

Medical, Social and Criminological Aspects of Psychopathic Personality Disorder

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ABSTRACT: Psychopathic personality is a worldwide known psychiatric trait that brought fascination and interest not only in the scientific world but also in social culture and media due to its spectacular and powerful contrast with other mental health issues and also because of the impact the psychopathic behavior echoes in the society. The medical field describes psychopathy as an antisocial personality disorder, a disorder of affectivity and moral or “*moral insanity*,” as Prichard (1999, 118) described it, because most of the characteristics were found in delinquents. For a long time, it was considered an entity at the border of normal and pathological. In the following article, we will present general aspects of this condition from a bio-psycho-social point of view in order to better understand its implications in medical, social, and criminological fields.

KEYWORDS: psychopathy, antisocial, criminology, personality, callous unemotional

Introduction

Personality disorders are a special area of the psychological and psychiatric expertise field. That is because they do not represent classic pathological structures for mental illness. They actually are cognitive and affective patterns of behavior that develop through childhood. They crystalize through adolescence and will describe the individual through his adulthood. These entities are behavioral disruptions resulted from a disbalanced development of all personality and conscience levels. An antisocial personality disorder is a part of the cluster B group of person-pathic traits, alongside histrionic, borderline, and narcissistic types. This cluster of personalities is known for its dramatic, extreme emotional or unemotional, and unpredictable features. The DSM manual of the American Psychiatric Association places personality disorders on an independent axis, separately from other pathologic areas, but also, they can define major psychiatric disorders. A psychopathic personality disorder is maybe the most fascinating and complex disorder but in the darkest and most antisocial sense (Kraus and Reynolds 2201, 350).

In 1886, Richard von Krafft-Ebing's "Psychopathia Sexualis" described a psychological feature defined by cruelty and lack of empathy. The author also characterizes the terms "sadism" and "masochism" by commenting on the publications of Marquis de Sade and Leopold von Sacher-Masoch. For a long period of time, pathological personalities were not documented as mental disorders but as semi-normal ways of being, as they did not influence the cognitive functions (Von Krafft-Ébing 2013, 140). Later on, Philippe Pinel was the one who defined the behavioral characteristics of these individuals who had no cognitive disruption but were lacking emotions, empathy, and, therefore, moral directions. Lack of responsibility, cruel and sadistic behavior, and predisposition to substance abuse and frequent antisocial activity were also acknowledged. This description, completed by Koch, Kraepelin, si Cleckley led to the modern medical definition of antisocial personality disorder as stated in the DSM manual (Schulsinger 1972, 191).

Medical overview of the antisocial personality disorder

The DSM Manual enlists characteristics that could check the behavioral pattern of criminal offenders but also, traits that affect people in non-criminal

ways. These individuals have a constant disregard for other people's emotions and well-being, having no problem in violating human rights and acting without remorse. As such, though many delinquents will check antisocial behavioral traits, they can also remain in the social frame and disrupt social rules and expectations in a non-law-offensive way. Sociopathy and psychopathy are commonly mistaken one for another. Still, the root of the behavior is different and the severity of the symptoms is different. Sociopathy is a secondary effect of environmental factors and influences, especially in the adolescent period. The psychopathic personality is a primary feature, with genetic and neurobiological mechanisms involved. The second type has complex interferences between social, familial and physiologic factors, as some of these individuals can remain inoffensive or manifest in their intimate space, without major social implications. Moreover, sociopathic behavior defines a violent response to social/environmental stimuli but in psychopathy, violence and cruelty with no apparent reason will be conducted towards a specific personal goal (Liam 2012, 483).

Another important feature and the reason why it is called "moral insanity", is the fact that narcissistic traits are part of their personality and the combination of self-focused manifestation and lack of moral conscience leads to impulsive decision-making, disregarding the effects of their action will cause.

As stated above, there are no cognitive impairments, at least no visible cognitive disruptions in these patients. Moreover, there are many studies that suggest that these individuals have higher IQ scores than the average. This statement is still contested as they are truly cunning and capable of simulating affection and manipulating with their false charm and also they can plan their work in an exquisitely detailed way but these features, may be so prominent specifically because of their failure to affective motivate their actions.

Current criteria, aligned to the latest version of DSM Guidelines (DSM 5) include activities that defy rules and law, including criminal offences, lying, misleading and manipulation of others for their own benefit or distraction, impulsivity, irritability and frequent aggressive behavior (verbal, emotional and physical), lack of responsibility, assumption and remorse for their action but also a disregard for their own and other's safety. Also, to these criteria, there are another 3 features that may be added: the disrupted behavior is not part of a psychotic disorder manifestation such as schizophrenia or bipolar affective

disorder, the patient is minimum 18 years old and/or has a history of conduct disorder before the age of 15. The age of the diagnostic is extremely important, as personality does not crystalize before adulthood in the range of 18-20 years (DSM 5, 2013, APA).

The DSM guidelines for antisocial personality disorder diagnostic cover a broad spectrum of pathologic elements but specific types of psychopathic features are evaluated with psychological battery tests. Still, the absorption of psychopathy into antisocial spectrum implies a more social view, although psychopathy does not impact environmental features only, but also intimate personal dynamics. Some authors consider that antisocial personality disorder is a more efficient definition for sociopathy rather than psychopathic personalities, as the last one need more profound and detailed individual characterization. As such, Cleckley (1941) and Hare (1991) developed a schematic diagnostic instrument with multiple factors to be checked during evaluation and these criteria are still used by many psychiatrists to this day (Regier, Kuhl and Kupfer 2013, 94).

Cleckley (1941) enlisted the following features that describe a psychopath:

- ✦ Intelligence and charisma
- ✦ Absence of hallucinations, delirium or psychotic symptoms.
- ✦ Lack of psycho-emotional tension, fear or concern
- ✦ Unreliable and unworthy of confidence
- ✦ Constant lying
- ✦ Lack of remorse, shame and guilt
- ✦ Antisocial behavior without any remorse
- ✦ Impaired rationality in the context of learning from experiences
- ✦ Incapacity for love and pathologic egocentrism
- ✦ Profound lacking of emotional reactivity
- ✦ Lack of responsibility in interpersonal relations
- ✦ Dramatic and theatrical behavior
- ✦ Demonstrative suicidal threats
- ✦ Impersonal and poor integrated sexual activity
- ✦ Failure to be consistent and finish a plan. (Crego and Widiger 2016, 75)

On the other hand, Hare (1991) divided all psychopathic features into two classes: personality traits and social defiance traits with three additional and optional factors added: his personality checklist included superficial charisma, megalomania and high self-esteem, pathologic lying, manipulation, lack of remorse and guilt, superficial or fake affect, lack of empathy and cruelty and lack of responsibility for their own actions. The social defiance traits included: permanent need for stimulation and novelty seeking, parasitic/dependent lifestyle, history of juvenile delinquency, lack of realistic expectations, impulsivity, irresponsibility, often reiteration of antisocial behavior. The additional factors include promiscuous sexual activity, multiple and short marital or engagement relationships and the variability of the criminal behavior. All these items are helping specialists and researchers but also forensic psychiatry experts to detail their diagnostic and to fully assess the patient (Cooke and Michie 1997).

Although there are still strong debates on the concept of psychopathy, especially in the field of physiopathology and clinical features and even DSM criteria are still being argued, so the research in this field and the need for an effective management in medicine, social environment and criminology are imperative.

The psychopathological characteristics of psychopathy

In order to understand the criminological predisposition of this personality disorder, a full radiography of the pathological mechanisms is required. Starting from official guideline and other accepted definition of the antisocial personality disorder, the following lines will detail the characteristics of this disorder stating from neuro-psychiatric aspects to emotional and social features. These aspects will, one by one, explain the criminological predisposition of these patients.

The cognitive aspect of this personality is still highly debatable and a subject of active research. On one side, it seems that these individuals have different cerebral mechanisms of perception and interpretation of the external environment. The egocentric mentality works towards planning his own personal interests and satisfaction. His way of thinking will find solutions to his own problems with no interest in the well-being of others. As such,

his cognitive features will use environmental stimuli selectively, focusing on his own desires, no matter the negative impact those plans have on others (Walters 2004, 145).

The megalomaniac feature is a big part of the cognitive mechanism of this personality. The grandiose vision of themselves comes with a sense of unlimited power and the wrong perception that others admire them deeply. This person will respond with more charisma to positive feedback and his self-esteem will be charged to extreme, but he will respond as extremely negative to critics and even with aggressive behavior. This characteristic is also a trap as their inability to perceive themselves and the outer space in a realistic way, leads to poor assessment of their medical, social, familial and material state and to fantasy expectations, especially from others. In this way, failure will be externalized, the guilt will never be assumed and the self-victimization will close the vicious circle of their disrupted interpersonal and social behavior. On the other side, there is also a judgmental perception of the external environment with often hostile points of view. This impaired perception can be viewed as a semi-conscious self-reflection in the outside world, as the person will often criticize his own vulnerabilities and negative features. Still, this behavior will often serve as a justification for his actions against others, as a manipulative mean to an end but it will also serve as a precursor for antisocial behavior and criminal activity (López and Núñez 2009, 10).

Before we analyse the affective traits of psychopathy, we should dive into cognitive processing of emotions. Functional MRI studies and clinical observations have tried to link psychological test scores to symptoms and central nervous system processing. It seems that certain areas of the brain, involved in empathy and emotion regulation via neurotransmitters, are poorly activated or not activated at all during external affective stimulation. These regions include the temporo-parietal area, the amygdala, the nucleus accumbens, the ventromedial and prefrontal cortex, which are areas that should work in a coordinated dynamic. These disruptions are observed even in youths with conduct disorders and callous unemotional symptoms. These observations, made by comparison with healthy control groups, led to the neurodevelopmental hypothesis of the antisocial personality disorder. Between sociopaths and psychopaths, respectively, between conduct disorder

youths and callous youths, the genetic involvement is the one who decides the severity of the affective pathologic process. Furthermore, genetic traits and neurobiological disruptions are more evident in callous and psychopathic individuals, this characteristic divides the two clinical entities into a more psycho-emotional developmental disruption and one being more deeply organic rooted. As such, neurobiological processes should further describe important clinical features that could unlock diagnostic and possible medical management of these cases but also, could impact the procedures of forensic psychiatry and psychologic expertise. An important aspect of the cognitive mechanism in antisocial personalities is its presence and the fact that these individuals have often elevated IQ scores compared to average, thus, discernment is not questionable during psychiatric expertise. Also, their lack of responsibility does not mean they are not responsible for their actions but the disruption of the emotional filters will make them unable to understand their guilt and to be rehabilitated during a legal trial and further punishment (Blair 2013, 790).

The affective expression in psychopathic personality disorders has no profound mechanisms or roots. They lack in the very core of their subconscious and conscious level of personality. Still, they are described as impulsive and irritable. The interesting question is how these features are triggered in these people as they usually have strong affective fundament. It can also be observed how negative emotions appear in the description of these patients: anger, envy and even love for themselves. If a normal person is "blinded" by the love for another, and his perception of that person changes to positive, then we could affirm that self-love, in these individuals, could be a variant of love that augments their perception of themselves, and still, it can be considered a variant of emotion. So, we could further describe psychopathy as a lack of positive emotions toward others or an inverted affective mechanism with negative assessment of outer space and positive perception of self (Thomson 2019, 149).

The lack of empathy has multiple psychological and cognitive components and it includes the capacity of recognizing one's emotional state, the capacity of accepting the emotional perspective of the other and the capacity to reflect the other one's emotional state. The psychopathic individual has an accurate cognitive sense for recognizing the other's emotions and their perspective. We could say

that he has a sixth sense in this direction, which makes him able to identify vulnerabilities in others and place himself in a privileged position from which he will be able to manipulate and dominate the context, especially by saying what the victim wants and needs to hear and by stimulating their compassion. Returning to the discernment issues, it is important to reinstate the fact that the psychopathic person has the cognitive means to understand the negative side of his actions but he will never feel the emotional distress he is causing and will ignore or attack the person involved. This is one of the reasons why reiteration of antisocial acts is a big risk with these individuals. Also, the lack of consistency and the unrealistic expectations they manifest for themselves puts them in a constant need for excitement and novelty. They can be truly interested in subjects and activities that align with their interest, but they can also fake that interest in order to obtain their goals. Also, they will get bored and leave the context the moment they no longer feel the novelty stimulation or they are required to put an effort to achieve something (Brook, Brieman and Kosson 2013, 981).

Anger is yet another negative emotional entity that can appear due to impulsivity. Impulsivity and anger in psychopathic traits do not come from its temperamental affective level but from a need for fast gratifications, with poor effort and lack of consistent effort. This makes them prone to criminal activity and dependent relationships, in which they can benefit from their emotionally manipulated victim. The anger and aggressive responses come from the frustration of the failure to obtain his goals and because of critics of his person but it remains an emotional-void motivated response to negative stimuli for his self-esteem (Fox, Jennings and Farrington 2015, 287).

The interpersonal relations of the psychopathic individual is maybe the area with the most negative social impact. Although social media has begun to raise awareness, promote healthy perspectives and develop support for victims of emotional abuse, especially for those coming out from a relationship with narcissistic and antisocial individuals, there is still a lot more to be resolved in this area. The psychopathic individual will always place himself on a superior level in any relationship. He will activate all his abilities to lie and deceit by mimicking and offering all that his victim needs and acting with a perfect seductive and convincing capacity. The victim will be absorbed in a false perception which will act as an emotional bond. The next step is taking that validation away from the victim and making her/him work hard for anything the psychopathic

individual will offer. This mechanism will deactivate all defensive and self-esteem traits in the victim, making her/him completely dependent on the psychopath's validation, while the last has the freedom to enjoy all benefits and to increase his megalomania. The trauma of emotional abuse leaves profound marks, even in the aftermath of that relationship (Vicente 2011, 62).

Sex differences in antisocial personality disorders, has been a long debated subject. Most of the studies admit that the two genders manifest similarities at psychological levels, reflected in the psychological testing scores, but manifestations are somehow different as females tend to be less physically aggressive and more prone to manipulation and self-destructive behavior, while men are more hetero-aggressive and tend to manifest more of the narcissistic traits (de Vogel and Lancel 2016, 101).

Conclusions

From moral insanity to a distorted way of being and to psychiatric pathology is a long road. However, the research direction moves closer and closer to discovering pathophysiological mechanisms involved in these disorders and, thus, to a more efficient medical and social management of these patients. This means better recognition in the social and familial environment, medical and psychological prevention and treatment, and more complex forensic management.

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The fact that a fundamental aspect of the personality, the affective level, is disrupted or has inverted cognitive mechanisms is the main feature that should be understood about psychopathic personality disorder. It is the reason why these individuals cannot integrate into any community as they lack emotional motivation, which is a baseline human being trait. It aligns people to moral rules and empathic consideration, which supports any

social or cultural matrix. Although they can be attractive, charismatic, and persuasive, the narcissistic traits and the lack of remorse can be recognized. As these individuals often negatively impact their interpersonal relations and emotional trauma, prevention should begin through better education and victim support, as this would cut their stimulation and motivation even before they engage in criminal activity.

In the large spectrum of antisocial behavior, from conduct disorder and callous-unemotional in young individuals to specific psychopathic or sociopathic traits in adults, neurobiological characteristics are the direction for research, unlocking interdisciplinary management protocols for both medical and forensic fields.

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