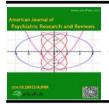
Review Article AJPRR (2019) 2:7



American Journal of Psychiatric Research and Reviews (ISSN:2637-479X)



Sadipathy - Conceptualization and Elucidation

Raqota Berger

Center for Criminal and Psychological Studies, Los Angeles, California

ABSTRACT

Sadipathy is a unique and relevant construct that merits full *Correspondence to Author: scholarly consideration and scientific investigation. Sadipathy has herein been conceptualized as a psychological and behavioral pathology directly cognate with extremely violent and sadistic actions. The sadipath is an individual that takes pleasure in victimizing others, inflicting serious pain and injury on others, and often even committing murder. Sadipathic individuals derive How to cite this article: emotional, psychological, and/or sexual delectation in repeatedly inflicting suffering on others. Sadipathy is particularly associated with certain types of the most extreme offenders, such as serial killers and violent sexual offenders. Sadipathy is an apropos phenomenon to various academic and applied fields, such as psychology, psychiatry, criminology, sociology, criminal justice, law, and corrections. In the field of psychology, sadipathy would be particularly germane to the concentrations of criminal psychology, clinical psychology, and forensic psychology.

Keywords: sadipathy, sadipathic serial killer, serial murder, sadism, criminal psychology, criminology, forensic psychology.

Ragota Berger

Center for Criminal and Psychological Studies, Los Angeles, California

Raqota Berger. Sadipathy - Conceptualization and Elucidation. American Journal of Psychiatric Research and Reviews, 2019, 2:7



Website: https://escipub.com/

Introduction to the Topic

What is it that would cause someone to want to seriously harm another person? What does someone gain from inflicting pain and injury on other people? Why would someone take pleasure in slashing, raping, strangling, or viciously murdering another person? What is the psychology behind these types of violent behaviors? This theoretical work will set out to elucidate on and examine the psychology and behavioral aspects of sadipathy. The standing literature is replete with conceptual and empirical studies that have looked at some of the most aggressive, violent, and vile human behaviors (e.g., Fox & DeLisi, 2019; Hickey, 2015; Langevin & Curnoe, 2014; Quinsey, 2010; Spehr, Hill, Habermann, Briken, & Berner, 2010). Buckels, Jones, & Paulhus (2013) studied the appetite for cruelty and found that there are certain personality types that enjoy harming others. At the extreme, some of these cruel personality types even appear enjoy raping and/or killing other human beings (Anderson & Marcus, 2019; Baumeister & Lobbestael, 2011; Buckels et al., 2013).

There are many different explanations and theories as to why a person would develop in this manner and deliberately seek out innocent people to severely victimize. Some involved researchers have looked to environmental factors that would contribute to this (e.g., social learning, early abuse, rejection), while others look more toward biological factors that may help to explain these extreme ways of behaving (Anderson & Kiehl, 2011; Castle & Hensley, 2002; Decety, Skelly, & Kiehl, 2013; Franzoi, 2016). The research in this area is still ongoing. It is not entirely clear what the exact causal matrices are, but there is solid evidence at this point in time that early learning, experiences and early conditioning, as well as an array of neurochemicals, brain structure, and brain functioning, are all at play to one extent or another (Castle & Hensley, 2002; Gowin et al, 2013; Gullhaugen & Nottestad, 2011; Langevin & Curnoe, 2014; St. Clair, 2004). Whatever the

exact reasons and causal matrices are that would cause someone to act in an extremely violent and malicious manner toward another person, these acts do happen and it is critical to better understand why they happen and how they may be prevented. The work being presented here should be of interest to any academic, clinician, mental health provider, correctional officer, law enforcement officer, or profiler that is interested in learning more about the psychology of society's most extreme type of offenders.

Background and Connection to Research

Many scholars and practitioners have spent years trying to understand why some people can behave so savagely toward others. Hickey (2015), proposed that to be able to best understand what could lead one to kill it is important to pay attention to biological. psychological, and sociological factors that can all combine together to propel one down a path of violent criminal behavior. Hickey noted that there are certain predispositional factors and traumatizing events that influence subsequent thinking and behaviors that can lead one down the dark path of violent offending (e.g., early rejection, childhood abuse, sexual abuse, death of parents, etc.). He explained that early and severe trauma may act as a triggering mechanism that has the effect of causing the individual to be unable to deal with stress, rejection, frustration, anger, etc. (Hickey, 2015). Other scholars have also found early relations and experiences to play a major role in violent adolescent and adult offending (DeLisi et al., 2018; Gullhaugen & Nottestad, 2011; Lyons & Martin, 2019; Ray, 2018). Although early childhood trauma and abuse is a significantly correlated factor in subsequent violent offending it is not sufficient and is not the only factor that explains why someone would go on to become a cruel and violent repeat offender (DeLisi et al., 2018; Gowin et al., 2013; Hickey, 2015).

There are a number of traits and emotional responses that appear to be highly correlated to the extremely violent and cruel offender. A

common personality style and response often involves a level of narcissism, a sense of superiority over the victim, denigration, moral disengagement, and little to no distress over what they have done (Buckels et al., 2013; March, 2019; Moshagen et al., 2018). In her research looking at trait sadism, March (2019) found that those that tend to scale high in sadistic tendencies often experience no remorse for their behaviors and are typically quite callous and manipulative toward their victims. Callousness is a central feature of the sadistic personality. Anderson & Marcus (2019) found in their research on meanness and callousness in the sadistic individual that these offenders typically disaffiliate from their victims, which allows them to psychologically disconnect and to lack any compassion for those that they are causing to suffer. As a core concept, callousness has been shown to be at the center of the sadistic personality (Mededovic, 2017; Reidy et al., 2011).

Emotional detachment, lack of remorse, and moral disengagement all appear to be at the this personality of type Osterheider, Hucker, & Nitschke, 2011; Reidy et al., 2011). Some trait theorists have found that malevolent and dangerous personality types often display the traits of extraversion, neuroticism, and narcissism (Garcia & Moraga, 2017; Moshagen et al., 2018), while others have found they tend to be low in extraversion and low in conscientiousness (Hagger-Johnson & Egan, 2010). Blunted emotional affect and global affective deficits have also been shown to be common among this particular constellation of offenders (Gowin et al., 2013; Mokros et al., 2011). A complete lack of guilt, demonstrating no remorse for what they have done, is also a cornerstone trait of the malevolent offender (Anderson & Marcus, 2019; Reidy et al., 2011). In fact, it has been demonstrated that these particular types of offenders can actually experience pleasant affect to the pain and suffering of others (Mededovic, 2017; Mokros et al., 2011). This inability to emotionally connect with, and feel sorry for, those that are being victimized appears to be a foundational element in the psychological functioning of these offenders.

Fox and DeLisi (2019) noted that there are different reasons that people commit violent acts. They identified one type of violence as being instrumental in nature. Instrumental aggression may involve violent behavior as a means to achieve some goal, such as acquiring money. Hostile aggression may involve violent behavior that is the result of feeling angry (Feist & Rosenberg, 2019; Myers, 2015). Impulsive aggression is in response to a threat, whereas predatory aggression is when a person premeditatively attacks another (Garrett & Hough, 2018). Some researchers have argued that repeat violent offenders act impulsively and/or emotionally (Durand & Barlow, 2016; Fox & DeLisi, 2019; Gowin et al., 2013), whereas other researchers have taken the position that many repeat malevolent offenders are often cold and detached, and/or are more deliberate in their offending behaviors (Hagger-Johnson & Egan, 2010; Mokros et al., 2011; Reidy et al., 2011). Garrett and Hough (2018) described predatory aggression as cold and emotionless, whereas affective aggression is embedded more in emotional arousal and impulsiveness. No one type of aggression explains all malevolent acts of violence, but there does appear to be a pattern among many repeat offenders that engage in cruel and evil acts of violence (Langevin & Curnoe, 2014; Moshagen et al., 2018; Spehr et al., 2010).

One of the most pronounced characteristics that appears to run across almost all savage offenders is the clear absence of empathy for those that they harm. In her study looking at trait sadism, March (2019) found that those engaged in both direct and vicarious forms of sadism showed a dearth of empathy for those that they targeted. In attempting to make sense of how the sadist can behave in such a manner, Anderson and Marcus (2019) found that one core reason particular individuals can show such

disregard toward others and be so mean to them is because they lack any discernible amount of empathy for them or for what they are going through. Other researchers have found similar results in their studies and they also position a lack of remorse and empathy for victims at the heart of what enables one to act so cruelly toward others (DeLisi et al., 2018; Mededovic, 2017; Moshagen et al., 2018). Lack of empathy, remorse, and guilt, will be central to the conceptualization of the central construct being presented in this work.

Sadism, Offenders, & Serial Killers

Sadism is widely understood to mean taking pleasure in inflicting physical and emotional pain and injury on others (Hickey, 2015; Porter & Woodsworth, 2006). Sadistic offenders exhibit high levels of violence that is often intended to cause suffering on the victim. According to Buckels et al. (2013), sadistic individuals are especially cruel in their acts and work hard to harm others. In their research the team employed the Sadistic Impulse Scale and found that individuals that scored high on this assessment took pleasure in causing physical harm. The researchers also noted that those that scaled high in sadistic dispositions seemed to not be bothered by the suffering of others (Buckels et al., 2013). In his research looking at the emotional functioning in sadists, Mededovic (2017) found that in trait sadism positive emotional response were enhanced by violence. The study's findings suggest that in subclinical sadism a lack of emotional resonance with others typifies the sadist. That is, there is a clear level of emotional detachment and callousness toward those that are experiencing pain and that are suffering (Mededovic, 2017; Moshagen et al., 2018).

Sexual sadists can be particularly cruel and violent. Hickey (2015) pointed out that the sadistic rapist revels in mixing violence and pain during their attacks. He also noted that in order to experience the ultimate sexual and emotional gratification the sadistic rapist may murder his victim. This is in line with what Mokros et al.

(2011) put forth in their work on sexual sadists whereby they explained how this type of offender is actually able to cognitively comprehend the suffering of the victim, but they simply do not care - that is, they are entirely remorseless and callous about their pain and suffering. disregard for others may be what leads to the satisfaction and pleasure that sadists experience as they are harming others (March, 2019; Mokros et al., 2011). Fox and DeLisi (2019) also explored the violent nature of sexual homicides. They determined that sexual sadists achieve an aroused physical and emotional state through the control, denigration and suffering of their victims. This pattern has also been seen in other studies looking at the nature of the sexual sadist (e.g., DeLisi, 2015; Knight & Guay, 2006; Meloy, 2001). The sexual sadist appears to be one of the most cruel and callous offenders (Malamuth, 2003; Kirsch & Becker, 2007) and these offenders may seek the ultimate dehumanization of their victims by murdering them (Hickey, 2015; Holy, Meloy, & Strack, 1999; Meloy, 2000).

According to what the Federal Bureau of Investigation (2008) has conceptualized, serial murder is the killing of two or more people separated by a marked period of time. This is a different understanding than what is put forth by Title 18, United States Code, chapter 51, Section 1111 that states that serial murder consists of a series of three or more murders (at least one must have occurred in the United States) where the crimes were committed by the same actor or actors (Legal Information Institute, 2019). Serial murderers are believed to be responsible for approximately .80% of the homicides each year in the United States. This number amounts to around 1 out of every 130 murders across the nation. The chances of being murdered in the United States is around 1 in 24,000, and the chances of being killed by a serial murderer is around 1 in 3 million (Farrell, Keppel, & Bureau Titterington, 2011; Federal of Investigation, 2010). By far, most serial murderers are male and there are different typologies that seem to characterize these serial offenders: mission-oriented, visionary, hedonistic. and power-control (Holmes & DeBurger, 1988). For the purposes of the present conceptualization. the hedonistic subtype (lust murderers, mutilation) and the power-control subtype (slaughtering victims, humiliation, taking pleasure in act) are of the most relevance.

Although most serial killers are males, there are instances of female serial murder. Males are more likely to kill for sadistic and sexual reasons (Mededovic, 2017; Spehr et al., 2010), while females are more likely to kill in a less violent manner. According to Mallicoat and Ireland (2014), the chances of being killed by a female serial killer is likely to be less than 1 in 90 million. As opposed to being directly vicious in their killings, female serial killers are more likely to kill more indirect styles (e.g., healthcare professionals overdosing their patients). course, this more nonviolent nature does not hold true for all female serial killers (e.g., Aileen Wuornos). Hickey (2015) examined the various motivations for serial killers, such as psychosis, ideology, criminal enterprise, and so forth. The motivation he covered that best fit with the violent serial murderer would be associated with sexual motivations and those associated with the thrill of power. He explained that some serial killers commit these heinous acts simply for excitement and empowerment. Others do it for sexual gratification and to fulfill sexual fantasies (Hickey, 2015).

Sadipathy and the Sadipathic Individual

Sadipathy is a grave pathological condition that involves extreme acts of violence that are distinctly characterized by cold indifference, lack of remorse, heartlessness, and savage brutality. This psychiatric condition involves profound dysfunction across psychological, cognitive, and behavioral domains. Sadipathy is at the far end of the pathological spectrum that involves extreme and cruel acts of violence. Sadipathy involves experiencing a warped pleasure in brutally harming and killing other human beings.

Sexual homicide is a common form of this type of savage act, but sadipathy does not necessarily have to involve sexual assault or rape. Other traits and reactive dispositions that typify the sadipath include callousness toward the victims and their suffering, being void of bona fide guilt, and experiencing no genuine distress or regret after their brutal actions. The sadipath is abnormally self-centered and has no regard for the feelings or lives of others. This extreme callous egocentrism is, in part, what enables the sadipath to harm, maim, and murder others without experiencing the guilt and shame that a normal person would experience. The sadipath appears to be void of the internal controls that would otherwise prevent one from acting out on these types of vicious urges.

At the heart of sadipathy is a clear lack of empathy for the victim(s). Martin (2011) described empathy as a true connection with another person's experiences and emotions. It is sensing, feeling, and resonating with the internal experiences of another. Empathy is the ability to share in the experience of another as if their experiences are our own (Casement, 1991). The inability of the sadipath to empathize with the plight and suffering of others is what also enables them to act in such fierce ways toward others. This is also in line with what Mokros et al. (2011) found in their research on sexual sadists and how they are unable emotionally experience the distress and suffering of others.

The sadipathic individual can be cold and calculated, but they can also be impulsive. The most notorious serial killers often plotted their attacks and were quite deliberate in their behaviors. Reckless and sloppy victimizations would likely end the sadipath's reign of terror fairly quickly. This is not to imply that sadipaths are highly intelligent individuals, in fact research has shown that highly sadistic individuals tend to not rank very high on intelligence measures (Langevin & Curnoe, 2014). There is no single type of personality profile that absolutely and definitively typifies the sadipath. Prior research

on sadistic offenders has produced conflicting results across certain measures in regard to personality styles and distinctive natures. Research has shown that different sadistic individuals can be either high or low in extraversion, neuroticism, agreeableness, and impulsiveness (Buckels et al., 2013; Garcia & Moraga, 2017; Hagger-Johnson & Egan, 2010; Hickey, 2015). There is no single profile that perfectly characterizes all sadipaths. Research has demonstrated some very common traits and behaviors across violently sadistic individuals (e.g., callousness, lack of empathy, cruelty, moral disengagement, etc.) but sadipaths will vary to some extent across certain dimensions (e.g., intelligence, global functioning, level of recklessness, etc.).

Differentiation and Emplacement

The most egregious offenders today would most typically be clinically diagnosed with antisocial personality disorder (APD). This particular personality disorder involves failure to conform to social norms and legal codes, as well as a lack of remorse for reckless and irresponsible behaviors (Sue, Sue, Sue, & Sue, 2013). APD is characterized by a lack of guilt for antisocial behaviors, failure to learn from experience, poverty of deep emotions, and flagrant disregard for the rights of others (Ettinger, 2018). The antisocial individual will often engage in reckless behaviors that cause harm to self and to others, they have a pattern of acting immaturely and irresponsibly (e.g., erratic employment, not properly taking care of children), often violate the law (e.g., steal, vandalize, litter), have impaired decision making, are superficial, and are often insincere (Baumeister & Lobbestael, 2011; Gazzaniga, Heatherton, & Halpern, 2016; Spehr et al., 2010; Sue et al., 2013).

There are currently some problems with the recognized personality disorders (Zhu et al., 2018). For one, there are overlapping areas across the various cluster B personality disorders that can make them difficult to differentiate between and to properly diagnose and treat (e.g., borderline, narcissistic, histrionic,

The American Psychiatric and antisocial). Association (2013) stated that the current approach to diagnosing and treating the extant personality disorders has various shortcomings, such as common overlap and comorbidity across the different disorders. These issues with the standing cluster B personality disorders are well known and it appears to be primarily because of the common components that characterize them, such as novelty-seeking behavior, aggressiveness, erratic behavior, impulsivity, and high emotionality (Durand & Barlow, 2016; Lyons & Martin, 2019). These issues, and more, bring forth some questions as to whether or not all of the cluster B personality disorders are truly distinct disorders or whether they are just varying degrees of behavior that actually reside at different points along the same diagnostic spectrum.

Although antisocial personality disorder is a useful diagnosis and label, it has some issues with being extremely broad in its application. Those that may be diagnosed with this particular personality disorder may exhibit a wide range of behaviors that cannot really be placed into the same category as the sadipath. For instance, a person that has a longstanding pattern of breaking the law, being irritable, not conforming to social norms, being consistently irresponsible, failing to plan, ahead, being deceitful, etc., would likely receive a diagnosis of APD (as long as other diagnostic criteria were met, such as being at least 18 years of age). This individual, as described, would not nearly meet the threshold to be labeled as a sadipath. There is a very wide net that is thrown out there in regard to antisocial personality disorder. This distinct diagnosis is important to be sure, and it certainly has its place for applied, practical, and educational settings. The problem is that there is a wide spectrum of offenders and they are not nearly the same. A person that has spent years stealing, lying, and conning others is not at all in the same category as the individual that seeks out victims to viciously rape and murder. Sadipathy is

reserved exclusively for the most cold-blooded and heinous offenders.

There are a number of distinctions between the sadipathic individual and what would qualify as an antisocial personality. The criteria for APD require that the individual have a pervasive pattern of disregard for, and the violation of, the rights of others that has occurred since the age of 15. This is not necessary for one to be labeled as a sadipath. The criteria of the current Diagnostic and Statistical Manual of Mental Disorders (DSM-5) also requires that there is evidence of conduct disorder before the age of 15 (American Psychiatric Association, 2013). This is also not necessary to for one to be categorized as a sadipathic offender. Many brutal serial murderers did not have histories of conduct disorder as adolescents and were not know to be perpetual violators of the law. In his work on serial killing, Gorby (2000) found that the average age of onset for killing was 30 (onset ranged from 13 to 60) and the average age at the time of the last kill was 35 (with a range of 16 to 70). The most common forms of killing for male serial offenders included strangulation, stabbing, beating, bludgeoning, and firearms (Gorby, 2000).

The sadipathic offender may not begin his or her reign of terror until they are in their adult years. The sadipathic murderer delights in torturing, butchering, and maiming their victims. sadipath has no regard for the pain or suffering that their victims are experiencing, in fact they eniov it. Sadistic personalities actually experience positive emotional states when they are harming, disfiguring, and/or mutilating their victims (e.g., Anderson & Marcus, 2019; Langevin & Curnoe, 2014; Mededovic, 2017). Sadipathy can originate at any point in the developmental process and does not have to begin in childhood or in adolescence; although the roots of sadistic behaviors can very often be early development traced back to experiences (Hickey, 2015; Lyons & Martin, 2019; Ray, 2018).

There are many different things that can typify the feelings and actions of the sadipathic Research has shown that sadistic offender. individuals often experience feelings reinforce their harmful behaviors (Baumeister & Lobbestael, 2011; Reidy et al., 2011). To be able to best understand the thoughts and actions of the sadipath it is necessary to pay attention to the cognitive, psychological, emotional, and behavioral aspects of this extreme pathology. Table 1 breaks down some common concepts. features, and characteristics of interest in regard to this particular type of offending population. It is important to keep in mind that each offender will vary in his or her own profile, as with any offender, but there are some clear patterns in the traits, characteristics, and general behaviors of this particular offending population. highlights the basic conceptualization of the prototypical sadipath. This can be thought of as a basic profile of the common sadipath and what often characterizes this type of offender.

Ensample of Sadipathic Offenders

The archetype of the sadipathic offender is a person that shows no remorse or empathy toward his or her victims before, during, or after their brutal acts. The sadipath takes pleasure in harming their victims and causing them to suffer. The sadipath will often conclude his heinous actions by killing the victim - some will even continue to violate the victims even after they have been murdered (e.g., Jeffrey Dahmer). Some of the most savage sadipaths that have been convicted of serial murder would include offenders such as Richard Ramirez (The Night Stalker) with 14 murders, Gary Ridgeway (49 murders), Ted Bundy (35 murders), John Gacy (33 murders), and David Berkowitz (6 murders). Dennis Rader (Bind, Torture, Kill - BTK) was convicted for 10 murders. He was given this moniker for his brutal acts during his attacks. To distinguish the sadipath it is important to once again distinguish this from the antisocial personality. Rader did not have a history of conduct disorder as a youth, nor was he known for being reckless, irresponsible, or neglectful of his family. As can be seen with some sadipathic offenders, he was regarded as a family man, churchgoer, and overall good father. Neighbors may even refer to the sadipath as a "normal" person that never bothered anyone. Something in Rader switched when he went out looking for his victims. It is common for the sadipath to compartmentalize his life and to separate those he cares about (e.g., family) from those that he does not care about at all (e.g., victims).

A prototypical example of the sadipath is serial killer Samuel Little. As of this writing it has already been confirmed that he has killed at least 60 women. Little claims to have killed at least 90. It is expected that investigators will connect him to more murders over time. For several decades he traveled across various states and sought out vulnerable women to attack and kill - which he did multiple times. He was a trained boxer and he would lure his victims into a setting where they were alone so he could pummel them with his fists and choke them to death. By his own statements, Little enjoyed watching the women struggle and suffocate at his hands. Evidence also confirms that sexual assaults did take place during some of these cruel and brutal attacks. Joseph DeAngelo (The Golden State Killer) was a former law enforcement officer that strategically sought out victims and used tactics that he learned as an

officer to escape from crime scenes and the general areas where he raped and killed his victims. DeAngelo is another case example of a prototypical sadipath that had no empathy, remorse, or shame for his actions. His thoughts were evil, and his actions were as cold-blooded and heinous as could be imagined. Other convicted serial killers also fit the general profile of the sadipathic offender, such as Jeffrey Dahmer (e.g., murder, rape, dismemberment, cannibalism), Ted Bundy (e.g., abduction, sexual torture, murder), John Gacy (e.g., sodomy/rape, torture, murder). All of these individuals were extraordinarily cruel heartless toward their victims. All of these individuals displayed no genuine guilt or concern for the lives, pain, or suffering of those that they mutilated, tortured, and murdered. This is sadipathic offender. characteristic of the Although there will always be a complex constellation of distinct features and behaviors across any type of conceived population, all sadipaths have certain things in common. Dahmer, Little, Ramirez, DeAngelo, Gacy, Ridgeway, Bundy, Rader, and many others, all display the prototypical features, traits, and behaviors of the quintessential sadipathic offender. Further academic studies can elaborate on these cases and make further connections to the construct of sadipathy.

Table 1 Selected Concepts of Interest in Regard to the Sadipathic Offender

<u>Cognitive</u>	Psychological/Emotional	<u>Behavioral</u>	
Intent	Arousal	Brutality of Actions	
Awareness	Eagerness	Malevolence	
Perception	Shame	Violence	
Judgment	Guilt	Rape	
Self-consciousness	Pleasure	Sexual Assault	
Goal-Setting	Enjoyment	Mutilation	
Planning	Satisfaction	Torture	
Imagining	Reaction Patterns	Cutting	
Motivation	General Attitude	Dismemberment	
Purpose	Catharsis	Viciousness	
Desired Effect	Positive Affect	Murder	

Table 2 Basic Profile, Characteristics, and Actions of the Prototypical Sadipath

- Repeated acts of violence extremely violent acts on two or more occasions
- · Complete lack of empathy for victims
- No genuine remorse or guilt for acts committed
- Takes pleasure in inflicting pain and injury on victims
- Engage in extreme acts such as mutilation, torture, disfigurement, and/or dismemberment
- Sexual assault and rape are common
- Experiences no distress during brutal actions toward others
- · Cold-blooded and detached stance toward those being harmed
- Callous attitude
- Behavioral disinhibition
- Experiences positive affect through the suffering of others

Closing Cogitation

Sadipathy refers to the most extreme and brutal individuals. Sadipathic offenders are among the most vicious and heinous offenders. They have no regard for their victims, feel no empathy for them, and actually take pleasure in their pain and suffering. At its conceptual base is the cruel and cold-blooded serial killer. The individual that sets out to savagely injure, torture, mutilate, and/or kill his victims – all while savoring in emotional satisfaction – is the exemplar of the protoplast sadipath.

References

- American Psychiatric Association. (2013).
 Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC: Author.
- **2.** Anderson, N., & Kiehl, K. (2011). The psychopath magnetized: Insights from brain imaging. *Trends in Cognitive Sciences*, 16, 52-60.
- Anderson, A., E., & Markus, D. K. (2019). A bifactor model of meanness, coldheartedness, callousness, and sadism. *Personality and Individual Differences*, 137, 192-197. doi: 10.1016/j.paid. 2018.09.006
- Baumeister, R. F., & Lobbestael, J. (2011). Emotions and antisocial behavior. The Journal of Forensic Psychiatry and Psychology, 22(5), 635-649. doi:10.1080/14789949.2011.617535
- 5. Buckels, E. E., Jones, D. N., & Paulhus, D. L. (2013). Behavioral confirmation of everyday

- sadism. *Psychological Science*, 24(11). 2201-2209. doi:10.1077/0956796134-90749
- Castle, T., & Hensley, C. (2002). Serial killers with military experience: Applying learning theory to serial murder. International *Journal of Offender Therapy and Comparative Criminology*, 46(4), 453-465. doi:10.1177/03-06624X02464007
- 7. Casement, P. J. (1991). *Learning from the patient*. New York, NY: The Guilford Press.
- 8. Decety, J. Skelly, L., & Kiehl, K. (2013). Brain response to empathy-eliciting scenarios involving pain in incarcerated individuals with psychopathy. *JAMA Psychiatry*, 70, 638-645.
- 9. DeLisi, M. (2015). *Homicide*. Dubuque, IA: Kendall/Hunt.
- DeLisi, M., Drury, A. J., Caropreso, D., Heinrichs, T., Tahja, K. M., & Elbert, M. J. (2018). Antisocial personality disorder with or without antecedent conduct disorder. *Criminal Justice and Behavior*, 45(6), 902-917. doi:10. 1177/00938548765593
- 11. Durand, M. V., & Barlow, D. H. (2016). *Essentials of psychology* (7th ed.). Boston, MA: Cengage.
- 12. Ettinger, R. H. (2018). *Psychology: The science of behavior* (6th ed.). Redding, CA: BVT Publishing.
- 13. Farrell, A. L., Keppel, R.D., & Titterington, V.B. (2011). Lethal ladies: Revisiting what we know about female serial murderers. *Homicide Studies*, 15(3), 228-252. doi: 10.1177/1088767911415938
- Federal Bureau of Investigation. (2008). Serial murder: Multi-disciplinary perspectives for investigators. Washington, DC: Behavioral Analysis Unit, National Center for the Analysis of Violent Crimes.

- Federal Bureau of Investigation. (2010). Crime in the U.S. 2010: Uniform crime reports. Washington, DC: U.S. Department of Justice, Federal Bureau of Investigation. Retrieved from https://www.fbi.gov/about-us/cjis/ucr.
- Feist, G. J., & Rosenberg, E. L. (2019). Psychology: Perspectives and connections (4th ed.). New York, NY: McGraw-Hill.
- 17. Fox, B., & DeLisi, M. (2019). Psychopathic killers: A meta-analytic review of the psychopathy-homicide nexus. Aggression and Violent Behavior, 44, 67-79. doi:10.1016/j.avb.2018.11.005
- 18. Franzoi, S. (2016). *Social psychology* (7th ed.). Redding, CA: BVT Publishing.
- 19. Garcia, D., & Moraga, F. R. (2017). The dark cube: Dark character profiles and OCEAN. *PeerJ*, 5, 1-18. doi: 10.7717/peerj.3-845
- 20. Garrett, B., & Hough, G. (2018). *Brain and behavior: An introduction to behavioral neuroscience* (5th ed.). Thousand Oaks, CA: Sage Publishing.
- Gazzaniga, M., Heatherton, T., & Halpern, D. (2016). Psychological science (5th ed.). New York, NY: W. W. Norton.
- 22. Gorby, B. (2000). *Serial murder: A cross-national descriptive study.* Fresno, CA: CSU, Fresno.
- Gowin, J. L., Green, C. E., Alcorn, J. L., Swann, A. C., Moeller, F. G., & Lane, S. D. (2013). The role of cortisol and psychopathy in the cycle of violence. *Psychopharmacology*, 227, 661-672. doi: 10.1007/s00213-013-2992-1
- 24. Gullhaugen, A. S., & Nottestad, J. A. (2011). Looking for the Hannibal behind the cannibal: Current status of case research. *International Journal of Offender Therapy and Comparative Criminology*, 55(3), 350-369. doi: 10.1177/0306624X10362659
- 25. Hagger-Johnson, G., & Egan, V. (2010). Sadistic personality disorder and sensational interests: What is the size and specificity of the association? *The Journal of Forensic Psychiatry and Psychology*, 21(1), 113-120. doi: 10.1080/14789940903174220
- 26. Hickey, E. W. (2015). *Serial murderers and their victims* (6th ed.). Belmont, CA: Wadsworth.
- 27. Holmes, R. M., & DeBurger, J. (1988). *Serial murder*. Newbury Park, CA: Sage.
- 28. Holt, S. E., Meloy, J. R., & Strack, S. (1999). Sadism and psychopathy in violent and sexually violent offenders. *The Journal of the American Academy of Psychiatry and the Law*, 27, 23-32.
- Knight, R. A., & Guay, J. P. (2006). The role of psychopathy in sexual offenders against women.
 In C. J. Patrick (Ed.), *Handbook of Psychopathy* (pp. 512-532). New York, NY: The Guilford Press.

- 30. Kirsch, L. G., & Becker, J. V. (2007). Emotional deficits in psychopathy and sexual sadism: Implications for violent and sadistic behavior. *Clinical Psychology Review*, 27, 904-922. doi: 10: 1016/j.cpr.2007.01.011
- 31. Langevin, R., & Curnoe, S. (2014). Are dangerous offenders different from other offenders? A clinical profile. International *Journal of Offender Therapy and Comparative Criminology*, 58(7), 780-801. doi: 10.1177/03-06624X13481206
- 32. Lyons, C. A., & Martin, B. (2019). *Abnormal psychology: Clinical and scientific perspectives* (6th ed.). Redding, CA: BVT Publishing.
- 33. Legal Information Institute. (2019, June). *Investigation of serial murder*. Retrieved from https://www.law.cornell.edu/uscode/text/28/540B.
- 34. Malamuth, N. M. (2003). Criminal and non-criminal sexual aggressors: Integrating psychopathy in a hierarchical-meditational confluence model. *Annals of the New York Academy of Sciences*, 989, 33-58. doi: 10.1111/j.1749-6632.2003.tb07292.x
- 35. Mallicoat, S. L., Ireland, C. E. (2014). *Women and crime: The essentials*. Thousand Oaks, CA: Sage.
- March, E. (2019). Psychopathy, sadism, empathy, and the motivation to cause harm: New evidence confirms malevolent nature of the Internet troll. Personality and Individual Differences, 141, 131-137. doi:10.1016/j.paid-01.001
- 37. Martin, D. G. (2015). *Counseling and theory skills* (4th ed.). Long Grove, IL: Waveland Press.
- 38. Mededovic, J. (2017). Aberrations in emotional processing of violent-dependent stimuli are the core features of sadism. *Motivation & Emotion*, 41, 273-283. doi:10.1007/s11031-016-9596-0
- 39. Meloy, J. R. (2000). The nature and dynamics of sexual homicide: An integrative review. *Aggression and Violent Behavior*, 5, 1-22.
- 40. Meloy, J. R. (2001). The mark of Cain: Psychoanalytic insight and the psychopath. Hillsdale, NJ: The Analytic Press.
- 41. Mokros, A., Osterheider, M., Hucker, S. J., & Nitschke, J. (2011). Psychopathy and sexual sadism. *Law and Human Behavior*, 35, 188-199. doi: 10.1007/s10979-010-9221-9
- 42. Moshagen, M., Hilbig, B. E., & Zettler, I. (2018). The dark core of personality. *Psychological Review*, 125(5), 656-688. doi:10.1037/rev0000111
- 43. Murphy, C., & Vess, J. (2003). Subtypes of psychopathy: Proposed differences between narcissistic, borderline, sadistic, and antisocial psychopaths. *Psychiatric Quarterly*, 74, 11-29.
- 44. Myers, D. G. (2015). *Social psychology* (12th ed.). New York, NY: McGraw-Hill.

- 45. Porter, S., & Woodworth, M. (2006). psychopathy and aggression. In C. J. Patrick (Ed.), *Handbook of Psychopathy* (pp. 481-494). New York, NY: The Guilford Press.
- 46. Quinsey, V. L. (2010). Coercive paraphilic disorder. *Archives of Sexual Behavior*, 39, 405-410.
- 47. Ray, W. J. (2018). *Abnormal psychology* (2nd ed.). Thousand Oaks, CA: Sage.
- 48. Reidy, D. E., Zeichner, A., & Seibert, L. A. (2011). Unprovoked aggression: Effects of psychopathic traits and sadism. *Journal of Personality*, 79(1), 75-100. doi: 10.1111/j.14-67-6494.2010.00691.x
- Spehr, A., Hill, A., Habermann, N., Briken, P., & Berner, W. (2010). Sexual murderers with adult or child victims: Are they different? Sexual Abuse: A Journal of Research and Treatment, 22(3), 290-314. doi: 10.1177/1079063210374346
- 50. St. Clair, M. (2004). Object relations and self-psychology: An introduction (4th ed.). Belmont, CA: Brooks/Cole.
- 51. Sue, D., Sue, D. W., Sue, D., & Sue S. (2013). *Understanding abnormal behavior* (10th ed.). Belmont, CA: Wadsworth.
- 52. Zhu, S., Zhang, T., Yang, C., Wei, Y. Y., Xu, L. H., Wang, J. J., ...Wang, J. J. (2018). A compromise solution between overlapping and overlooking DSM personality disorders in Chinese psychiatric practice. *Social Psychology and Psychiatric Epidemiology*, 53(1), 99-106.

