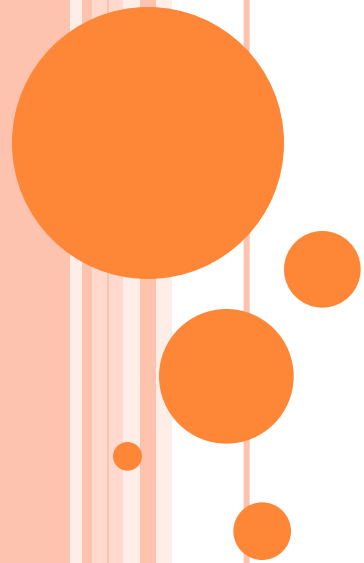


PYSCHOPATHY AND ANTISOCIAL PERSONALITY DISORDER

Lisann Nolte & Justine Paeschen



PSYCHOPATHY

THE PSYCHOPATH TEST

- http://www.youtube.com/watch?v=e_vA2TI6cZwTH
E PSYCHOPATH TEST - are you a psychopath?



PSYCHOPATHY

HARE PSYCHOPATHY CHECKLIST REVISED

- Superficial charm
- Grandiose self-worth
- Pathological lying
- Manipulative
- Lack of remorse or guilt
- Emotional poverty
- Lack of empathy
- Failure to accept responsibility for own actions
- Needs stimulation, easily bored
- Parasitic lifestyle
- Poor behavioral control
- No realistic long-term goals
- Impulsiveness
- Irresponsible
- Juvenile delinquency
- Early behavior problems
- Revocation of Conditional Release
- Promiscuity
- Many short-term marital relationships
- Criminal versatility



ASSESSMENT

- points per item
 - 0 if it does not apply to you
 - 1 if it somewhat applies
 - 2 if it fully applies
- No criminal background around 5
- 30 or above qualifies a person for a diagnosis of Psychopathy



PSYCHOPATHY OUTDATED

- Not formally recognized by American Psychiatric Association (APA),
- Not in the DSM-V
- More severe form of ASPD (Antisocial Personality Disorder)
- Almost all Psychopaths meet criteria for ASPD
- Psychopathy: more importance on affective and interpersonal traits
- ASPD: based on behavioral pattern





ANTISOCIAL PERSONALITY DISORDER

ANTISOCIAL PERSONALITY DISORDER

- *What is a personality disorder?*
- enduring pattern of inner experience and behavior that deviates markedly from the expectations of the individual's culture
- pervasive and inflexible
- leads to distress or impairment
- stable and of long duration (onset in adolescence or early adulthood)
- not another mental disorder
- not due to physiological effects



HYBRID DIMENSIONAL-CATEGORICAL MODEL

- New in DSM-V
- Diagnosis of Personality Disorder—Trait Specified (PD-TS)
 - can be made when a Personality Disorder is considered present, but the criteria for a specific personality disorder are not fully met.
 - clinician notes the severity of impairment in personality functioning and the problematic personality trait(s)



CRITERIA ASPD

- At least three of the following specific signs and symptoms:
 - Lack of conforming to laws,
 - Repeated deceitfulness in relationships with others,
 - Failure to think or plan ahead (impulsivity)
 - Tendency to irritability, anger, and aggressiveness
 - Disregard for personal safety or the safety of others
 - Persistent lack of taking responsibility
 - A lack of feeling guilty about wrong-doing
- Not diagnosed in children but the affected person must have shown symptoms of this diagnosis at least since 15 years of age.



ASPD

- Assessment
 - Mental-health interview that gathers information to look for the presence of the symptoms
 - Importance of the cultural context
- Affects about 1% of women and 3-4% of men
 - Different manifestations





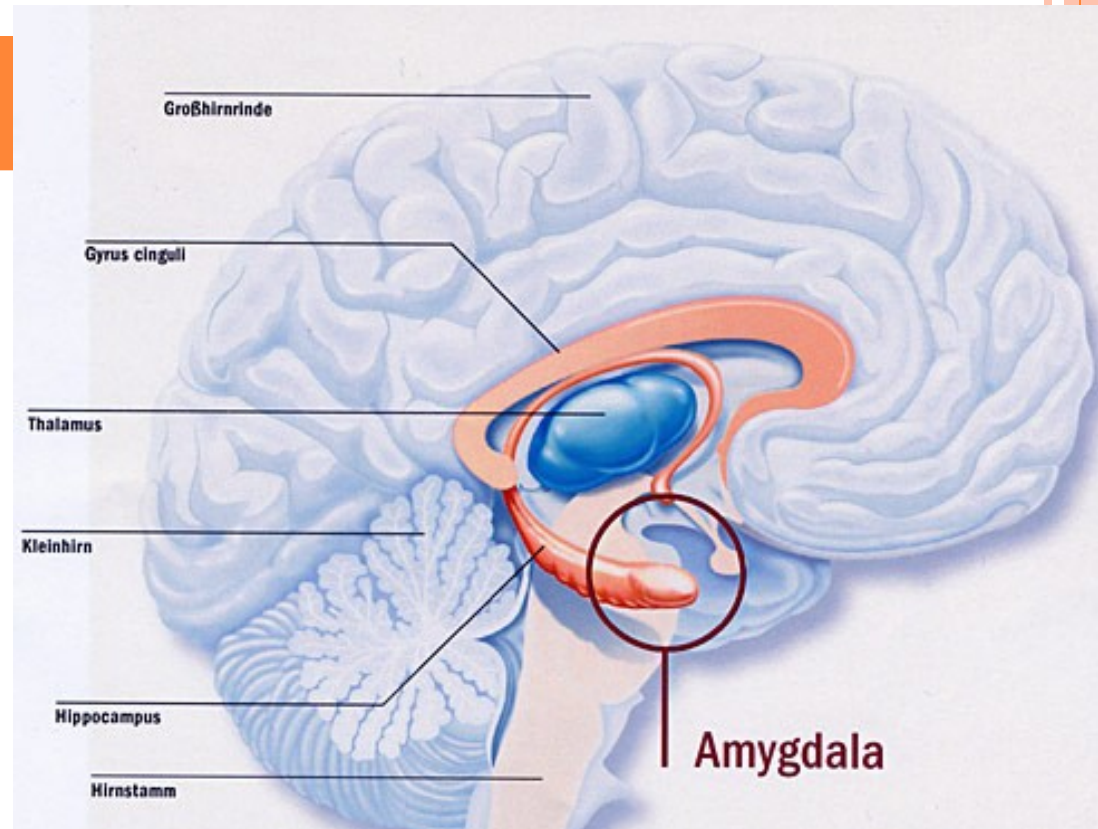
CAUSES

Combination of biological and environmental factors

BIOLOGICAL FACTORS I

Amygdala

- Smaller
- Less responsive to happy, sad or fearful facial expressions of others
- Link between lack of response and lack of empathy

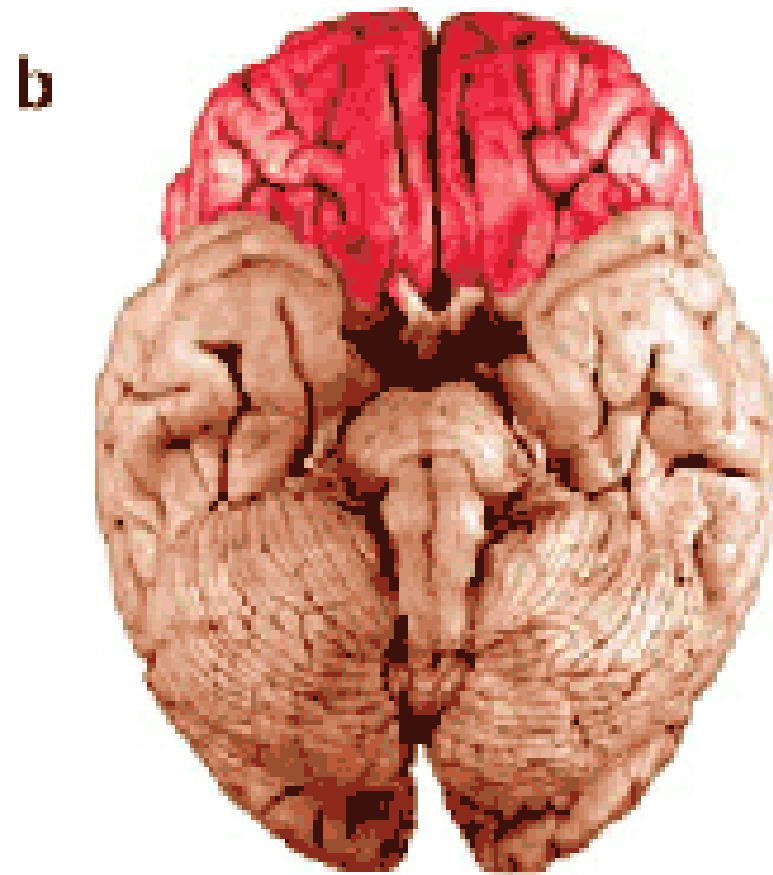
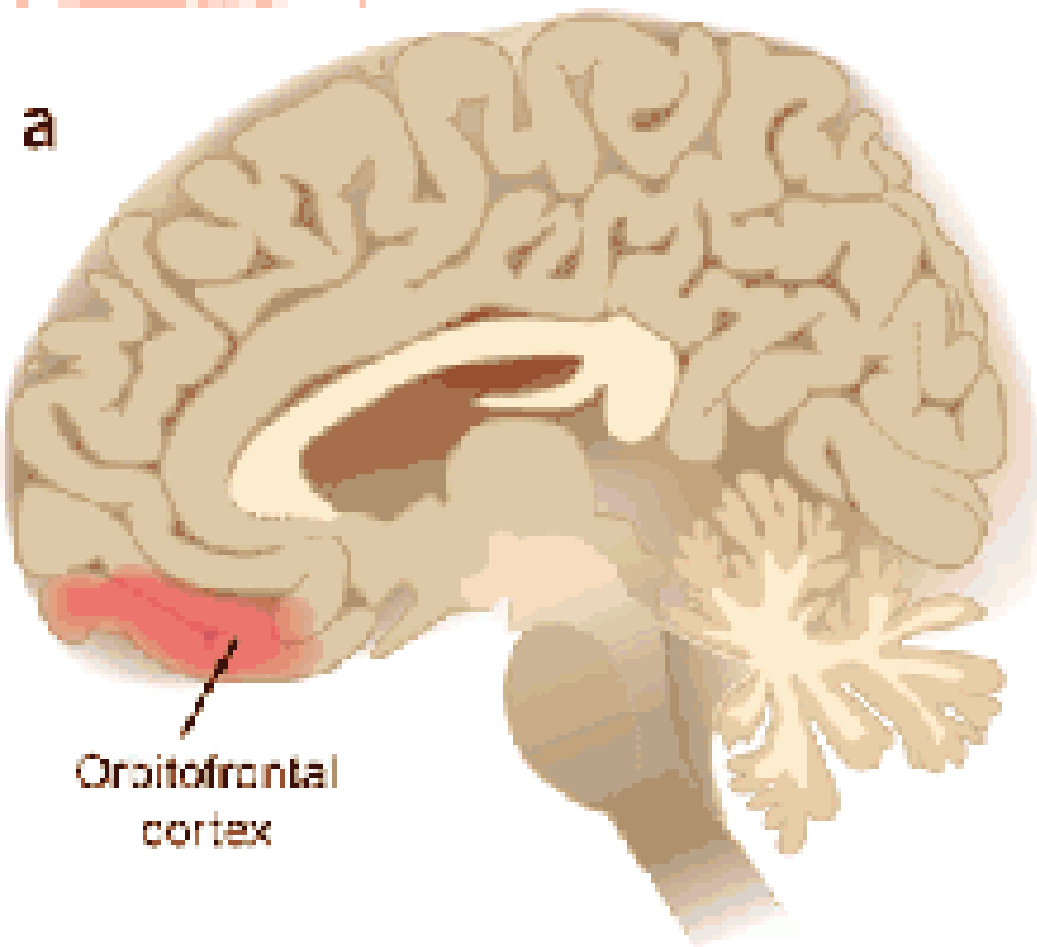


BIOLOGICAL FACTORS II

Orbitofrontal cortex

- Damage leads to
 - Difficulties in decision making
 - Risk assessment
 - Reward
 - Punishment
 - Impulsivity
 - Vivid emotional expression
- = acquired Psychopathy
- Phineas Gage





BRAIN SCANS

<http://www.youtube.com/watch?v=yF6nlnadzbE>

ENVIRONMENTAL FACTORS

- Life events (risk factors)
 - Prenatal drug exposure or malnutrition
 - Childhood physical, sexual or emotional abuse
 - Neglect
 - Depravtion or abandonment
 - Antisocial and alcoholic parent



OTHER RISK FACTORS

- Substance abuse
- ADHD
- Conduct disorder in children
- Reading disorder

➤ **COMBINATION !**





TREATMENT

THERAPY

- Cognitive behavioral therapy
 - Early treatment can help preventing behavior from becoming worse
 - Questioning the patients maladaptive or irrational thoughts and providing new cognitions to replace them
 - Therapeutic modelling
 - Combination of cognitive restructuring and relaxation training to help patients gain control over their behavior
- Group therapy
 - Improve interactions with others
 - Psychodrama



TREATMENT MODEL I

- Dr Henri van der Hoeven Clinic, The Netherlands
 - Community based treatment
 - Patients have been committed by penal courts because of severe crimes and risk of future offence
 - Age 20 to 35, length of stay 4 years



TREATMENT MODEL II

- Purpose : provide rehabilitation
- Important part: patient group accepts responsibility for decision making
- Living tasks are shared between staff and residents
- Intense involvement in own treatment planning
- Most common form: group psychotherapy in combination with educational rehabilitation and resocialisation programmes



PHARMACOLOGICAL TREATMENT

- Most common forms of medication:
 - Neuroleptics
 - Reduction of arousal (aggression)
 - Antidepressants
 - Lithium
 - Reduction in impulsive, explosive and emotionally unstable behaviors
 - Benzodiazepines
 - Control of anxiety states and insomnia
 - Psychostimulants
 - To reduce feelings of tension and dysphoria
 - Anticonvulsants
 - Reduces behavioral dyscontrol



TREATMENT DIFFICULTIES

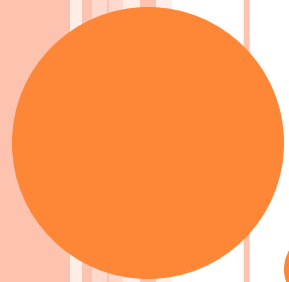
- People with ASPD often do not admit they have a problem
 - Rarely seek treatment on their own
 - Poor motivation
- Threat of danger
- Deceit



HIGH COSTS FOR SOCIETY

- ASP : a frequent disorder
 - Affects up to 8¹/₂ million Americans
 - Costs us billions though its direct and indirect costs
- *In what?*
 - Imprisonment:
 - Each time society spends 10 000\$ for ASPD treatments, they avoid 70 000\$ to keep patients in prisons.
 - Law enforcement
 - Criminal justice
 - Hospitalizations





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CAUSES

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