

## Narcissism, Substance Abuse, and Reckless Behaviours

By Sam Vaknin

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Pathological narcissism is an addiction to Narcissistic Supply, the narcissist's drug of choice. It is, therefore, not surprising that other addictive and reckless behaviours – workaholism, alcoholism, drug abuse, pathological gambling, compulsory shopping, or reckless driving – piggyback on this primary dependence.

The narcissist – like other types of addicts – derives pleasure from these exploits. But they also sustain and enhance his grandiose fantasies as "unique", "superior", "entitled", and "chosen". They place him above the laws and pressures of the mundane and away from the humiliating and sobering demands of reality. They render him the centre of attention – but also place him in "splendid isolation" from the madding and inferior crowd.

Such compulsory and wild pursuits provide a psychological exoskeleton. They are a substitute to quotidian existence. They afford the narcissist with an agenda, with timetables, goals, and faux achievements. The narcissist – the adrenaline junkie – feels that he is in control, alert, excited, and vital. He does not regard his condition as dependence. The narcissist firmly believes that he is in charge of his addiction, that he can quit at will and on short notice.

The narcissist denies his cravings for fear of "losing face" and subverting the flawless, perfect, immaculate, and omnipotent image he projects. When caught red handed, the narcissist underestimates, rationalises, or intellectualises his addictive and reckless behaviours – converting them into an integral part of his grandiose and fantastic False Self.

Thus, a drug abusing narcissist may claim to be conducting first hand research for the benefit of humanity – or that his substance abuse results in enhanced creativity and productivity. The dependence of some narcissists becomes a way of life: busy corporate executives, race car drivers, or professional gamblers come to mind.

The narcissist's addictive behaviours take his mind off his inherent limitations, inevitable failures, painful and much-feared rejections, and the Grandiosity Gap – the abyss between the image he projects (the False Self) and the injurious truth. They relieve his anxiety and resolve the tension between his unrealistic expectations and inflated self-image – and his incommensurate achievements, position, status, recognition, intelligence, wealth, and physique.

Thus, there is no point in treating the dependence and recklessness of the narcissist without first treating the underlying personality disorder. The narcissist's addictions serve deeply ingrained emotional needs. They intermesh seamlessly with the pathological structure of his disorganised personality, with his character faults, and primitive defence mechanisms.

Techniques such as "12 steps" may prove more efficacious in treating the narcissist's grandiosity, rigidity, sense of entitlement, exploitativeness, and lack of empathy. This is because – as opposed to traditional treatment modalities – the emphasis is on tackling the narcissist's psychological makeup, rather than on behaviour modification.

The narcissist's overwhelming need to feel omnipotent and superior can be co-opted in the therapeutic process. Overcoming an addictive behaviour can be – truthfully – presented by the therapist as a rare and impressive feat, worthy of the narcissist's unique mettle.

Narcissists fall for these transparent pitches surprisingly often. But this approach can backfire. Should the narcissist relapse – an almost certain occurrence – he will feel ashamed to admit his fallibility, need for emotional sustenance, and impotence. He is likely to avoid treatment altogether and convince himself that now, having succeeded once to get rid of his addiction, he is self-sufficient and omniscient.

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"Narcissistic Personality Disorder"  
Topic Page on Suite 101

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**Narcissistic Personality Disorder (NPD) At a Glance**

**By Sam Vaknin, Ph.D.**

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Most narcissists (75%) are men.

NPD is one of a "family" of personality disorders (formerly known as "Cluster B").

Other members: Borderline PD, Antisocial PD and Histrionic PD.

NPD is often diagnosed with other mental health disorders ("co-morbidity") - or with substance abuse, or impulsive and reckless behaviours ("dual diagnosis").

NPD is new (1980) mental health category in the Diagnostic and Statistics Manual (DSM).

There is only scant research regarding narcissism. But what there is has not demonstrated any ethnic, social, cultural, economic, genetic, or professional predilection to NPD.

It is estimated that 0.7-1% of the general population suffer from NPD.

Pathological narcissism was first described in detail by Freud. Other major contributors are: Klein, Horney, Kohut, Kernberg, Millon, Roningstam, Gunderson, Hare.

The onset of narcissism is in infancy, childhood and early adolescence. It is commonly attributed to childhood abuse and trauma inflicted by parents, authority figures, or even peers.

There is a whole range of narcissistic reactions - from the mild, reactive and transient to the permanent personality disorder.

Narcissists are either "Cerebral" (derive their narcissistic supply from their intelligence or academic achievements) - or "Somatic" (derive their narcissistic supply from their physique, exercise, physical or sexual prowess and "conquests").

Narcissists are either "Classic" - see definition below - or they are "Compensatory", or "Inverted" - see definitions here: "The Inverted Narcissist".

NPD is treated in talk therapy (psychodynamic or cognitive-behavioural). The prognosis for an adult narcissist is poor, though his adaptation to life and to others can improve with treatment. Medication is applied to side-effects and behaviours (such as mood or affect disorders and obsession-compulsion) - usually with some success.

Please read CAREFULLY!

The text in italics is NOT based on the Diagnostics and Statistics Manual, Fourth Edition (1994).

The text in italics IS based on "Malignant Self Love - Narcissism Revisited", second, revised, printing (2001)

An all-pervasive pattern of grandiosity (in fantasy or behaviour), need for admiration or adulation and lack of empathy, usually beginning by early adulthood and present in various contexts. Five (or more) of the following criteria must be met:

Feels grandiose and self-importance (e.g., exaggerates achievements and talents to the point of lying, demands to be recognized as superior without commensurate achievements)

Is obsessed with fantasies of unlimited success, fame, fearsome power or omnipotence, unequalled brilliance (the cerebral narcissist), bodily beauty or sexual performance (the somatic narcissist), or ideal, everlasting, all-conquering love or passion

Firmly convinced that he or she is unique and, being special, can only be understood by, should only be treated by, or associate with, other special or unique, or high-status people (or institutions)

Requires excessive admiration, adulation, attention and affirmation - or, failing that, wishes to be feared and to be notorious (narcissistic supply)

Feels entitled. Expects unreasonable or special and favourable priority treatment. Demands automatic and full compliance with his or her expectations

Is "interpersonally exploitative", i.e., uses others to achieve his or her own ends

Devoid of empathy. Is unable or unwilling to identify with or acknowledge the feelings and needs of others

Constantly envious of others or believes that they feel the same about him or her

Arrogant, haughty behaviours or attitudes coupled with rage when frustrated, contradicted, or confronted

Some of the language in the criteria above is based on or summarized from:

American Psychiatric Association. (1994). Diagnostic and statistical manual of mental disorders, fourth edition (DSM IV). Washington, DC: American Psychiatric Association.

The text in italics is based on:

Sam Vaknin. (2001). Malignant Self Love - Narcissism Revisited, second, revised, printing. Prague and Skopje: Narcissus Publication.

For the exact language of the DSM IV criteria - please refer to the manual itself !!!

Sam Vaknin is the author of "Malignant Self Love - Narcissism Revisited" and the editor of mental health categories in The Open Directory, Suite101, and searcheurope.com.

His web site: <http://samvak.tripod.com>

Frequently asked questions regarding narcissism: <http://samvak.tripod.com/faq1.html>

Narcissistic Personality Disorder on Suite101:  
<http://www.suite101.com/welcome.cfm/npd>

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