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A treatise on secondary psychopathy: Psychobiological pathways to severe antisociality

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ABSTRACT

Since its inception, the concept of "secondary psychopathy" has been contrasted with primary psychopathy on the grounds of neuroticism, affect instability, and anxiety. Nonetheless, while the etiology of primary psychopathy, and its various possible expressions, has received ample attention, secondary psychopathy has been largely neglected and only discussed in cluster-analytic studies. This paper seeks to fill that caveat by delineating the continuum on which secondary psychopathic individuals may be set apart and exploring potential sources of within group homogeneity and heterogeneity. While secondary psychopathic individuals share a number of etiological antecedents (attachment problems, childhood maltreatment, neurobiological dysfunctions) they can vary on different temperamental predispositions and specific types of maltreatment experienced in childhood (neglect/ abuse vs. trauma/abuse, low vs. high prefrontal catecholaminergic activity), thus creating the heterogeneity observed in this group. Secondary psychopathic individuals may be situated on a continuum that spans from attentional hyposensitivity and cognitive distractibility on the far left side, associated with deficient prefrontal catecholamine activity and childhood neglect/abuse, ultimately culminating in more detached expressions of secondary psychopathy (callousness, hedonism, and low worrying), to attentional hypersensitivity and cognitive rigidity on the far right side, associated with non-optimally high levels of catecholamine activity and childhood relational trauma/abuse leading to more unstable expressions of secondary psychopathy (hostility, neuroticism, instability, and worrying).

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1. Introduction

The term "psychopathy" in psychiatric literature encompasses a heterogeneous group of individuals, who, despite showing similar core psychopathic tendencies, also differ substantially on other domains of personality, such as self-control, neuroticism, and affect instability (Blackburn, Logan, Donnelly, & Renwick, 2008; Gao & Raine, 2010; Patrick, Fowles, & Krueger, 2009; Skeem, Poythress, Edens, Lilienfeld, & Cale, 2003; Skeem, Johansson, Andershed, Kerr, & Louden, 2007; Skeem, Polaschek, Patrick, & Lilienfeld, 2011; Yildirim & Derksen, 2015a). In response to comprehensive review, it has been recently asserted that a basic differentiation might be made between two continua of possible psychopathic phenotypes, namely the primary and secondary psychopathic continuum—with the core pathology in primary psychopathy being a deficiency of emotion, caused largely by genetic factors, and the core pathology in secondary psychopathy being a disturbance of emotion, caused mainly by destructive environmental influences on emotional and moral development (see Yildirim, 2016; Yildirim & Derksen, 2015a). In addition to this more general betweengroups distinction, however, it has been argued that both primary and secondary psychopathy also show high levels of within-group heterogeneity. For example, the emotional deficiency that is unique to primary psychopathy may result in a variety of life strategies—some impetuous and criminal, others more controlled and manipulative, and others still, socialized and well-adjusted to society (Gao & Raine, 2010; Lykken, 1995; Yildirim, 2016; Yildirim & Derksen, 2015a, 2015b).

However, while there have been several attempts at explaining the etiology and delineating the within-group heterogeneity in primary psychopathy (e.g., Blair, 2006a, 2006b; Gao & Raine, 2010; Lykken, 1995), there has been an absence of papers aimed at clarifying etiological pathways or sources of within-group heterogeneity associated with secondary psychopathy. Rather than being a singular homogeneous category rooted in a straightforward developmental trajectory, secondary psychopathy is an etiologically complex disorder and may come to expression in different ways. For example, most definitions of secondary psychopathy agree that impulsivity and aggression are central to the personality pattern but diverge regarding their view on the underlying etiological processes and the degree of emotional pathology (compare Blackburn, 1975; Karpman, 1941; Porter, 1996). Intriguingly, just like cluster-analytic studies have identified two broad clusters of primary psychopathic individuals, who diverge regarding self-control capabilities in particular, they have also identified two broad clusters of secondary psychopathic offenders, who mainly diverge regarding measures of neuroticism and harm avoidance; compare the "secondary" and "inhibited" clusters of Blackburn et al. (2008), or the "secondary" and "fearful" groups of Poythress et al. (2010) and Cox et al. (2013).

Therefore, this theoretical paper is a reaction to the caveat in the literature on the etiology and expression of secondary psychopathy in particular. The main goal is to clarify the secondary psychopathic condition, discuss associated etiological processes, and explore the continuum on which these personalities may be set apart. The paper starts in Section 2 with an in-depth discussion of the various conceptualizations of secondary psychopathy that have emerged in the last century. While there has not been a clear differentiation between secondary psychopathic individuals in the empirical literature, there are many different conceptualizations that can inform on the potential variability in this group. Then in Section 3, I will argue that we might learn a great deal on the potential variability in secondary psychopathy by closely examining the differences between the antisocial and borderline personality disorders (ASPD and BPD) as these two disorders may be seated on a continuum of affect stability and only differ from secondary psychopathy in degree, not form. In Section 4, I will discuss and review the etiological variables that secondary psychopathic individuals share in general (i.e., childhood maltreatment, attachment disorders, ventromedial prefrontal cortex dysfunction, and serotonergic deficiency), before going into potential sources of etiological and phenotypical heterogeneity in Section 5 (i.e., type of maltreatment, mesocortical dopamine activity, gonadal hormone levels). I will discuss which processes I believe to be causing this divergence in etiology and focus mainly on temperamental differences in the mesocorticolimbic dopamine system. The paper is concluded with a short synthesis in Section 6 where I will introduce and discuss a new model on the etiology of secondary psychopathy.

The main argument stated in this paper is that secondary psychopathic individuals may be crucially differentiated on the basis of the dimensional endophenotype of attentional sensitivity, also related to external constructs such as affect stability, anxiety, and neuroticism. Secondary psychopathic individuals gravitating towards the attentional hyposensitivity side of the continuum are collectively termed as being "detached" and mainly display externalizing symptomatology but low levels of affect instability or worrying, whereas those who gravitate more towards the attentional hypersensitivity side of the continuum are collectively termed as being "unstable" and display high levels of both externalizing symptomatology in combination with affect instability and high worrying. Keep in mind that while this paper aims to illustrate the differences between the two extremes of secondary psychopathy (detached versus unstable), it is important to note that these psychopathic styles are proposed as prototypical extremes and not as categorical personality types. In real life secondary psychopathic individuals are situated on a continuum of attentional sensitivity with different expressions gradually merging into each other. Most secondary psychopathic individuals will naturally be situated somewhere near the middle of the continuum of attentional sensitivity and evince characteristics of both extremes in more subtler ways, relative to the situation or life-phase they find themselves in. During more quiet and stable times, they might primarily show a detached phenotype whereas during periods of high stress and adversity, they might also show characteristics of the unstable phenotypes. Only those secondary psychopathic individuals situated at the extremes of this continuum will display a more consistently detached or unstable phenotype that is more independent from life events and the environment.

2. Secondary psychopathy: different conceptualizations throughout history

2.1. Narcissistic-antisocial pathology; socio-emotional detachment

The first category of conceptualizations that can be generally delineated from the literature are those that describe the secondary psychopathic individual as someone, who, despite being born with a normally functioning emotional system, displays difficulties in emotional appraisal similar to the primary psychopathic individual, especially regarding attention mediated processes. According to these conceptualizations, secondary psychopathic people are characterized primarily by socio-emotional detachment, reward-seeking, narcissism, aggressive dominance, and sadism. In this category we find the descriptions of Kernberg (1984), Porter (1996), and Lykken (1995).

The Austrian psychoanalyst Otto Kernberg (1984) noticed that some narcissistic individuals are more severely disturbed than others. In addition to a core narcissistic personality, such individuals exhibited antisocial behavior, paranoia, and (sadistic) aggression. He referred to this condition as malignant narcissism—a term that was coined two decades earlier by the German social psychologist Erich Fromm (1964). Kernberg postulated that the malignant narcissistic individual lies on a continuum with both normal narcissism and psychopathy, being intermediate in severity. Thus, Kernberg argued that psychopathy can be seen as "the most severe form of pathological narcissism" (Kernberg, 1992, 1998). Psychopathy, as described by Kernberg, more closely parallels secondary rather than primary psychopathy as described in contemporary literature. For example, Kernberg (1992) proposed that psychopathy mainly develops due to environmental factors that preclude a healthy conscience development rather than due to temperamental or genetic factors. Furthermore, Kernberg argued that such

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