



Antisocial personality disorder

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www.nice.org.uk

About this information

NICE clinical guidelines advise the NHS on caring for people with specific conditions or diseases and the treatments they should receive. The information applies to people using the NHS in England and Wales.

This information explains the advice about the care and treatment of people with antisocial personality disorder that is set out in NICE clinical guideline 77.

In March 2013, the information for families or carers of children with conduct problems was removed. Information for children and young people with conduct problems, and for their parents or carers, is included in <u>Antisocial behaviour and conduct disorders in children and young people</u> (NICE clinical guideline 158). All other information remains the same.

Does this information apply to me?

Yes, if you:

- · have antisocial personality disorder
- are a family member or carer of someone with antisocial personality disorder.

The NICE guideline does not specifically look at treatments that are not normally available in the NHS or prison health services.

Your care

Your treatment and care should take into account your personal needs and preferences, and you have the right to be fully informed and to make decisions in partnership with your healthcare team. To help with this, your healthcare team should give you information you can understand and that is relevant to your circumstances. All healthcare professionals should treat you with respect, sensitivity and understanding and explain antisocial personality disorder and the treatments for it simply and clearly.

The information you get from your healthcare team should include details of the possible benefits and risks of particular treatments. You can ask any questions you want to and can always change your mind as your treatment progresses or your condition or circumstances change. Your own preference for a particular treatment is important and your healthcare team should support your choice of treatment wherever possible.

Your treatment and care, and the information you are given about it, should take account of any religious, ethnic or cultural needs you may have. It should also take into account any additional factors, such as physical or learning disabilities, sight or hearing problems, or difficulties with reading or speaking English. Your healthcare team should be able to arrange an interpreter or an advocate (someone who supports you in putting across your views) if needed.

If you agree, your family or carers should have the chance to be involved in decisions about your care. Family members and carers also have the right to the information and support they need in their roles as carers.

All treatment and care should be given with your informed consent. If, during the course of your illness, you are not able to make decisions about your care, your healthcare professionals have a duty to talk to your family or carers unless you have specifically asked them not to. Healthcare professionals should follow the Department of Health's advice on consent (http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/

<u>PublicationsPolicyAndGuidance/DH_103643</u>) and the code of practice for the Mental Capacity Act. Information about the Act and consent issues is available from <u>www.nhs.uk/CarersDirect/moneyandlegal/legal</u> In Wales healthcare professionals should follow advice on consent from the Welsh Government (<u>www.wales.nhs.uk/consent</u>).

Antisocial personality disorder

Some treatments may not be suitable for you, depending on your exact circumstances. If you have questions about specific treatments and options, please talk to a member of your healthcare team.

Antisocial personality disorder is the name given to a condition that affects a person's thoughts, emotions and behaviour. Antisocial means behaving in a way that is disruptive to, and may be harmful to, other people.

The symptoms of antisocial personality disorder may include:

- behaving unlawfully, leading to repeatedly being arrested and convicted (this is sometimes called offending behaviour)
- deceiving people
- behaving angrily and aggressively
- feeling agitated or depressed a lot of the time, and easily bored
- being impulsive (doing something without thinking of the consequences)
- behaving irresponsibly and exploiting or manipulating other people
- not caring about the safety and feelings of other people
- not feeling remorse when causing harm to others.

Not everyone with antisocial personality disorder will have all these symptoms.

People with antisocial personality disorder come from different backgrounds, but many have been brought up in a home where there was domestic abuse and violence, and other serious difficulties.

Some people with antisocial personality disorder may also have other conditions such as <u>depression</u>, <u>anxiety</u>, and problems with drugs and alcohol (see '<u>Can I receive treatments</u> for other conditions?').

The terms <u>psychopathy</u> and <u>severe personality disorder</u> are sometimes used to describe people with severe or extreme symptoms who pose a serious risk to other people.

What happens when I first see a healthcare professional about my symptoms?

If you think that your care does not match what is described in this information, please talk to a member of your healthcare team in the first instance.

If it is thought that you may have antisocial personality disorder, you should be offered an <u>assessment</u> with a specialist mental health professional.

During the assessment you should be asked questions about your thoughts, feelings and behaviour, and how you cope with any problems. You should also be asked about different areas of your life such as your relationships, life at home and at work or college, and any other problems such as depression and anxiety, and problems with drugs and alcohol. You may be asked to fill in a questionnaire. The person assessing you will also discuss with you whether you need <u>psychological treatment</u> (see '<u>What treatment should I be offered for antisocial personality disorder?</u>'), social care and support or help in finding a job or getting back to work. They should develop a plan of your treatment and care.

As part of the assessment, your healthcare professional may discuss with you any behaviour that may be harmful to yourself or others. You may be referred to a specialist who will ask you about any violent behaviour, any previous convictions or time spent in prison. They may also ask about any other conditions you may have and events in your life that make you feel stressed.

If you are diagnosed with antisocial personality disorder, healthcare professionals should discuss with you, and your family or carer if appropriate, what this means and how it might affect your life. They should explain that you should still receive treatment for any other mental health problems. You should be encouraged to attend and fully take part in

treatment for antisocial personality disorder and any other conditions.

If you have a learning or physical disability, and a healthcare professional thinks that you may have antisocial personality disorder, you may be offered an appointment with an expert in your disability. You should be offered the same services as other people with antisocial personality disorder, with adjustments made to the treatment where necessary.

Questions you might like to ask your healthcare team

- Why have I been given this diagnosis?
- Can I expect an improvement following treatment?
- Who can I contact in a crisis?
- Are there any specialist personality disorder services in my area?
- Are there any support organisations in my local area?
- Where can I access confidential advice and support if there is a problem with my healthcare?
- Can you provide any information for my family or carers?

Who will provide my treatment?

You may initially receive treatment from <u>mental health services</u> and other community services. If you are in prison or another institution you can receive treatment there. Your treatment and care may involve many different services so it should be coordinated properly by the people caring for you. You should be told about the different services involved and given information about them.

When you are receiving treatment for antisocial personality disorder you should not usually be transferred to another service or institution during treatment. If you are receiving treatment in prison or another institution, your treatment should continue once you leave the institution.

You should not usually have to stay in hospital for treatment for antisocial personality disorder, unless you experience a crisis, or if you have another condition as well as antisocial personality disorder. If you do need to stay in hospital, this should usually be for a short period only.

Your rights and your relationship with your healthcare team

You should not be excluded from any services because of a diagnosis of antisocial personality disorder or if you have a history of antisocial or offending behaviour.

Any information about antisocial personality disorder should be provided in your preferred language, as should psychological therapy and other treatments. Interpreters should be arranged if needed.

Your healthcare team should work with you to help you to make your own decisions about your treatment options and goals. You should be encouraged and supported to find solutions to your problems, even during a crisis.

Your healthcare team should build a relationship with you based on hope, optimism and trust, and explain that recovery is possible. Healthcare professionals should be non-judgemental, consistent and reliable.

Will my family or carers be involved in my treatment and care?

Healthcare professionals should ask you whether you wish your family or carers to be involved in your treatment and care. If you agree, your healthcare team should encourage them to be involved.

See 'Information for families or carers of people with antisocial personality disorder'.

What treatment should I be offered for antisocial personality disorder?

Some treatments may not be suitable for you, depending on your exact circumstances. If you have questions about specific treatments and options, please talk to a member of your healthcare team.

You may be offered psychological treatment in order to help you with problems such as impulsive and antisocial behaviour, and if you have problems relating to other people. Psychological treatment can help you to make positive changes to your thought processes and your behaviour.

If you have a history of offending behaviour, you may be offered a psychological treatment (such as one called 'reasoning and rehabilitation') that can help you to reduce offending and other antisocial behaviour. People with very serious and extreme symptoms (such as psychopathy and severe personality disorder) may also be offered this treatment.

You should be given support and encouragement to attend your meetings for psychological treatment and to complete the course. The treatment should be offered in a group with other people with similar problems, but a healthcare professional should also see you regularly on your own so that you can discuss how your treatment is progressing.

Help for young offenders

The evidence shows that psychological treatments for adults with antisocial personality disorder can also help young offenders (aged 17 years and younger) who are in care to reduce offending behaviour. The treatments should take place in a group of young people with similar problems.

Young offenders should be offered an appointment with mental health services for adults when they reach an appropriate age to assess whether they need treatment.

Should I be offered medication?

You should not usually be offered medication just to treat antisocial personality disorder or

for any related symptoms or behaviour, such as aggression, anger and impulsive behaviour. This is because there is no evidence that medication helps to relieve the symptoms of antisocial personality disorder and it may cause side effects.

However, you may be offered medication if you have other conditions, such as depression and anxiety (see 'Can I receive treatments for other conditions?').

Can I receive treatments for other conditions?

People with antisocial personality disorder often have other conditions, such as depression, anxiety, and drug and alcohol problems. If you have another condition or problem you should be offered treatment for it, such as psychological treatment and medication, whether or not you are receiving treatment for antisocial personality disorder or for psychopathy or severe personality disorder. Healthcare professionals should follow NICE's guidelines on treating these other conditions.

If you have a problem with drugs (such as cocaine, crack cocaine, amphetamines or heroin) you should be offered a psychological treatment, such as an <u>incentives</u> programme.

If you are in prison or another institution, and you have a problem with drugs or alcohol, you may be offered a place in a specialist treatment programme.

Questions about the treatment

- Why have you offered me this particular type of treatment?
- What are the pros and cons of having this treatment?
- What will the treatment involve?
- How will the treatment help me? What effect will it have on my symptoms and everyday life? What sort of improvements might I expect?
- How long will it take to have an effect?

- · Are there any risks associated with this treatment?
- What are my options for taking treatments other than the recommended treatment?
- What will happen if I choose not to have the recommended treatment?
- Is there some written material (such as a leaflet) about the treatment that I can have?

Information for families or carers of people with antisocial personality disorder

Caring for a person with antisocial personality disorder can be difficult and challenging. Depending on the circumstances, families or carers can play an important part in supporting a person with antisocial personality disorder, but they may also need help and support themselves. Healthcare professionals should tell you about any local support groups for families or carers. They should address your needs, particularly the impact of antisocial behaviour and any drug or alcohol problems on you and the rest of the family. Healthcare professionals should also take account of the needs of any children in the family.

It is up to the person with antisocial personality disorder whether they would like families or carers involved in their treatment. They might ask for you to be involved or this might be encouraged by their healthcare professional. But if the person with antisocial personality disorder would prefer to cope on their own, you are still entitled to a <u>carer's assessment</u> and support.

Questions for families or carers

 Can you give me some information about antisocial personality disorder and its treatments?

- Am I entitled to be told about the treatment my family member or friend is having?
- What can I/we do to help and support the person with antisocial personality disorder?
- Can you give me any information about how to access help and support in a crisis?
- Is there any additional support that I/we as carer(s) might benefit from or are
- entitled to?

Glossary

Anxiety

Feelings of worry or fear that can be difficult to control.

Assessment

A meeting with a healthcare professional, who will ask questions about a person's physical and mental health to establish what the illness is, how severe it is and what treatments would suit the person best. An assessment may involve a physical examination, tests or a questionnaire.

Carer

A person who has regular close contact with the person with antisocial personality disorder and is involved in their care. This could be a family member, guardian, partner or friend.

Carer's assessment

A meeting in which a carer can discuss with social services the help and support they

need in their role as a carer. Carers have a legal right to have their needs assessed.

Depression

A type of mental health problem that causes a loss of pleasure in things that were once enjoyable, withdrawal from family and friends, negative and self-critical thoughts, and other symptoms, such as feeling tearful, irritable or tired, poor appetite, and sleep problems.

Incentives programme

A psychological treatment for people who have a problem with drugs. The person may be given a voucher (worth a few pounds to be exchanged for items that encourage a healthy, drug-free lifestyle) or a privilege (such as a take-home dose of methadone) if they have a negative test showing that they have not used illegal drugs. The person is tested regularly and continues to receive vouchers or privileges for every negative test until they have reached their goal.

Mental health services

A group of professionals or a healthcare service that includes nurses who may visit people in their own homes, psychiatrists, psychologists, occupational therapists and support workers.

Offending behaviour

Behaviour that leads to breaking the law and often a criminal conviction.

Psychological treatment

A general term used to describe meeting with a healthcare professional to talk about feelings and moods.

Psychopathy

A serious form of personality disorder.

Severe personality disorder

A serious form of personality disorder, sometimes called 'dangerous and severe personality disorder'.

More information

The organisation below can provide more information and support for people with antisocial personality disorder. Please note that NICE is not responsible for the quality or accuracy of any information or advice provided by this organisation.

Rethink, 0300 5000 927, <u>www.rethink.org</u>

You can also go to NHS Choices (www.nhs.uk) for more information.