deficits in BPD.



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References:

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