ALMOST A PSYCHOPATH

Do I (or Does Someone I Know) Have a Problem with Manipulation and Lack of Empathy?

RONALD SCHOUTEN, MD, JD, HARVARD MEDICAL SCHOOL
and JAMES SILVER, JD
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Ronald Schouten, MD, JD, Harvard Medical School
James Silver, JD
The Almost Effect™ series presents books written by Harvard Medical School faculty and other experts who offer guidance on common behavioral and physical problems falling in the spectrum between normal health and a full-blown medical condition. These are the first publications to help general readers recognize and address these problems.
To my mother and my late father
R.S.

To my mother and the loving memory of my father
J.S.
Series Foreword: The Almost Effect
Acknowledgments

Part 1: Minor Problems to Major Predators
Chapter 1: Setting the Stage
Chapter 2: What Is a Psychopath?
Chapter 3: The Almost Psychopath
Chapter 4: Could It Be Something Else?

Part 2: Dealing with Almost Psychopaths in Our Lives
Chapter 5: Living with an Almost Psychopath
Chapter 6: Recognizing Almost Psychopathic Traits in Children
Chapter 7: Working with an Almost Psychopath
Chapter 8: Confronting Child Abuse by Almost Psychopaths
Chapter 9: Adults as Victims: Confronting Almost Psychopaths in the Helping Professions
Chapter 10: Sick or Slick? Malingering and Manipulation of Illness
Chapter 11: What to Do When You Find Yourself in Almost Psychopath Territory

Appendix A: Diagnostic Criteria for Antisocial Personality Disorder
Appendix B: Defining a Mental Disorder Using the Axes of the Diagnostic and Statistical Manual of Mental Disorders (DMS–IV–TR)

Notes
About the Authors
The Almost Effect

I once overheard a mother counseling her grown daughter to avoid dating a man she thought had a drinking problem. The daughter said, “Mom, he’s not an alcoholic!” The mother quickly responded, “Well, maybe not, but he almost is.”

Perhaps you’ve heard someone, referring to a boss or public figure, say, “I don’t like that guy. He’s almost a psychopath!”

Over the years, I’ve heard many variations on this theme. The medical literature currently recognizes many problems or syndromes that don’t quite meet the standard definition of a medical condition. Although the medical literature has many examples of these syndromes, they are often not well known (except by doctors specializing in that particular area of medicine) or well described (except in highly technical medical research articles). They are what medical professionals often refer to as subclinical and, using the common parlance from the examples above, what we’re calling the almost effect.

For example:

- Glucose intolerance may or may not always lead to the medical condition of diabetes, but it nonetheless increases your risk of getting diabetes—which then increases your risk of heart attacks, strokes, and many other illnesses.
- Sunburns, especially severe ones, may not always lead to skin cancer, but they always increase your risk of skin cancer, cause immediate pain, and may cause permanent cosmetic issues.
- Pre-hypertension may not always lead to hypertension (high blood pressure), but it increases your risk of getting hypertension, which then increases your risk of heart attacks, strokes, and other illnesses.
- Osteopenia signifies a minor loss of bone that may not always lead to the more significant bone loss called osteoporosis, but it still increases your risk of getting osteoporosis, which then increases your risk of having a pathologic fracture.

Diseases can develop slowly, producing milder symptoms for years before they become full-blown. If you recognize them early, before they become fully developed, and take relatively simple actions, you have a good chance of preventing them from turning into the full-blown disorder. In many instances there are steps you can try at home on your own; this is especially true with the mental and behavioral health disorders.

So, what exactly is the almost effect and why this book? Almost a Psychopath is one
of a series of books by faculty members from Harvard Medical School and other experts. These books are the first to describe in everyday language how to recognize and what to do about some of the most common behavioral and emotional problems that fall within the continuum between normal and full-blown pathology. Since this concept is new and still evolving, we’re proposing a new term, the almost effect, to describe problems characterized by the following criteria.

The problem

1. falls outside of normal behavior but falls short of meeting the criteria for a particular diagnosis (such as alcoholism, major depression, psychopathy, or substance dependence);
2. is currently causing identifiable issues for individuals and/or others in their lives;
3. may progress to the full-blown condition, meeting accepted diagnostic criteria, but even if it doesn’t, still can cause significant suffering;
4. should respond to appropriate interventions when accurately identified.

The Almost Effect

All of the books in The Almost Effect™ series make a simple point: Each of these conditions occurs along a spectrum, with normal health and behavior at one end and the full-blown disorder at the other. Between these two extremes is where the almost effect lies. It is the point at which a person is experiencing real pain and suffering from a condition for which there are solutions—if the problem is recognized.

Recognizing the almost effect not only helps a person address real issues now, it also opens the door for change well in advance of the point at which the problem becomes severe. In short, recognizing the almost effect has two primary goals: (1) to alleviate pain and suffering now and (2) to prevent more serious problems later.

I am convinced these problems are causing tremendous suffering, and it is my hope that the science-based information in these books can help alleviate this suffering. Readers can find help in the practical self-assessments and advice offered here, and the current research and clinical expertise presented in the series can open opportunities for health care professionals to intervene more effectively.

I hope you find this book helpful. For information about other books in this series, visit www.TheAlmostEffect.com.

Julie Silver, MD
Assistant Professor, Harvard Medical School
Chief Editor of Books, Harvard Health Publications
This book would not exist without the vision, creativity, and enthusiasm of Julie Silver, MD, chief editor of books at Harvard Health Publications, the editorial skills of Sid Farrar and the staff at the Hazelden Foundation, the hard work and timely advice of our literary agent Linda Konner, and the assistance and consistent good nature of Natalie Ramm at Harvard Health Publications. We offer our appreciation to Harvard University for its wonderful library resources, which allowed us to access the exciting work being done by the scientific community.

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Part 1

Minor Problems to Major Predators
Setting the Stage

One of our colleagues regularly opens his talks on malingering and deception by asking how many people in the audience have ever told a lie, even the smallest fabrication. Nearly every hand goes up. Then he asks how many have ever taken something that does not belong to them, no matter how insignificant, perhaps a paper clip or pen from work. Again, nearly every hand goes up. He then says, “It’s nice to know that I’m speaking to an audience of liars and thieves.” The audience laughs, because they recognize the truth of what he’s saying: regardless of education, social status, or income, from time to time, our behavior is not always strictly moral or honest.

For most of us, though, anything more than telling a white lie or committing some other minimal misdeed makes us uneasy. We realize that there is something wrong with what we have done, are doing, or are contemplating. Whether it is blaming our own mistake on a co-worker, not telling the clerk when we are given too much change, or retaliating in-kind to that other driver who just cut us off, we know it isn’t the right thing to do. If we do it anyway, because of a lack of impulse control at the moment or because we can somehow justify it, more often than not our conscience kicks in and we get that uncomfortable feeling that we know as guilt or shame.

Research has shown that we all rationalize both “good” and “bad” behavior. Social conventions that we learn from our parents and others, religious principles, and the potential psychological turmoil of a distressed conscience combine to deter most of us from routinely engaging in even relatively small transgressions that fall outside of communal norms, let alone more elaborate and harmful acts of deceit and aggression. Yet with all those factors helping us to behave as we should, it is still the case that everyone can have improper, even downright evil, thoughts and fantasies that they never act upon. And when it comes to cheating, taking advantage of others, infidelity, and the like, we have no shortage of examples of “good” people who stray from the straight and narrow.

The hazy and at times fluid boundary between “good” people and “bad” has been the subject of much study and discussion. Forensic psychiatrist Robert Simon captures the essence of this idea in the title of his 1996 book Bad Men Do What Good Men Dream. The famed Swiss psychiatrist Carl Jung theorized that everyone has a “Shadow” as part of the unconscious and that it contains repressed desires, weaknesses, and primitive animal instincts. Jung pointed out that the less the Shadow is acknowledged and “the less it is embodied in the individual’s conscious life, the blacker and denser it is.” In other words, denying that we have such dark thoughts puts us at risk of being controlled by them. Others who study personality and its disorders (including psychopathy) have attributed these gaps in moral reasoning to superego lacunae—tiny
holes in the superego, the part of us that tells us what is right and wrong.²

Research psychologists David DeSteno and Piercarlo Valdesolo, in their book Out of Character, explore the origins and consequences of our rigid notions of character, as well as the potential we all have for acting “out of character.”³ Through discussion of multiple experimental studies and examples drawn from recent headlines, they show that character is not as fixed as many of us might believe, and even those who profess the highest moral principles are not immune from often spectacular departures from the standards they expect others to follow, including former New York Governor Eliot Spitzer [End of Sample]