

## Correspondence

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**Contents** ■ Psychopathy ■ Involuntary community treatment ■ Psychosocial interventions for self-harm ■ Psychiatric disorder and looked after status ■ Lithium for prevention of Alzheimer's disease ■ Mortality and electroconvulsive therapy ■ Measuring stigma ■ Metabolic syndrome and intellectual disability

### Psychopathy

Cooke *et al* (2007) claim that there is no compelling empirical evidence to support the conclusion that antisocial behaviour is a central feature of psychopathy. However, in the same issue of the *Journal of Personality Disorders* (2007) report a common genetic component to callous-unemotional traits and antisocial tendencies. Other studies cited by Viding *et al* report similar results. Moreover, Larsson *et al* (2007) reported that the same general four factors present in our four-factor model of psychopathy (Vitacco *et al*, 2005) all loaded onto a single genetic factor. Longitudinal research (not cited by Cooke *et al*) indicates that antisocial tendencies are significantly linked to the longitudinal stability of psychopathic traits (Frick *et al*, 2003). Cooke *et al* refer to the work of Cleckley (1988) to support their position, but in Cleckley's accounts of psychopathy antisocial behaviours play an important role. As Patrick (2006: p. 608) noted, 'There is no question that Cleckley considered persistent antisocial deviance to be characteristic of psychopaths. Without exception, all the individuals represented in his case histories engage in repeated violations of the law – including truancy, vandalism, theft, fraud, forgery, fire-setting, drunkenness and disorderly conduct, assault, reckless driving, drug offences, prostitution, and escape.' As Blackburn (2007: p. 145) recently put it, 'Contra Cooke, . . . antisocial behavior, conceived broadly, is a characteristic feature of psychopathy.'

In our paper based on a very large sample (Vitacco *et al*, 2005), we demonstrated the conceptual errors and flaws in modelling that went into the development of Cooke's model and provided evidence for the four-factor model. Interestingly, Cooke *et al* did not cite this large study but rather chose to cite our small preliminary studies, although they are in line with our larger study. We do not view criminality

as central to psychopathy. Indeed, the Psychopathy Checklist – Screening Version (PCL–SV) contains two items that refer to antisocial behaviour and that can be scored without evidence of criminality. The PCL–R and PCL–SV are virtually identical psychometrically, as noted previously by Cooke *et al* (1999).

**Blackburn, R. (2007)** Personality disorder and antisocial deviance: comments on the debate on the structure of the Psychopathy Checklist – Revised. *Journal of Personality Disorders*, **21**, 142–159.

**Cleckley, H. (1988)** *The Mask of Sanity* (5th edn). Mosby.

**Cooke, D. J., Michie, C., Hart, S., et al (1999)** Evaluating the screening version of the Hare Psychopathy Checklist (PCL: SV): an item response theory analysis. *Psychological Assessment*, **11**, 3–13.

**Cooke, D. J., Michie, C. & Skeem, J. (2007)** Understanding the structure of the Psychopathy Checklist – Revised. An exploration of methodological confusion. *British Journal of Psychiatry*, **190** (suppl. 49), s39–s50.

**Frick, P. J., Kimonis, E. R., Dandreaux, D. M., et al (2003)** The 4 years stability of psychopathic traits in non-referred youth. *Behavioral Sciences and the Law*, **21**, 1–24.

**Larsson, H., Tuvblad, C., Rijdsdijk, F. V., et al (2007)** A common genetic factor explains the association between psychopathic personality and antisocial behavior. *Psychological Medicine*, **37**, 15–26.

**Patrick, C. J. (2006)** Back to the future: Cleckley as a guide to the next generation of psychopathy research. In *Handbook of Psychopathy* (ed. C. J. Patrick), pp. 605–618. Guilford.

**Viding, E., Frick, P. J. & Plomin, R. (2007)** Aetiology of the relationship between callous–unemotional traits and conduct problems in childhood. *British Journal of Psychiatry*, **190** (suppl. 49), 33–38.

**Vitacco, M., Neumann, C. S. & Jackson, R. L. (2005)** Testing of a four-factor model of psychopathy: associations with gender, ethnicity, intelligence and violence. *Journal of Consulting and Clinical Psychology*, **73**, 466–476.

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The article by Cooke *et al* (2007) contains a number of fundamental modelling errors.

First, the authors continue to present an over-factored model (i.e. hierarchical three-factor model with testlets), which results in negative variances. This 13-item model actually contains 10 factors: 6 first-order factors/testlets, 3 second-order factors and 1 third-order factor (simply count the number of circles/factors in Fig. 1). Any model can achieve good fit when it is as complex as the data it attempts to summarise. We have shown that this testlet model results in untenable parameters in four separate studies (Neumann *et al*, 2006). One author of the Cooke *et al* paper has also suggested that the testlet model is over-factored (Skeem *et al*, 2003). Cooke does not acknowledge this problem of an over-factored model, even though it is evident in his published work (see Cooke & Michie, 2001, Figs 2 and 3, which contain zero variance terms that the EQS program sets to zero when estimating negative variances). Cooke *et al* (2007) mention that we have criticised their use of testlets but they do not dispute that it creates a misspecified model with untenable parameters. Our analysis of the testlet model is available upon request.

Cooke *et al* provided a polychoric correlation matrix, ostensibly to give investigators the opportunity to replicate their findings. However, as noted in the EQS program manual, robust procedures can only be conducted with the raw items. Thus, the results reported by Cooke *et al* appear to be transparent but in reality no one will be able to unambiguously verify their analyses. When one analyses their published correlation matrix using a non-robust procedure, very different findings result. Also, Cooke *et al* relied upon a maximum likelihood procedure for estimating model parameters, despite the fact that it is well known that this procedure underestimates model parameters and model fit when used with ordinal data (Everitt & Dunn, 2001) such as the items of the Psychopathy Checklist – Revised. There was no serious discussion on why robust maximum likelihood with polychoric correlations was employed, except that it is recommended in the manual for EQS version 6. None the less, the verisimilitude of this new approach is currently unknown. A program such as Mplus, which employs a robust weighted least-squares procedure for ordinal data is an accepted approach (Neumann *et al*, 2006). Cooke *et al*'s use of Mplus was limited. Our Mplus analyses of the UK data along with our previously