# Isolated Violence to the Loved One

BEN BURSTEN, MD\*

#### **Precis**

Five cases are presented wherein the violent person had had no substantial previous history of violence. Each of these people idealized the partner, were unable to accept the fact that the relationship was at an end and split off the anger. Frantic attempts to repair the relationship were made. Under various psychophysiological conditions, dyscontrol resulted in an outburst of violence toward the loved one.

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In the years 1973-76, 22% of the 18 million violent crimes recorded in the United States were committed on victims who were well known by their assailants. Crimes involving these "intimates" tended to be more serious and involved more injuries than other crimes. In 1977, Costantino et al² reported that only 26% of the homicides committed in Allegheny County, PA were perpetrated by assailants who did not know their victims well. Apparently, violent crimes that erupt into murder tend to be less profitoriented and more expressive of the complex human relationships among persons who know each other. Courts and attorneys are more likely to refer spouse-killers than other assailants for psychiatric evaluation. From these and other scattered statistical studies, one can infer the following: a significant number of violent crimes occur among people who know each other well. Crimes among intimates are apt to erupt into physical violence, and often they are expressive of the personal relationship. These are the crimes of passion.

We must distinguish between repetitive and isolated violence. Child and spouse-abusers most often are repetitive. They tend to echo the abusive characteristics of their own families of origin.<sup>4-5</sup> Violent outbursts seem part of the warp and woof of their personalities and their familial relationships, and may be supported or even encouraged by their subcultures.<sup>6</sup>

In contrast to these repeatedly belligerent people, some assailants are not characteristically aggressive. The attack on an intimate partner is an isolated and unexpected incident. This type of violence will be the focus of the present paper.

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<sup>\*</sup>Dr. Bursten is Professor and Vice Chairman of the Department of Psychiatry at the University of Tennessee Center for the Health Sciences, Memphis, TN.

Karpman<sup>7</sup> delineated several psychodynamic themes that may appear in homicides of passion. Some of the murderers are frankly psychotic, and may develop delusions that their spouse is unfaithful or that they must kill to avoid some fantasized danger. Some homicides occur during episodes of catatonic or manic excitement. Projection may play a role in the killing, even when the killer is not frankly psychotic. For example, a husband who feels that his sexual urges are the work of the devil may project his lust onto his wife and injure or kill her to contain and control this evil. Crimes of passion also involve jealousy, the desire for revenge, feelings of personal insecurity and feelings of inferiority. Inferiority feelings may be particularly pronounced in the sexual area. A man may be led to murder if he feels that his wife's unfaithfulness is a comment on his own sexual inadequacy. Bromberg<sup>8</sup> refers to this as the 'cuckolding reaction,' wherein the husband is unable to cope with his feelings of being the object of everyone's contempt.

Tanay<sup>9</sup> more directly addressed the specific issue of isolated violence by individuals with no previous history of belligerent behavior. He described "aggressophobic" people who are so afraid of their anger that they repress it. The anger "builds up" and erupts suddenly. Blackman et al<sup>10</sup> noted that men who have isolated aggressive outbursts with no previous violent history tend to be dependent, schizoid or "borderline schizophrenic men whose murderous acts followed intense struggle against feelings of helplessness and 'impending psychotic episodes.' "

What causes the rage to erupt? Menninger and Mayman<sup>11</sup> in 1956 coined the expression "episodic dyscontrol." They felt that such eruption was an adaptive response of the organism to severe stress which threatened a psychotic decompensation. In a sense, violence is viewed as a way of coping with the feelings of personality disintegration. McCarthy, <sup>12</sup> studying a series of homicidal adolescents, expanded on this concept. He felt that these adolescents had considerable difficulty regulating their self-esteem and that the rage was a means of repairing the threatened narcissism. The repair involves two related mechanisms. The killing symbolizes the eradication of the depriving parent who had the audacity not to feed into the grandiosity of the murderer. Second, it restores the infantile sense of omnipotence by fortifying the murderer's sense of power and control. In my previous work on narcissism, <sup>13</sup> I have shown how narcissistic repair may be useful in warding off a tendency toward fragmentation of the self and decompensation.

Monroe and his collaborators<sup>14</sup> have considered episodic dyscontrol to be maladaptive rather than adaptive. They described disorders of impulsivity that are generally "Out of character for the individual and out of context for the situation." Monroe believes that this impulsivity is partly an expression of limbic seizure activity ("faulty equipment") and partly an expression of "faulty learning." The relative influences of these mechanisms are said to vary from case to case.

In my forensic psychiatric practice, I have come across several cases of isolated violence perpetrated on lovers, spouses or ex-spouses by people with no history of violent outbursts prior to the act. There were striking similarities in the contexts of the relationships involved, and certain common psychodynamic themes emerged that have not previously been described in the literature. These contexts and psychodynamic themes will be discussed in the present paper.

## Case 1

Mr. A never actually had an intimate relationship with his victim, a local television personality. While he had seen her program many times and talked to her on the telephone, he had never met her in person. The intimacy of the relationship was all in his mind.

The defendant was 27 years old at the time of the violent episode. He had always been withdrawn and passive. He had had few friends and he was considered somewhat eccentric by his family. In the preceding five years, he had been hospitalized three times with a diagnosis of paranoid schizophrenia. He had stopped taking his medications shortly after discharge. When I saw him, within a week after the offense, his affect was blunted, he had ideas of reference and occasional looseness of associations. He felt that he was a very special person who received signs and messages from radio programs, cloud formations, etc.

Mr. A's only previous violent episode occurred approximately five years previously, when his mother was dying from amyotrophic lateral sclerosis. He suffered his first manifest psychotic break and he attempted suicide twice — first trying to jump from a bridge and then by slashing his wrist. These self-destructive actions were in response to command hallucinations. When I saw him, he was not hallucinating.

In the months before the offense, Mr. A had been living alone in semi-squalor. His father provided money, but had no real contact with him. Mr. A spent most of the day wandering about or watching television. He had attempted to contact a woman who appeared on a nightly television show, but she became frightened by his intensity and refused to take his calls. Shortly thereafter, he became enamored of another television personality. As nearly as can be reconstructed, this woman at first treated the defendant's phone calls as courteously as any calls from her fans. When he attempted to arrange a meeting with her, she declined. There is no suggestion that she led him on in any way. As Mr. A became more insistent about meeting her and he began expressing love for her, she attempted to terminate the relationship by saying that she did not have time for him. When she returned to her home that day, he was in front of her house. He ran up to her and stabbed her several times with a long knife. He was quickly apprehended and charged with assault with intent to murder.

Mr. A's understanding of the situation involved his middle name, Benjamin. This was his grandfather's name, and Mr. A believed that grandfather

had been a virgin when he was married and that the ancient tribe of Benjamin represented virginity. Thus, Mr. A thought that he had a responsibility to keep himself a virgin until he "took a bride." Many "signs" indicated to him that this bride-to-be was the woman on television. He perceived her inability to meet with him and to openly declare her love for him as the manifestations of some mysterious workings. Nonetheless, he could pick up signs in their conversations that indicated she, too, knew their love was predestined. He was sure that she was a virgin and that their love was utterly pure. When she firmly told him that she had no time for him, he felt confused and betrayed. He took the knife with him when he went to her house, but he did not have a clear idea of using it. He felt desperately the need to meet her and to fulfill their holy destiny of love; however, when he saw her, the rage welled up and he attacked her. He told me that he was angry because she had contradicted herself and betrayed him, but that he always loved her because she is essentially pure and without fault. These two contradictory thoughts were able to coexist without affecting each other.

# Case 2

Mr. B grew up in the rural south in a family with strict moral standards. Neither parent drank, and Mr. B was proud of following in their footsteps. He felt that his father was a "fine man" and that his mother was "nearly perfect."

What had attracted him to his wife, 23 years previously, was her virginity. Their marriage, however, was troubled almost from the very beginning. Mrs. B was restless and moved away frequently in the early years. He constantly pleaded with her to come back. After a few years, the marriage seemed to settle down, although his wife was unfaithful on a few occasions. His response was to forgive her and to beg her to come back into the marriage. There were other times when he heard from friends that she was having affairs, but he generally refused to believe them. He had had a brief affair with the wife of one of his wife's paramours, but he terminated it abruptly, confessed and apologized to his wife.

Approximately two and a half years before the offense, Mrs. B had a hysterectomy and her personality changed considerably. She began to drink, spent considerable time away from home and had a new circle of friends. She was probably involved in both homo- and heterosexual activities, but told her husband she could not have intercourse with him because it was too painful. He responded by trying harder to make the marriage work. Mrs. B rebuffed him consistently and said that she no longer loved him and stayed with him only for financial security. He felt that the way to regain her love was to give her everything that she desired. He was a truck driver and he began to work longer hours and make extra runs to earn more money. She willingly spent the money, but gave him no affection in return. She began to institute divorce proceedings, and he made even more frantic efforts to keep her. He felt that if he could only talk with her

convincingly, the marriage could be saved. He was never aware of feeling any sustained anger toward her, and he told me that "For 23 years, I had the best woman there was alive."

Like many truck drivers, Mr. B frequently took amphetamines to stay awake on his long trips. He had occasionally hallucinated his wife's image sitting next to him in the cab. During the few days before the offense, he had been working day and night, with very little sleep and had been taking considerable amounts of amphetamines. The night before the incident, he hallucinated his wife's image in the house and he heard her laughing at him. He went from room to room looking for her, but she would appear and then immediately disappear. He got very little sleep. The next morning, he attempted to balance his checkbook, but found that he could not perform the calculations. He attempted to drive to a restaurant and suddenly realized that he had taken the wrong direction. He then went to his wife's place of employment.

Mr. B had started carrying a gun in his truck during a truckers' strike. When he saw his wife entering her place of employment, he ran after her, gun in hand. He called her name, and shouted that he just wanted to talk with her. When she did not respond, he shot her. He described this incident as something that was happening "like on television." He was bothered by "psychedelic" lights flashing before his eyes. He could not explain why he was carrying the gun. Mrs. B died of the gunshot wounds and he was charged with first degree murder.

When I evaluated Mr. B some months after the incident, he showed no signs of psychosis. He still maintained that his wife was a wonderful woman and evaluated his marriage as excellent. Consistent with his general narcissistic orientation, Mr. B felt considerable shame. He was very concerned about appearances and was reluctant to plead insanity because that would bring disgrace to his family. He felt that he had a family tradition of "specialness" to uphold.

#### Case 3

Mr. C had been a successful businessman. He was a proud person who liked to surround himself with all the accoutrements of success — a flashy car, an attractive wife, nice clothes, etc. He was 41 years old and had been married for 20 years before the offense. He described the marrage in ideal terms and had nothing but good to say about his wife; however, for the past three years, Mrs. C had made it plain that she no longer wanted to stay in the marriage. She had moved to another city with their two children. When Mr. C tracked her down, she moved again. In his pursuit of her and his attempts to repair the marriage, he neglected his business, which gradually went downhill. He felt a desperate need to talk with his wife and to convince her that the marriage was still viable. She filed for and obtained a divorce about one year before the offense. Mr. C became very upset and followed her around the country, begging her to remarry him. She finally called the police

to intervene in what she considered his harassment. There are no indications that she gave him any encouragement. Nonetheless, he could not face the fact that their marriage was over. He said that he still loved her despite the fact that she had called the police. He began to settle down a bit and bought a new business, but he was still preoccupied with repairing the relationship. When he learned from a friend that his ex-wife moved back to the area, he attempted to see her, but was rebuffed. His agitation again mounted.

One day, while in his ex-wife's neighborhood, he saw her in her car in a shopping center parking lot. Taking his gun, which he had carried in his glove compartment for years, he approached her car and shouted, "Betty, I want to talk to you." She rolled up the window and started the car. He knocked on the window with the gun in an attempt "To try to scare her so she would open up the window." The gun went off and the window was shattered. His ex-wife was not hit and she ran from the car, unharmed but very frightened. He was charged with assault with attempt to murder.

I evaluated Mr. C approximately two months after the incident. He was still very agitated and preoccupied with the loss of his wife. Despite everything that had happened, he was convinced that if he could only sit down and talk with her, she would realize that she should come back to him. He tended to dismiss the offense by insisting that he had never intended to harm her — merely to scare her. He insisted that he was not angry with her and had no reason to harm her; he loved her.

Mr. C indicated that his agitation — which included crying, wanting to reunite with his wife and a sort of whining, pleading approach — was characteristic of his agitated state since his wife had left. There were no clear-cut signs of depression; his sleep was adequate, his sexual interest, as indicated by masturbation, was not diminished, appetite and weight were normal. He felt no real guilt of self-accusation; there was only the need to talk with his wife.

### Case 4

Corporal D was charged with rape, sodomy, assault with a deadly weapon and several other offenses. Violent behavior had not been characteristic of this man's previous behavior. He was a proud man — proud of his career and his good work record, proud of the Army and especially proud of his idealized and religious parents. He described his mother in almost saintly terms.

When Corporal D was 11 years old, his four-year old sister died of a liver disease. As the oldest child of working parents, he felt responsible for his sister. She always seemed so frail and fragile. With tears in his eyes, he told me that she was "Pure, sweet-looking and pretty."

Although his wife was not a virgin when he married her, "She was a virgin in my mind. As far as I was concerned, she was as pure as anybody." He described the marriage as "good, despite the fact that there were

continued stresses and strains, with Mrs. D spending considerable time away from home. He knew that she had male friends, but he consistently denied that she was having sexual relations with them. When she told him that she was involved with another man and wanted a divorce, he pleaded with her to stay with him. She obtained a legal separation and, although he moved out of the house, he would come over unrequested to mow the lawn or to leave some food for the baby. Although she talked with him on occasion, she refused to consider reconciliation. As the divorce became imminent, Corporal D went to her house one day and found her sexually involved with her new boyfriend. He was "nauseated and disgusted." The next day, he accosted her on the street at gunpoint and took her to her home where he forced her to perform fellatio on him. According to Mrs. D, he was quite rough with her until she agreed to have the sexual relation with him. From that point on, "It was the gentlest rape." Throughout the incident, he pleaded with her to resume the marriage. When he left, she called the military police and Corporal D was arrested. He managed to escape from detention two weeks later, and he returned to his wife's house and again forced her to have sexual relations with him, while he begged for a reconciliation.

### Case 5

Mrs. E's situation differed from the other cases in that there was no actual violence, and she was aware of her murderous impulses. I include it because it illustrates in "slow motion" some of the processes which underlie isolated violence to the loved one.

Mrs. E was a patient in my general psychiatric practice. She had come for treatment because she was unable to feel successful at her job or to enjoy dating. She was a self-centered woman, easily prone to disappointment when not praised or helped by those she viewed as more powerful than herself. Her self-esteem was rather fragile; although she was quite capable, she tended to underestimate the value of her efforts.

Mrs. E had been married when she was 19. She lived in the shadow of her husband, who went to college and had a meteoric rise in industry. Although she never completed college, she was intelligent and socially adept enough to gain some satisfaction as the wife of the rising young corporate executive. Nonetheless, her husband was tired of her and obtained a divorce, leaving her with the custody of their two children. The subsequent years were filled with her longing to win him back. Other men paled in comparison with him. When she learned that her ex-husband's second marriage had failed, she appealed to him to take her back and he said unequivocally that he did not love her and there was no future for them. Nonetheless, she still harbored the hope that they would remarry.

During the course of therapy, it became evident that she felt I would have power to effect the reconciliation. When I confronted her with the fact that I had no such power, she was unable to express her disappointment in

me. Instead, she described "gluttonous" days when she would overeat and wanted to seduce her friends' husbands "Just to have them." She began to telephone her ex-husband, who lived in a distant city, suggesting that they "Just get together for a weekend." He declined gently, but firmly.

One day, she recounted to me an experience she had had the previous weekend. She was combing her hair in front of the mirror when she was overcome with an urge to travel to the city where her husband resided and to murder him. It was an eerie feeling. She kept looking in the mirror trying to see if it were really she who was having such thoughts. The idea became a preoccupation and she literally shook her head in an attempt to rid herself of it. The urge became stronger and stronger; she felt possessed. Fortunately, a telephone call from a friend "Shook me out of the trance." The patient could not explain the feeling. She tended to disown it, saying that she was not like this at all.

I used the incident to help her realize that it was really she who was angry. We discussed how she split off anger, not only to her ex-husband, but to me in the transference. She needed to cast us in ideal, all-giving and all-powerful roles. Only when she was given to could she feel worthwhile. Gradually the "gluttony" subsided and she developed a more realistic view of her ex-husband. She started to enjoy herself and her accomplishments.

# **Discussion**

People charged with criminal offenses often try to excuse their actions. Thus, it would not be surprising for defendants to say that they were not angry and could give no rational explanation either for the violent act or for carrying the weapon. I do not believe that this was a significant factor in these cases. Indeed, Mr. A did acknowledge a brief period of anger. Mr. B did not try to exculpate himself; in fact, it was because he initially declined to plead insanity that I was brought into the case. His attorney could not believe that a sane man would refuse this "out." Mr. C's expression of anger must have been interrupted by the gunshot because he did not follow through with a second shot. Mr. D's violence was "The gentlest rape" and was punctuated with pleas for a reunion. In Mrs. E's story, we get the clearest illustration of the emergence of anger and its dissociation and disowning.

Although these people had marked individual differences, the similarities were even more striking. All of them were characteristically nonviolent. These were not situations of repeated assaultive outbursts; they were isolated eruptions. All had very strong narcissistic orientations and idealized their victims. All the men not only put their women on a pedestal, but needed to view them as sexually pure. While Mr. E pedestalized her ex-husband, his sexual purity was not a feature of her thoughts. Instead, she valued his intelligence, social adeptness and occupational success.

Along with this need to idealize the victim, these people had to deny the negative elements and the anger which these elements would arouse. They

tended to discount, overlook and ignore not only the hints, but also the frank signals from their partners that their love was not returned. On one level, the message was getting through and it led to increasingly intensified attempts to repair the relationship. The need to "speak" to the other person and the continued hope for the resumption of the relationship was a striking feature of all of the violent episodes. Nonetheless, each of these people was able to isolate and encapsulate the anger and the sense of betraval. This was not the isolation of the obsessional person; indeed all of these people, with the possible exception of Mr. A. were able to elaborate appropriate affect in other spheres. They were also able to express anger at other people, albeit without violence. Thus, we do not see the generalized inhibition of anger described in aggressophobic people.<sup>11</sup> Instead, anger at the loved one was split off and the partner could be viewed as totally desirable and idealized. This splitting, of course, is a very common feature of people with strong narcissistic tendencies. 15 I find it quite easy to believe that these people carried their weapons without having a conscious appreciation of the role of these weapons in their anger toward their partners. A "slow motion" demonstration of the splitting process was given by Mrs. E, who felt that it was not she who was having these murderous impulses.

Why did these people need to split off their anger, idealize the partner and deny the finality of the rupture of the relationship? To understand this, we must consider the nature of some narcissistic relationships. Narcissistic people rely on two factors to keep their sense of self as a cohesive and smoothly functioning aspect of the personality. They must perceive themselves in a relationship with an idealized other who is all good, all-powerful and all-giving, and they must feel that their own grandiosity is not being challenged. Many narcissistic people can maintain their own self-esteem only when given feedback by others who confirm how "nice" they are. 16 The sense of self, then, must constantly be confirmed by the relationship to some significant other person.<sup>17</sup> Withdrawal of the approval of the idealized other can result in several types of responses. Many react with severe disappointment or outbursts of the split-off rage. Others react with a fragmentation of the self characterized by hypochondriacal preoccupation, fleeting psychotic episodes, etc. The people described in this paper did not initially react in either of these ways. Instead, they attempted to repair the narcissistic wound<sup>13</sup> by denying that the idealized figure had actually deserted them and by desperately attempting a reunification. It was only when the rupture of the relationship was actually brought home to them that this mechanism became insufficient and the more primitive rage erupted. There may have been a transient fragmentation of the sense of self so that the rage which had been neatly tucked away could no longer be controlled. In a literal sense, this is a dyscontrol. I do not see it as an adaptive mechanism as described by Menninger and Mayman, 11 but rather as maladaptive in the sense described by Monroe.<sup>14</sup> The failure of the reparative attempt to reunite with the idealized partner may well have led to unbalancing reactions. First, the more primitive rage reaction may have been intensified. Second, a fleeting fragmentation of the sense of self may have weakened the normal control mechanisms that had allowed the rage to be split off and kept under control.

One can only speculate about the interrelationship of these mental processes with limbic activity. That rage is mediated by limbic structures is well-known. It seems unlikely that these people had especially vulnerable limbic systems because outbursts such as these were not characteristic of them. Could it be that some narcissistic people have limbic "programming" for specific contexts, or that they may be prone to develop from experience (learn) certain emotional patterns, the brain substrates of which may trigger intense limbic activity which, while not of seizure intensity, may have a dyscontrolling effect? The mind and brain distinction implied by Monroe's "faulty equipment" and "faulty learning" may be more blurred than it seems.

It is interesting to speculate about another possible mechanism. Lewin<sup>18</sup> has described the importance of reunion fantasies in the onset of mania. It is possible that as the attempts at reunion became more desperate, other psychophysiological processes associated with mania were stimulated. Impulsivity with a relative lack of ability to reflect on consequences is one of the features of mania. I am not suggesting that any of these people diagnostically had an affective disorder; however, an intense narcissistic need for reunification with an idealized object, which is so often prominent in manic people, may be psychophysiologically related to a certain degree of behavioral dyscontrol.

Although this sequence of events may have played a major role in the violent eruptions, it does not constitute a complete explanation. Many narcissistic people repeatedly react with eruptions of rage at every disappointment in an ongoing relationship. While this may be the case with certain repetitive spouse-abusers, it was not the case with the people described in this paper. It could be argued that the eruption came only when there was a psychological finality about the disruption of the relationship that could no longer be ignored or denied; however, certain differences among the people described also played a significant role. It is possible that the intensification of Mr. A's need to fulfill his fantasy prediction of a "pure marriage" represented a gradual psychotic decompensation, one aspect of which was a loss of impulse control. Mr. B had two special dyscontrolling circumstances: a mild amphetamine psychosis and considerable sleep deprivation. These factors may have interacted with the dynamic issues to influence his ability to split-off and control anger.

There is no way to be certain whether Mr. C's agitation represented a specific neurologic or biochemical dyscontrolling mechanism; however, it is possible that, in his agitated state, he was less able to employ the reflective thought that is used in delaying action.

Corporal D did not seem to have a dyscontrolling or disruptive metabolic state. During the time when he was attempting to repair the marriage, he was functioning at a very high level in his work and in other interpersonal activities.

Mrs. E was similar to Corporal D in that respect. There was no suggestion of either metabolic of psychotic dyscontrolling mechanisms. These people all had similar significant psychodynamic situations. Additionally, some of them had distinctly psychotic or specific neurophysiological dyscontrolling factors, while others did not. It is possible that the greater degree of violence committed by Mr. A and Mr. B was related to increased dyscontrol due to the psychosis, drugs and sleep deprivation.

Mr. C, Corporal D and Mrs. E, while having eruptions of the rage, were not quite so violent. I would hesitate to conclude, however, that psychosis or drug intoxication is necessary for the rage to erupt into attempted murder. Although the cases I studied seem to suggest this relationship, I know of other passion-murderers who did not have demonstrated physiological dyscontrolling conditions. Nor are these conditions sufficient for the eruption of the rage. For example, Mr. B had had several previous amphetamine-induced hallucinations of his wife which did not result in violence. The context of the failure of narcissistic repair seems to be an important element in these violent crimes of passion.

The study of these people does point the way toward one conclusion. If this pattern were found in a larger number of cases of isolated violence against intimates, it might raise concern about narcissistic people who are being rebuffed by their loved ones, but who are unable to acknowledge this rejection. So often, our attention is attracted to the person who reacts repeatedly with rage outbursts. We do know that, in general, those people with violent histories tend to repeat violence; however, I suggest that those people who idealize their partners despite obvious rejection, who constantly and rather desperately attempt to repair a relationship and who exhibit no sign of anger in the process, may also pose a danger which can erupt into tragic violence.

#### References

- 1. Patterns of Crime Involving "Intimates." Crim. Justice Newsletter 11:6-7, May 12, 1980.
- Costantino, J.P.; Kuller, L.H.; Perper, J.A. et al: An Epidemiologic Study of Homicides in Allegheny County, PA. Am. J. Epidemiol., 106:314-324, 1977.
- 3. Tanay, E.: Psychiatric Study of Homocide. Am. J. Psychiat., 125:1252-1258, 1969.
- Fontana, V.J.: Child Maltreatment and Battered Child Syndrome, in Comprehensive Textbook of Psychiatry III. Edited by Kaplan, H.L.; Freedman, A.M. and Sadock, B.J. Baltimore, Williams and Wilkins, 1980.
- 5. Gayford, J.J.: Battered Wives. Med. Sci. Law, 15:237-245, 1975.
- Hilberman, E.: Overview: "The Wife-Beaters Wife" Reconsidered. Am. J. Psychiat. 137:1336-1347, 1980.
- 7. Karpman, B.: A Paranoiac Murder. Arch. Crim. Psychodynam. 1:909-939, 1955.
- 8. Bromberg, W.: Crime and the Mind. Westport, CT. Greenwood Press, 1979 (1948).
- 9. Tanay, E.: Psychodynamic Differentiation of Homocide, Bull. Am. Acad. Psychiat, and Law. 6:364-373, 1978.

- Blockman, N.; Weiss, J. and Lamberts, J.: The Sudden Murderer. Arch. Gen. Psychiat. 8:289-294, 1963.
- 11. Menninger, K. and Mayman, M.: Episodic Dyscontrol: A Third Order of Stress Adaptation. Bull. Menninger Clinic 20:153, 1958.
- 12. McCarthy, J.B.: Narcissism and the Self in Homocidal Adolescents.
- 13. Bursten, B.: Some Narcissistic Personality Types. Int. J. Psycho-Anal. 54:287-300, 1973.
- Monroe, R.R.: Brain Dysfunction in Aggressive Criminals. Lexington, MA, Lexington Books, 1978.
- 15. Kernberg, O.: Borderline Personality Organization. J. Am. Psychoan. Assn. 15:641-685, 1967.
- 16. Kohut, H.: The Analysis of the Self. New York, Int. Univ. Press, 1971.
- 17. Bursten, B.: The Narcissistic Course, in the Narcissistic Condition. Edited by Nelson, M.C. New York, Human Sci. Press, 1977.
- 18. Lewin, B.D.: The Psychoanalysis of Elation. New York. Psychoanalytic Quarterly, 1950.