

# Narcissistic Mortification, Shame, and Fear

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## Abstract

All mental health issues arise from confusing external and internal objects (examples: that psychosis, narcissism). I suggest that there is a single clinical entity Personality Disorder with overlays (narcissistic, antisocial, borderline, histrionic).

**Keywords:** Narcissistic mortification; Personality disorder; Mental health

## Introduction

Each overlay has 3 states: overt, collapsed, covert. Transition between the states and the overlays is a reaction to gaps (reality intrusion or failure) and narcissistic mortification. Covert states aspire to become overt. Covert states are not self-efficacious. They fail to secure:

- Narcissistic Supply (NPD)
- Goals (AsPD)
- Sex Partners (HPD)
- Relationships/intimacy (BPD)

Transition from overt to covert and back via collapse and mortification.

## Covert NPD

The Inverted Narcissist is a co-dependent who depends exclusively on narcissists (narcissist-co-dependent). If you are living with a narcissist, have a relationship with one, if you are married to one, if you are working with a narcissist, etc. – it does NOT mean that you are an inverted narcissist.

To "qualify" as an inverted narcissist, you must CRAVE to be in a relationship with a narcissist, regardless of any abuse inflicted on you by him/her. You must ACTIVELY seek relationships with narcissists and ONLY with narcissists, no matter what your (bitter

and traumatic) past experience has been. You must feel EMPTY and UNHAPPY in relationships with ANY OTHER kind of person. Only then, and if you satisfy the other diagnostic criteria of a Dependent Personality Disorder, can you be safely labelled an "inverted narcissist".

Not all covert narcissists are inverted narcissists. But all inverted narcissists are covert ("shy", "fragile") narcissists. They are self-centred, sensitive, vulnerable, and defensive, or hostile, and paranoid. They harbour grandiose fantasies and have a strong sense of entitlement. They tend to exploit other, albeit stealthily and subtly. Covert narcissists are aware of their innate limitations and shortcomings and, therefore, constantly fret and stress over their inability to fulfil their unrealistic dreams and expectations. They avoid recognition, competition, and the limelight for fear of being exposed as frauds or failures. They are ostentatiously modest.

Covert narcissists often feel guilty over and ashamed of their socially-impermissible aggressive urges and desires. Consequently, they are shy and unassertive and intensely self-critical (perfectionist). This inner conflict between an overwhelming sense of worthlessness and a grandiose False Self results in mood and anxiety disorders. They team up with classic narcissists (see below), but, in secret, resent and envy them.

Contrary to misinformation spread by "experts" online, covert narcissists are not cunning and manipulative. Classic narcissists are: they often disguise their true nature effectively, knowingly, and intentionally. They are persistent actors with great thespian skills. Not so the covert narcissist: he suppresses his true nature because he lacks the confidence to assert it. His is not a premeditated choice: can't help but shy away. The covert narcissist is his own worst critic. Lidija Rangelovska suggests that covert narcissism may develop late in life (during adolescence or

even early adulthood) as a reaction to abuse by peers or to social rejection.

Inverted narcissism may be the outcome of arrested narcissistic development: the formation of the False Self is disrupted and incomplete and the inverted narcissist is forced to resort to and depend upon the False Self of another narcissist (her partner) in order to regulate her sense of self-worth.

Compare the classic narcissist to the covert narcissist in this table [1-11]:

	Arrogant/Overt	Shy/Covert
Self-Concept	Grandiosity; preoccupation with fantasies of outstanding success; undue sense of uniqueness; feelings of entitlement; seeming self-sufficiency	Inferiority; morose self-doubts; marked propensity toward feeling ashamed; fragility; relentless search for glory and power; marked sensitivity to criticism and realistic setbacks
Interpersonal Relationships	Numerous but shallow relationships; intense need for tribute from others; scorn for others, often masked by pseudohumility; lack of empathy; inability to genuinely participate in group activities; valuing of children over spouse in family life	Inability to genuinely depend on others and trust them; chronic envy of others talents, possessions, and capacity for deep object relations; lack of regard for generational boundaries; disregard for others time; refusal to answer letters
Social Adaptation	Socially charming; often successful; consistent hard work done mainly to seek admiration (pseudo-sublimation); intense ambition; preoccupation with appearances	Nagging aimlessness; shallow vocational commitment; dilettante-like attitude; multiple but superficial interests; chronic boredom; aesthetic taste often ill-informed and imitative
Ethics, Standards, and Ideals	Caricatured modesty; pretended contempt for money in real life; idiosyncratically and unevenly moral; apparent enthusiasm for sociopolitical affairs	Readiness to shift values to gain favor; pathological lying; materialistic lifestyle; delinquent tendencies; inordinate ethnic and moral relativism; irreverence toward authority
Love and Sexuality	Marital instability; cold and greedy seductiveness; extramarital affairs and promiscuity; uninhibited sexual life	Inability to remain in love; impaired capacity for viewing the romantic partner as a separate individual with his or her own interests, rights, and values; inability to genuinely comprehend the incest taboo; occasional sexual perversions
Cognitive Style	Impressively knowledgeable; decisive and opinionated; often strikingly articulate; egocentric perception of reality; love of language; fondness for shortcuts to acquisition of knowledge	Knowledge often limited to trivia (headline intelligence); forgetful of details, especially names; impaired in the capacity for learning new skills; tendency to change meanings of reality when facing a threat to self-esteem; language and speaking used for regulating self-esteem

## Collapsed NPD

As Horney pointed out, the child is dehumanized and instrumentalized. His parents love him not for what he really is - but for what they wish and imagine him to be: the fulfillment of their dreams and frustrated wishes. The child becomes the vessel of his parents' discontented lives, a tool, the magic brush with which they can transform their failures into successes, their humiliation into victory, their frustrations into happiness. The child is taught to ignore reality and to occupy the parental fantastic space. Such an unfortunate child feels omnipotent and omniscient, perfect and brilliant, worthy of adoration and entitled to special treatment. The faculties that are honed by constantly brushing against bruising reality - empathy, compassion, a realistic assessment of one's abilities and limitations, realistic expectations of oneself and of others, personal boundaries, team work, social skills, perseverance and goal-orientation, not to mention the ability to postpone gratification and to work hard to

achieve it - are all lacking or missing altogether. The child turned adult sees no reason to invest in his skills and education, convinced that his inherent genius should suffice. He feels entitled for merely being, rather than for actually doing (rather as the nobility in days gone by felt entitled not by virtue of its merit but as the inevitable, foreordained outcome of its birth right). In other words, he is not meritocratic - but aristocratic. In short: a narcissist is born.

But such a mental structure is brittle, susceptible to criticism and disagreement, vulnerable to the incessant encounter with a harsh and intolerant world. Deep inside, narcissists of both kinds (those wrought by "classic" abuse and those yielded by being idolized) - feel inadequate, phony, fake, inferior, and deserving of punishment. This is Millon's mistake. He makes a distinction between several types of narcissists. He wrongly assumes that the "classic" narcissist is the outcome of overvaluation, idolization, and spoiling and, thus, is possessed of supreme, unchallenged, self-confidence, and is devoid of all self-doubt. According to

Millon, it is the "compensatory" narcissist that falls prey to nagging self-doubts, feelings of inferiority, and a masochistic desire for self-punishment. Yet, the distinction is both wrong and unnecessary. There is only ONE type of narcissist - though there are TWO developmental paths to it. And ALL narcissists are besieged by deeply ingrained (though at times not conscious) feelings of inadequacy, fears of failure, masochistic desires to be penalized, a fluctuating sense of self-worth (regulated by Narcissistic Supply), and an overwhelming sensation of fakeness. The Grandiosity Gap (between a fantastically grandiose - and unlimited - self-image and actual - limited - accomplishments and achievements) is grating. Its recurrence threatens the precariously balanced house of cards that is the narcissistic personality. The narcissist finds, to his chagrin, that people out there are much less admiring, accommodating and accepting than his parents. As he grows old, the narcissist often become the target of constant derision and mockery, a sorry sight indeed. His claims for superiority appear less plausible and substantial the more and the longer he makes them.

Pathological narcissism - originally a defense mechanism intended to shield the narcissist from an injurious world - becomes the main source of hurt, a generator of injuries, counterproductive and dangerous. Overwhelmed by negative or absent Narcissistic Supply, the narcissist is forced to let go of it.

The narcissist then resorts to self-delusion. Unable to completely ignore contrarian opinion and data - he transmutes them. Unable to face the dismal failure that he is, the narcissist partially withdraws from reality. To soothe and salve the pain of disillusionment, he administers to his aching soul a mixture of lies, distortions, half-truths and outlandish interpretations of events around him. These solutions can be classified thus:

### **The delusional narrative solution**

The narcissist constructs a narrative in which he figures as the hero - brilliant, perfect, irresistibly handsome, destined for great things, entitled, powerful, wealthy, the centre of attention, etc. The bigger the strain on this delusional charade - the greater the gap between fantasy and reality - the more the delusion coalesces and solidifies.

Finally, if it is sufficiently protracted, it replaces reality and the narcissist's reality test deteriorates. He withdraws his bridges and may become schizotypal, catatonic, or schizoid.

### **The antisocial solution**

The narcissist renounces reality. To his mind, those who pusillanimously fail to recognize his unbound talents, innate superiority, overarching brilliance, benevolent nature, entitlement, cosmically important mission, perfection, etc. - do not deserve consideration. The narcissist's natural affinity with the criminal - his lack of empathy and compassion, his deficient social skills,

his disregard for social laws and morals - now erupt and blossom. He becomes a full fledged antisocial (sociopath or psychopath). He ignores the wishes and needs of others, he breaks the law, he violates all rights - natural and legal, he holds people in contempt and disdain, he derides society and its codes, he punishes the ignorant ingrates - that, to his mind, drove him to this state - by acting criminally and by jeopardizing their safety, lives, or property.

### **The Paranoid schizoid solution**

When narcissism fails as a defense mechanism, the narcissist develops paranoid narratives: self-directed confabulations which place him at the center of others' allegedly malign attention. The narcissist becomes his own audience and self-sufficient as his own, sometimes exclusive, source of narcissistic supply.

The narcissist develops persecutory delusions. He perceives slights and insults where none were intended. He becomes subject to ideas of reference (people are gossiping about him, mocking him, prying into his affairs, cracking his e-mail, etc.). He is convinced that he is the centre of malign and mal-intentioned attention. People are conspiring to humiliate him, punish him, abscond with his property, delude him, impoverish him, confine him physically or intellectually, censor him, impose on his time, force him to action (or to inaction), frighten him, coerce him, surround and besiege him, change his mind, part with his values, victimize or even murder him, and so on.

Some narcissists withdraw completely from a world populated with such minacious and ominous objects (really projections of internal objects and processes). They avoid all social contact, except the most necessary. They refrain from meeting people, falling in love, having sex, talking to others, or even corresponding with them. In short: they become schizoids - not out of social shyness, but out of what they feel to be their choice. "This evil, hopeless world does not deserve me" - goes the inner refrain - "and I shall waste none of my time and resources on it."

### **The paranoid aggressive (explosive) solution**

Other narcissists who develop persecutory delusions, resort to an aggressive stance, a more violent resolution of their internal conflict. They become verbally, psychologically, situationally (and, very rarely, physically) abusive. They insult, castigate, chastise, berate, demean, and deride their nearest and dearest (often well wishers and loved ones). They explode in unprovoked displays of indignation, righteousness, condemnation, and blame. Theirs is an exegetic Bedlam. They interpret everything - even the most innocuous, inadvertent, and innocent comment - as designed to provoke and humiliate them. They sow fear, revulsion, hate, and malignant envy. They flail against the windmills of reality - a pathetic, forlorn, sight. But often they cause real and lasting damage - fortunately, mainly to themselves.



## The masochistic avoidant solution

The narcissist is angered by the lack of narcissistic supply. He directs some of this fury inwards, punishing himself for his "failure". This masochistic behavior has the added "benefit" of forcing the narcissist's closest to assume the roles of dismayed spectators or of persecutors and thus, either way, to pay him the attention that he craves.

Self-administered punishment often manifests as self-handicapping masochism - a narcissistic cop-out. By undermining his work, his relationships, and his efforts, the increasingly fragile narcissist avoids additional criticism and censure (negative supply). Self-inflicted failure is the narcissist's doing and thus proves that he is the master of his own fate.

Masochistic narcissists keep finding themselves in self-defeating circumstances which render success impossible - and **"an objective assessment of their performance improbable"** (Millon, 2000). They act carelessly, withdraw in mid-effort, are constantly fatigued, bored, or disaffected and thus passive-aggressively sabotage their lives. Their suffering is defiant and by "deciding to abort" they reassert their omnipotence.

The narcissist's pronounced and public misery and self-pity are compensatory and **"reinforce (his) self-esteem against overwhelming convictions of worthlessness"** (Millon, 2000). His tribulations and anguish render him, in his eyes, unique, saintly, virtuous, righteous, resilient, and significant. They are, in other words, self-generated narcissistic supply.

Thus, paradoxically, the worst his anguish and unhappiness, the more relieved and elated such a narcissist feels! [12-27].

## Collapsed Covert NPD

Collapse leads to mortification and disables the False Self. This immediately results in ostentatious indifference ("doormat"), no enforced boundaries, extreme conflict aversion, and the amelioration or reduction of dissonant anxiety. The Covert then embarks on reconstructing the False Self via antisocial displays of defiant, impulsive, reckless, and callous misconduct. Another round of collapse and mortification follow and the False Self is restored.

The Covert then reverts to Overt NPD.

## The Collapsed Histrionic (Collapsed HPD)

The collapsed histrionic is usually a woman with body image (somatoform) issues and a low sense of self-worth. Yet, she still needs men and uses them to regulate her flagging self-esteem and deficient self-confidence. This creates a permanent dissonance and anticipatory anxiety as such a woman expects fully to be rejected and humiliated by men.

Low self-esteem often leads to an impaired reality test: the collapsed histrionic misreads environmental, social, and sexual

cues and often ends up being mocked, shunned, abused, or sexually assaulted by men. She compensates for her insecurities with brazen defiance and grandiosity as well as substance abuse, all of which compound her ability to properly gauge reality.

Her feelings of inferiority and inadequacy lead the collapsed histrionic to social withdrawal and reclusiveness. She rarely dates men and when she does, she aggresses against, pushes away, and abuses alpha males, even when they are genuinely interested in her ("preemptive abandonment"). Instead, the collapsed histrionic picks up "safe" males: weak, ugly losers, who are very unlikely to painfully reject her.

Histrionic Personality Disorder (HPD) combines traits of both Narcissistic and Antisocial (psychopathic) personality disorders. It, therefore, stands to reason that these three cluster B ("dramatic") stalwarts share the same etiology and psychodynamics.

Many histrionics ("attention whores") use the opposite sex - their attention, infatuation, and arousal - to regulate their emotions, moods, affect, and sense of self-worth (self-esteem and self-confidence). Potential mates are their "histrionic supply". Similarly, when roundly and resolutely rejected, collapsed histrionics react with "histrionic rage". They resort to in your face defiance, often by triangulating with a third person in order to provoke jealousy or grievously hurt the frustrating and rejecting object.

The histrionic's aggression is focused on restoring his or her grandiosity via a new and ostentatious sexual conquest. But it can and does wear many other, mostly passive-aggressive or reckless forms or behaviors: compulsive shopping ("shopaholism"), gambling, lying, sabotaging, procrastinating, substance abuse, verbal abuse, brutal honesty, offensive humor and mockery, and so on.

When a woman with mental health issues is sexually or otherwise rejected by her intimate partner she acts out in one of two typical ways. This is especially true if the husband also justifies his sadistic cruelty by adding abuse & overt humiliation to injury: "You are ugly, you do not turn me on, you do not know how to be a woman, you are stupid & repulsive, you are whorish, you do not understand my sexual & psychological needs." The union then devolves into a power match. The personality disordered (narcissistic, histrionic, borderline) woman seeks to obtain two goals to redress her grievances & her sense of offended justice.

The first goal is to disprove her partner's evaluation of her & restore her self-esteem & self-confidence by proving mainly to herself how other men desire her. This she accomplished by becoming a flirtatious, promiscuous & seductive cockteaser.

The second goal is to punish her (non) intimate partner by rendering "his woman" (herself) a slut - or by transmogrifying into a non-woman.



By sexually egregiously misbehaving with multiple men, the rejected woman transforms herself into a "whore". This is her way to penalize her abuser by devaluing & debasing herself (his "property"). But some women choose the exact opposite solution: they passive-aggressively stop being women altogether. In a way, they unconsciously adopt the abuser's view of them as repellent & validate it. They neglect their appearance, abandon their personal hygiene, dress in tattered & shabby garb, put on no makeup, are physically inert, and neglect their duties - including in business, childbearing & childrearing.

This is their way of defying their mean and nasty partner: "You say that I am not a woman? Well, here you are, I stop being one".

These women eradicate their femininity & womanhood as a way of getting back at their mistreating spouse.

### Covert Borderline Personality Disorder (BPD)

The shy or quiet borderline internalizes her struggles rather than externalize them. She becomes the exclusive target of her own turmoil. She "acts in". Both the classic and covert borderline (many of the latter are men) act out. Here is a table which compares the clinical features of the two subtypes. It is based on the schematic present by Arnold M. Cooper and S. Akhtar in 1989 for classic vs. covert narcissist.

	Covert/Antisocial	Classic/ Dysregulated
<b>Self-Concept And Emotional Regulation</b>	2. false self-grandiosity; 3. preoccupation with fantasies of outstanding love; undue sense of uniqueness; feelings of entitlement; alloplastic defenses; 4. internal locus of control; seeming self-sufficiency; 9. mood lability; 10. emotional dysregulation and rationalization or reactance and defiance, contumaciousness; 12. low boredom threshold and tolerance; 14. externalizing-internalizing; 15. No suicidal ideation, aggression other-directed; 16. No self-mutilation, hypochondriasis, addictive behaviors; 17. dissociative self-states, mainly: selective attention, confabulation, repression or denial, primary psychopathic protector	1. identity diffusion; 2. inferiority; 3. morose self-doubts and ego-dystony or ego discrepancy ("wrongness"), autoplatic defenses; 4. external locus of control; 5. marked propensity toward feeling ashamed, guilty, or to blame; 6. fragility, vulnerability; 7. relentless search for safety and completion; 8. marked sensitivity to criticism and realistic setbacks; 9. mood lability; 10. emotional dysregulation and numbing and dysempathy; 11. alexithymia; 12. low frustration threshold and tolerance; 13. depression and anxiety; 14. internalizing-externalizing; 15. suicidal tendencies; 16. self-harm and substance abuse or self-trashing (like egregious promiscuity) 17. dissociative self-states, mainly: realization, depersonalization, or amnesia
<b>Interpersonal Relationships</b>	1. paranoid ideation; 2. numerous but shallow relationships; intense need for love from others, people pleasing; lack of real empathy in primary psychopathic phase; valuing of children over spouse in family life; 7. inability to genuinely participate in group activities; 9. passive-aggressive, sullen, surly, self-denying, behaviors; cunning and premeditated malevolence; 10. intermittent reinforcement; 11. scorn for others, often masked by pseudohumility; 12, 17. histrionic attention seeking; 13. recklessness aimed at hurting or affecting others; 14. sadistic-punitive or goal-oriented triangulation; 15, 16. object inconstancy: idealize-devalue-discard-revert or replace	1. inability to genuinely depend on others and trust them, hypervigilance; 2. instant or fake intimacy (sometimes in casual sex) 3. abandonment anxiety (impostor syndrome); 4. engulfment anxiety and fear of intimacy; 5. rejection sensitivity; 6. effortful control; 7. chronic envy of others talents, possessions, and capacity for deep object relations; 8. lack of regard for generational boundaries; 9. disregard for others' time, limitations, obligations, and resources (unreasonably demanding); 10. unpredictable, 11. explosive behavior;



		12. impulsivity; 13. recklessness; 14. interpersonal triangulation; people pleasing; 15. approach-avoidance repetition compulsion and preemptive abandonment; 16. object inconstancy; 17. drama queens
<b>Social Adaptation</b>	2. Socially charming, charismatic; 3. consistent hard work done mainly to seek admiration (pseudo- sublimation); 4. intense ambition; 5. often successful; 7. preoccupation with appearances	1. nagging aimlessness; 2. social anxiety; 3. shallow vocational commitment; 4. dilettante-like attitude; 5. multiple but superficial interests; 6. chronic boredom; 7. aesthetic taste often ill-informed and imitative
<b>Ethics, Standards, and Ideals</b>	1. idiosyncratically and unevenly moral, caricatured modesty, activism and apparent enthusiasm for sociopolitical affairs; 2. inordinate ethnic and moral relativism; 3. pretended contempt for money in real life, feigned spirituality and “guru” status; 4. irreverence toward authority	1. readiness to shift values to gain favor; 2. pathological lying; 3. materialistic lifestyle; 4. delinquent tendencies;
<b>Love and Sexuality</b>	1. marital instability; 2. cold and greedy seductiveness; 3. extramarital affairs and promiscuity; 4. uninhibited sexual life	1. inability to remain in love; 2. impaired capacity for viewing the romantic partner as a separate individual with his or her own interests, rights, and values; 3. inability to genuinely comprehend the incest taboo; 4. occasional sexual perversions
<b>Cognitive Style</b>	1. dichotomous thinking; 2. splitting; 4. impressively knowledgeable; 5. egocentric perception of reality; 6. fondness for shortcuts to acquisition of knowledge 7. decisive and opinionated; 8. love of language, often strikingly articulate;	1. dichotomous thinking; 2. splitting; 3. catastrophizing; 4. knowledge often limited to trivia (headline intelligence); 5. forgetful of details, especially names; 6. impaired in the capacity for learning new skills; 7. tendency to change meanings of reality when facing a threat to self-esteem; 8. language and speaking used for regulating self-esteem

## Covert AsPD

The Covert Antisocial or Psychopath is a composite of Covert NPD+Classic BPD which together yield secondary psychopathy. This raises the distinct possibility that AsPD is not clinical entity or diagnostic category but a culture-bound, derivative comorbidity.

Borderline and Histrionic personality disorders may be manifestations in females of secondary type psychopathy (as measured by Factor 2 of the PCL-R test). In other words: Borderline and Histrionic women may actually be psychopaths. A growing body of recent studies supports this startling conclusion.

Survivors of CPTSD also manifest psychopathic and narcissistic behaviors (overlay)

Intimate partners won't not surprised: impulsivity, defiant grandiosity, antisocial and interpersonal aggression, manipulateness, dysregulated negative emotionality, lack of object constancy (object impermanence), attachment dysfunctions, hostility, splitting (dichotomous thinking), high levels of distress, anxiety, depression, and substance abuse are all typical of and common among secondary psychopaths - and among Borderlines. These women also defy gender roles and behavioral norms (act masculine). But the Borderline adds a twist to this cocktail: dissociation. Whenever stress levels and inner dissonance become intolerable, she hands over control to her

inner psychopath, depersonalizes, derealizes, or develops amnesia.

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