

# The Clinical Profile of Psychopathy

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## Abstract

People with psychopathy are characterized as callous, non-empathic, manipulative, impulsive, and crime prone. The definition of psychopathy is imprecise, and the condition is not recognized as a mental disorder in the Diagnostic and Statistical Manual (DSM-5-TR). This project examines research on the spectrum of traits and behaviors that constitute psychopathy. We compare psychopathy with antisocial personality disorder and other similar clinical profiles in terms of how such anomalies are assessed, managed, and treated in different settings. We posit that the further codification of psychopathy as a diagnosable disorder could help in identifying interventions and treatments for this condition.

## Background

People with psychopathy account for 1% of the general population, and 25% of those incarcerated in prisons and jails. Despite the profound social and economic impact that psychopaths have, there is disagreement among researchers over the precise conceptual framework of the disorder. As a result, definitions of the disorder vary across the existing literature. Difficulties arise when comparing empirical findings from studies utilizing different frameworks of psychopathy. Furthermore, the status of antisocial personality disorder (ASPD) as a separate but related disorder creates controversy with advancements in the assessment and diagnosis of psychopathy.

## Purpose

To investigate how existing conceptual frameworks of psychopathy and ASPD are interrelated and how a unified model of the disorder could be codified.

## Methodology

### Databases:

PSYInfo, ScienceDirect, PubMed, Cambridge University Press

### Keywords:

Psychopath, Model, Antisocial, Etiology, Cleckley

### Number of Articles:

11 articles were reviewed for analysis

### Analysis:

Read abstracts to determine the relevance of articles, then read full texts and compared findings and conceptual models

### Inclusion Criteria

Included conceptual models, reviewed findings of other relevant studies, discussed both Psychopathy and ASPD

### Exclusion Criteria

Non-empirical, outdated etiology of psychopathy, lacked conceptual models or relevance to etiology and treatment

## Findings

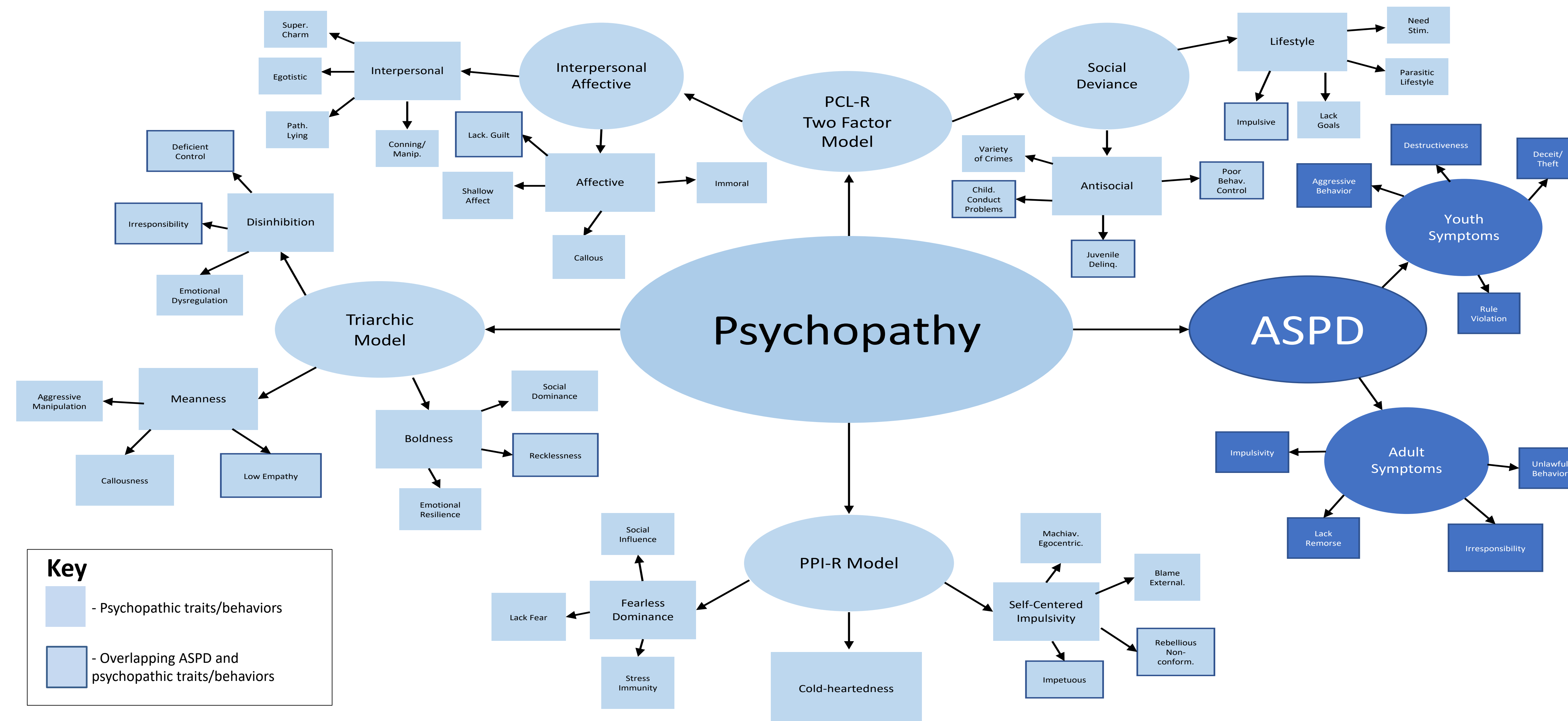


Fig 1. Etiological Models of Psychopathy and ASPD

- Figure 1 demonstrates both the variability and interconnectedness of three prominent frameworks of psychopathy (PCL-R, Triarchic Model, and PPI-R Model).
- The PCL-R (Hare, 1993) theorizes psychopathy as a two-factor model made up of distinct traits and behaviors and is most used in forensic settings.
- The Triarchic model (Patrick et al., 2009) is a three-factor framework that is compatible with broad conceptual definitions of psychopathy, including factor 2 of the PCL-R, the section 3 specifier for psychopathy in the DSM-5, and the self-centered impulsivity trait listed in the PPI-R.
- The PPI-R (Lilienfeld & Andrews, 1996) is a three-factor model comparable to the Triarchic model in its broad conceptual framework and was developed specifically to assess and diagnose non-forensic psychopathic populations.
- Antisocial personality disorder (ASPD) is the most etiologically similar disorder to psychopathy and contains a specifier for psychopathic features within its DSM-5 definition. While persons with psychopathy are highly likely to be comorbid with ASPD, individuals with ASPD only display a small increased likelihood of psychopathy comorbidity.

## Conclusion/Implications

This study examined research on the spectrum of traits and behaviors that constitute psychopathy. The different conceptual frameworks analyzed in this work were revealed to share many common traits and behaviors on a dimensional level. All three are effective measures of psychopathy but provide unique perspectives on the etiology of the disorder. While the PCL-R defines and assesses psychopathy using primarily discrete variables, the Tri-PM and PPI-R cast a broader net by using dimensional constructs to identify psychopathic individuals. These two models effectively account for the variance among psychopaths and their differences from those with ASPD by including the boldness subdimension or equivalent. A dimensional assessment of boldness is not explicitly accounted for in the PCL-R assessment of psychopathy but is vital to the historical definition of the disorder characterized by impulsive behavioral misconduct masked by a charming social image.

There is strong evidence in the existing literature that a unified model of psychopathy including the 2-factor and 3-factor models could be created. A unified model would allow for the codification of psychopathy as a diagnosable disorder and aid in furthering research on treatments of the condition.

## References

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