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EV0938

Personality dark triad: Portuguese validation of the dirty dozen

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Introduction The Dark Triad is a term used to describe a constellation of three socially undesirable personality traits: narcissism, psychopathy, and Machiavellianism. Contrary to Altruism (the desire to help others with no personal reward or gain), these traits are harmful to others. Given the increased scientific interest on the dark triad, Jonason and Webster developed a shorter questionnaire to evaluate these three independent-yet-related constructs with only 12 items – Dirty Dozen (D12).

Objective To investigate the psychometric properties of the Portuguese version of the Dirty Dozen.

Methods A community sample composed of 286 university students (69.2% females; mean age = 21.09 ± 2.133; range: 17–33) answered the Portuguese preliminary versions of the Dirty Dozen and of the Altruism dimension from HEXACO-100. To study the temporal stability, 30 participants (66.7% females) answered the D12 again after six weeks.

Results The EA Cronbach alpha was “very good” ($\alpha = 0.72$). Following Kaiser and Cattell Scree Plot criteria, three meaningful factors were extracted which explained variance (EV) was of 54.64%: F1 Machiavellianism (EV 32.07%; $\alpha = 0.73$), F2 Narcissism (13.665%; $\alpha = 0.74$), F3 Psychopathy (8.90%; $\alpha = 0.64$). The test-retest correlation coefficients were high, positive and significant for the total D12 and its dimensions ($r > 0.70$; $P < 0.001$). Pearson correlations of D12 total and dimensional scores and Altruism were negative, moderate and significant ($r @ - 0.30$).

Conclusions The Portuguese version of Dirty Dozen has good reliability and validity. It could be very useful both in clinical and research contexts, namely in an ongoing project on the relationship between dark triad and perfectionism traits.

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Suffering of the spouses of narcissistic perverts: About two cases

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Introduction The narcissistic perversion is a psychoanalytical term resulting from the association of 2 Freudian notions: perversion and narcissism. The concept of narcissistic pervert has no clinical validity. The companions of the narcissistic perverts undergo moral suffering, often unknown by their entourage.

Objectives We suggest studying the trajectory of life of two wives of narcissistic perverts.

Aims Emphasize the peculiarities of the narcissistic perverse personality.

Methods We are going to postpone 2 clinical cases of spouses of narcissistic perverts.

Results Case 1: Mrs. A., 60-year-old, divorced once. Mother of a girl. She met her current husband during the marriage of her daughter. At the beginning of their common life, Mr. M. was loving and in the small care with his wife. After three months of the marriage, Mrs. A. reported the change of character of her husband who became aggressive, decreasing her and taking her away from her family. He seized all her goods. She is actually getting a divorce.

Case 2: Mrs. R., 27-year-old, married Mr. C. after 9 months of knowledge. At the beginning of their marriage, they had a good agreement. Forced to stay at home to take care only of domestic spots, she reported a real-life experience of neglect and emotional carelessness, she felt belittled and isolated. At present engaged in a divorce procedure after been physically assaulted threatened with death.

Both women consulted for depression.

Conclusion The narcissistic perversion is a personality problem which affects as well the person involved but especially his entourage. When you are in connection with a narcissistic pervert, even after leaving him, you never recover from it.

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Low compliance to pharmacological treatment of severe chronic illness: Passive suicide ideation in borderline personality disorder?

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Introduction The core features of Borderline Personality Disorder (BPD), such as deliberate self-harm, suicide attempts and demandingness in interpersonal relationships persist with age, even though impulsivity decreases. Impairing progressive disease combined with affective instability and chronic feelings of emptiness can lead to a desire for death.

Objectives To present a case of BPD with severe chronic endocrine pathology and liver cirrhosis who refused to take his treatment as prescribed.

Methods A case report is presented and discussed.

Results We report the case of a 61-year-old man with BPD and liver cirrhosis, complex endocrine pathology (pituitary adenoma, diabetes insipidus and primary hypothyroidism), type 2 diabetes mellitus with insulin therapy, essential hypertension and alcohol use disorder. He had a history of 5 suicide attempts caused by marked feelings of rejection and emptiness and a pattern of unstable relationships and lack of commitment, thus his marriage lasted only 2 years. He idealized and was extremely familiar with his clinician and displayed marked affective instability (dysphoria, periods of anger and despair, affective ambivalence towards his parents and recurrent depressive symptoms). Because of his liver disease, the psychotropic medication was ceased by his physician. The patient refused to follow the rest of his treatment plan and diet as prescribed, resulting in the deterioration of his somatic status. The patient denied an active suicidal ideation, but did not explain his non-compliance.

Conclusion The impairment from BPD and the risk of suicide persist even in older age affecting the outcome of co-morbid somatic conditions.

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