

Original Communication

# Are there age-related effects in antisocial personality disorders and psychopathy?

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## Abstract

We investigated possible age differences in the frequency of antisocial personality disorder (ASPD), and of psychopathy according to Hare's criteria and its constituent features: In a cross-sectional study 226 male violent offenders, detained in adult or youth custody, were investigated using the Psychopathy Checklist Screening Version (PCL:SV) and the SCID II Interview. Their ages ranged from 18 to 59 years. Total PCL:SV score was negatively correlated with age. ANOVA showed that total PCL scores for three age groups differed significantly. Both effects were due entirely to Factor 2 of the PCL. Factor 1 was not related to age. The frequency of ASPD was also lower among older prisoners. The relationship with age was similar to that of PCL:SV Factor 2.

These results point to age-related effects in psychopathy and suggest that different aspects of psychopathy follow different developmental courses. The results of our group comparison suggest that the different subfacets of psychopathy are not stable over time to the same extent. In order to make statements about the course of intraindividual development, however, longitudinal studies would be required. © 2007 Elsevier Ltd and FFLM. All rights reserved.

**Keywords:** Psychopathy; Age-related differences; Violent offenders

## 1. Introduction

We recently carried out a study comparing the course of prison sentences among adult violent offenders with and without psychopathy according to Hare's criteria.<sup>1</sup> An interesting secondary finding of this study was that those with psychopathy – the so-called “high scorers” on the

PCL – were significantly younger than the non-psychopathic group – the “low scorers”. As a result we considered the possibility that the psychopathy construct may vary with age. This would mean that the features of psychopathy are not static but dynamically variable and could, for example, be dependent on age.

The initial empirical findings on the long-term development of disorders in the antisocial spectrum are not entirely consistent. Robins et al.<sup>2</sup> reported an “antisocial burnout” effect as was found in another longitudinal study.<sup>3</sup> Both studies found that, above 40 years of age, only about one

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third of those originally diagnosed as having antisocial personality disorder (ASPD) achieved the number of criteria required for this diagnosis. Another longitudinal study was unable to replicate these findings although observations were made over a period of up to 45 years.<sup>4,5</sup> The contradiction may be explained by the fact that these studies did not differentiate between ASPD and Hare's psychopathy construct. For Hare psychopathy it was later shown that criminal activities persist beyond the 50th year of life.<sup>6</sup> The conclusion initially drawn was therefore that psychopathy is not subject to age-related changes (review in 7).

If a more differentiated view is taken of psychopathy there are indications that antisocial activities do indeed decrease with increasing age while the superficial-grandiose attitudes and lack of empathy are reported to be stable over time and are also present, unchanged, at more advanced ages.<sup>8</sup> In relation to PCL-based Hare psychopathy this means that potential changes in PCL score with increasing age may be due more to a decrease in dissocial "acting out", as reflected in Factor 2, than to alterations in the affective and interpersonal personality features making up Factor 1.<sup>9</sup>

Various theories can be put forward to explain changes in observable antisocial behaviour associated with increasing age. Psychosocial learning and adaptation processes constitute one area for consideration, especially where the affected individual is integrated into a resocialization programme. Although it is often claimed that individuals with psychopathy are inaccessible to therapy the empirical evidence supporting these claims is very limited.<sup>10</sup> Alternatively, biological factors could be responsible: it has long been known that an age-related decrease occurs in the monoamines and gonadotrophins,<sup>11,12</sup> which are considered to be linked with aggressive behaviour. This change could lead to a modification of antisocial behaviour. Findings on personality development in the general population may also be relevant for an explanation of the age effect.<sup>13</sup>

Definite statements on long-term changes in antisocial personality disorders would require more methodologically demanding longitudinal studies. However, cross-sectional comparisons can nevertheless act as a first step in showing up age-related differences. In this process antisocial personality disorder can be taken as the basic entity and psychopathy as a particular subgroup.<sup>14</sup> Studies to generate hypotheses currently seem even more relevant for the psychopathy construct in the light of the 3- and 4-factor models now available.<sup>15</sup> These models should yield differentiated statements on exactly which features are subject to possible age-related changes.

With this background the present study set out to investigate potentially age-related differences in psychopathy according to Hare among prisoners in two samples from different age classes within the German penal system. The results were intended to generate hypotheses for investigation in subsequent long-term studies. In particular the study aimed to test the following assumptions:

1. Like the feature "psychopathy", antisocial personality elements as defined by DSM are more strongly expressed in younger than in older age groups.
2. In the 2-factor model Factor 1 scores are independent of the prisoner's age.
3. In the 2-factor model Factor 2 scores are lower in older age groups.

## 2. Subjects and methods

### 2.1. Samples

In the present study we analysed data from two different samples of male violent offenders (total  $n = 226$ ) detained in adult and youth custody, respectively. In Germany offenders over 18 years of age who are sentenced to imprisonment are normally sent to adult prisons. Offenders aged between 14 and 18 years are subject to the youth court law (*Jugendgerichtsgesetz*, JGG) and are sent to youth custody establishments. If youths aged from 18 to 21 are found to have deficits in maturity the JGG may also be applied to them so that a juvenile sentence extending up to the age of 25 years can be spent in a youth custody establishment. This explains the degree of overlap in age seen between the two samples:

- Sample 1 (115 participants, mean age 29.04 years, range 20–59) came from an adult prison. The participants were investigated between 2000 and 2004 as part of a project on psychotherapy,<sup>16</sup> before inclusion in the therapy programme itself. All individuals in this sample were classed as mentally healthy and fully responsible for their actions according to German law. All had committed a violent offence (bodily harm: 63%; burglary: 53%; arson: 11%; homicide: 6%; sexual offence: 3% – multiple offences were possible). Psychopathy rating was carried out before the start of psychotherapy. It was therefore not possible that therapy influenced the expression of the features.
- Sample 2 (111 participants, mean age: 19.99 years, range 18–25) came from a youth custody establishment. Between 2001 and 2003 these individuals took part in a study on the occurrence of mental disturbances among juvenile and young adult violent offenders (Köhler et al., in preparation). Nearly all had committed a violent offence (bodily harm: 42%; burglary: 32%; arson: 3%; homicide: 6%; sexual offence: 3%, others: 11%). As a result of the caveats attached to the instruments used only prisoners over 18 years of age were included.

The design of both studies was organised in such a way that the results of the procedures which are further analysed here had no influence on the conditions of the prison sentence with regard to partial or early release. To justify the use of the PCL:SV and the SCID II with all participants, criteria for inclusion were knowledge of the German language, absence of psychosis and a minimum age of 18 years. All participants in the various studies had agreed

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