Emotions in psychopathy and borderline personality disorder



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Citation:

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The extensive commonality between the current range of recognized personality disorders is evident amid the conditions that constitute to form cluster B, a sub group best referred to as the theatrical, emotive, and volatile cluster (Personality Disorders Symptoms, n. d.). Borderline personality disorder (BPD) and psychopathy are believed to be the most infamous and controversial of the bunch, and share a great deal of parallel features. (Comer, 2009).

This particular article aims to build a more concrete barrier between the pair by comparing their respective styles of emotional response. The authors emphasized that though the DSM-IV criteria disregards the expected emotional features of psychopathic patients, the diagnostic measures for psychopathy by Cleckly states that psychopaths usually lack receptiveness to negative stimuli. Experimental studies on psychopathic criminals conducted prior to the article seem to support the claim. However, studies of emotion in BPD offenders were scarce. Accordingly, the authors based their research on the conjecture that patients with psychopathy will demonstrate a significantly weaker reaction to unpleasant and pleasant stimuli compared with BPD patients and control subjects, thus steering the first experiment to touch on the problem of diagnostic specificity.

Hypotheses:

The hypotheses generated by the experimenters comprised of several prongs, including one null hypothesis and two alternative hypotheses.

H $_1$: Psychopaths will display a weaker startle response, weaker facial expressions and lower autonomic responses to emotional stimuli when compared with both BPD criminal offenders and noncriminal control subjects

H $_0$: BPD subjects and controls will demonstrate similar configurations of startle response and facial expressions.

H $_1$: BPD subjects are will show a decreased electrodermal response, thereby illustrating why BPD patients exhibit a penchant for stimulus-seeking and impulsive behavior.

Subjects and Selection Procedure:

50 male inmates convicted of capital crimes from two separate forensic treatment facilities were selected for the initial screening. They were informed that 25 of the criminal offenders were diagnosed with psychopathy, while the latter half was believed to have BPD.

The subjects were further evaluated with the aid of the Psychopathy Checklist: Screening Version (PCL: SV) and the International Personality Disorder Examination (IPDE). The two investigators responsible for the screening process were oblivious to the clinical diagnosis the patients had received at the treatment facilities. Depending on their respective scores, the subjects were then selected for one of the two experimental groups. The article accentuates that both the raters had been in agreement on whom to include in the study. Offenders with mental deficiencies, dementia, schizophrenia, paranoid disorder, or current alcohol or drug abuse were disqualified.

25 male controls with no history of psychiatric illness or criminal violence were recruited via bulletin board announcements. The final count consisted of 18 subjects with BPD, 25 psychopaths and 24 controls.

Methodology and Procedure of Data Collection:

<u>Materials:</u> The investigators opted to use 24 slides from the International Affective Picture System, consisting of 8 pleasant, 8 neutral and 8 unpleasant slides. The slides were selected on its capacity to incite positive and negative feelings from the subjects and were presented in random order for less than six seconds each.

Variables: The article had two dependent variables, the valance and arousal ratings, that hinged on the responses demonstrated by the psychopaths, BPD offenders, and controls towards the slides. Therefore, the subject groups and stimuli are believed to be the independent variables controlled by the experimenters while the BPD patients and psychopaths were the experimental unit. The three different types of slides (pleasant, unpleasant and neutral) pertained to the levels of the responses. Valance and arousal ratings were measured via a self-assessment report and physiological measurements. These variables constituted to form a 3×2 contingency table.

<u>Self-Assessment Report</u>: Subjects were asked to rate the strength of their affective response using the Self-Assessment Manikin. The ratings (0-9) reflected both the arousal and valance of emotion.

Physiological Measurements

- <u>Electrodermal Activity</u>: The changes in the skin's ability to conduct electricity were recorded to demonstrate the arousal dimension of emotion. Electrodes fixed on the non-dominant hands of all subjects measured the magnitude of the skin conductance response every 20 milliseconds.
- 2. <u>Modulation of the Startle Reflex</u>: The defense response to a sudden acoustic probe was used to measure the valance of emotion. Two miniature electrodes placed round the left eye measured the strength of the eye blink, if any.
- 3. <u>Electromyographic response</u>: Muscle activity of the face determined whether the subject frowned or remained constant in response to the stimulus and was recorded with the help of tiny electrodes placed above the right eye.

Data Analysis and Results

Diagnostic group effects were assessed using Kruskal Wallis tests and post hoc Mann-Whitney tests for pairwise comparisons of independent samples. Fluctuations in physiological parameters were analyzed using the Friedman

test for repeated measures while post hoc pairwise comparisons were https://assignbuster.com/emotions-in-psychopathy-and-borderlinepersonality-disorder/ performed on slide valance categories using Wilcoxon signed rank tests for paired samples. The connection between slide valance and psychophysiological measures were tested separately for each diagnostic group.

Post-hoc pairwise comparisons for group effects and slide valance categories paved the way for the Bonferroni-Holm procedure which identified the pair with a substantial effect for that particular variable and conserved a 0. 05 level error rate. P values were ordered from smallest (i= 1) to largest (i= 3) among 3 comparisons. The groups relevant to P i are said to differ at the overall 0. 05 level provided P i \leq 0. 05/ [(M+1)-i].

Post hoc contrasts verified that pleasant slides were rated higher compared to both unpleasant and neutral slides, with unpleasant slides being rated significantly lower than neutral slides in valence. Overall slide valence effect for arousal ratings demonstrated similar results. However, the psychophysiological measurements diverged from the self-assessment results.

Post hoc Wilcoxon signed rank tests exhibited that the skin conductance responses were higher when viewing pleasant (P <0. 001) and unpleasant slides (P <0. 001) compared to rejoinders to neutral slides. Kruskal-Wallis tests and post hoc Mann Whitney tests confirmed that psychopaths had decreased electrodermal responses compared with controls (P= 0. 02) and BPD offenders (P= 0. 04). On the contrary, subjects with BPD and controls displayed resemblance. Furthermore, the Friedman test showed a noticeable change in electromyographic responses with slide valance categories in both BPD subjects (P= 0. 02) and controls (P= 0. 03), as opposed to psychopaths (P= 0. 44). However, Post hoc Wilcoxon signed rank tests directed that controls exhibited a larger EMG response to unpleasant slides likened to pleasant ones (P= 0. 01), unlike BPD subjects who displayed no difference in their response to pleasant and unpleasant slides (P= 0. 46). In fact, BPD subjects revealed a trivial change to pleasant slides (P= 0. 06).

Lastly, psychopaths failed to respond to the startle probes often, regardless of the valance of the slides presented, contrary to both BPD subjects and controls. Nine psychopaths, 1 BPD subject and 2 controls were completely unresponsive.

Dear Sir,

This article has certainly opened my eyes to a few things, including the fact that reasons for the stigma associated with "psychopaths" need rebuttal and amendment. One must realize that all people are unique and comprised of distinctive predispositions. The article proved the hypotheses that psychopaths, indeed, displayed hypo-emotionality compared to both BPD subjects and controls, clearly illustrating why tend to act out in their need for stimulation.

While I found the article quite interesting and cohesive, it cannot be denied that the experimental design had certain limitations in itself. For starters, the test groups were relatively small and of varying sizes. However, the article

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stresses that great care was taken to recruit distinctive diagnostic groups with vastly different PCL: SV scores.

Secondly, experimental subjects were recruited from psychiatric treatment facilities, all believed to have a criminal record. This can possibly modify the outcomes, since it can be difficult to say if their responses were solely due to the psychiatric illness. Consequently, it can be argued that the differences in responses of control subjects are due to their non-criminal background, rather than the absence of a personality disorder per se.

Of course, there is no denying that future research in this matter is essential to grasp a deeper understanding of why violent behavior is prevalent in personality disorders. Perhaps, further studies can use psychopathic and BPD subjects who need not necessarily come from a criminal background. Moreover, I feel that women should also be included in the sample, in order to form a diagnostic sample that can denote the entire population. Overall, I found the article to be an interesting and informative read. They had showcased the evidences for their hypotheses brilliantly well and I found myself completely engrossed in the study.

REFERENCES

Comer, R. J. (2009). *Abnormal Psychology.* New York: Worth Publishers.

Herpertz, S. C., Werth, U., Lukas, G., Qunaibi, M., Schuerkens, A., Kunert, H. J., ... & Sass, H. (2001). *Emotion in criminal offenders with psychopathy and borderline personality disorder.* Archives of General Psychiatry, 58(8), 737-745. *Personality Disorders Symptoms* . (n. d.). Retrieved November 9, 2014, from Mayo Clinic: http://www. mayoclinic. org/diseases-conditions/personalitydisorders/basics/symptoms/con-20030111