Letter to the Editor

The term of narcissistic depression has been recently used by investigators Ogawa and Ito (1). The acceptance of this term in Japan, an Eastern country like Turkey, is an interesting point. As it is known, suicide cases as a consequence of narcissistic injury (known as indignity in the society) are significantly higher in the Japanese society. Although narcissistic injury does not always result in suicide in Turkey, it causes important destructions either in the family or in the society. To the best of our knowledge, there is no study performed on this subject till now, except this one. As clinicians, we know that these kinds of cases and injuries experienced by narcissistic individuals are encountered too frequently. Tritt et al. (2) talk about presence of relation between narcissistic personality and depressive temperament. According to these authors, narcissistic patient can be present in two situations. The first situation is “narcissistic vulnerability-negative affect” state and it emerges in “when narcissistic needs are not met” situation; the second situation is “narcissistic grandiosity-positive affect” state and it is related to self-enhancement. We are interested in the first situation, namely, the “narcissistic vulnerability-negative affect” state. This situation is seen together with depressive temperament or with a true statement, it causes depressive temperament.

Well, how does this happen? As it is known, narcissistic individuals can remain offended against the people closest to him/her for months from time to time or even years as a consequence of injury. closest to him/her for months from time to time or for years from time to time as a consequence of injury. In this case, the individual loses the objects he/she invests in most in due course of time and gradually becomes isolated. In one sense, this means the loss of investment, realized through many years, in a day. Again, as it is well known, the basic reason causing depression in psychodynamic theory is loss. Since a group of narcissistic individuals lose object very easily, they settle on a ground that may fall into depression easily (3). Probably, grandiosity is not seen in social relations of these narcissistic individuals too much, the individual is anxious about protecting grandiose self rather than satisfying it and, therefore, fragility and negative affect remain at the forefront of the social relations. Because of this reason, the individual cannot achieve satisfaction with his/her surroundings easily and cannot keep his/her reserves in the social relations strong, surrounding people turn to be individuals who should be avoided rather than to be accepted as satisfying individuals and, object relations loss is experienced.

On the other hand, the patients with marked grandiose attitudes seek for social relation to satisfy this grandiosity and satisfy themselves with passive-dependent individuals using the vitality required by this relation. Therefore, it is more difficult for this second group to lose object and fall into depression. These individuals have the intelligence to understand the needs of the passive-dependent individuals well and satisfy their own grandiose selves by meeting these needs partially or completely.

While there are narcissistic cases belonging to the second group in our country, the cases of the first group are much more frequent, especially in the villages. In some clinical cases, we can encounter married couples living in the same house, but not talking to each other for ten or twenty years. Probably, one or both spouses are vulnerable narcissistic individuals with negative affect.
As it is quoted by Pelissolo and Corruble (3), the psychobiological model of personality developed by Cloninger, including four dimensions of temperament and three dimensions of character, allows exploring personality factors associated with depressive disorders. Three main dimensions of temperament are: novelty seeking (NS), i.e. the tendency towards excitement in response to novel or rewarding stimuli; harm avoidance (HA), which represents the tendency to respond intensely to signals of adverse stimuli, and reward dependence (RD) reflecting the tendency to respond intensely to signals of reward and to maintain behavior previously associated with reward.

If we take the Cloninger’s grouping into consideration, it is not hard to predict that “narcissistic vulnerability-negative affect” group shows HA temperament dimension much more frequently, while the patients belonging to the second group narcissistic personality, described as “narcissistic grandiosity-positive affect” by Tritt, will have NS and RD temperament dimensions. We can assume that this latter group seeking for novelty and reward lives in the cities contrary to the first group. Achieving novelty and reward can only be possible in case of presence of rich variation in vertical and horizontal organization of the society. There is a strong possibility that narcissistic individuals with HA, which we consider as the temperament dimension of the first group, are present more frequently in narrow environments, namely villages, with unique social organizations and personalities. Therefore, the narcissistic personalities in the Turkish society, which recently has begun to abandon the peasant lifestyle, are an important source of depression with their negative affects and HA features.

Depression with its low energy and micromanic delusional clinical structure is not a condition that narcissistic individuals can cope with easily. Consequently, it is more possible for this patient group to slip into an ego-protective psychosis by skipping the depression (4). It may be stated that pseudopsychosis cases frequently seen in people with histrionic personality disorder in Turkey also have psychodynamic infrastructure similar to that in individuals with such ego-protective psychosis. Ego-protective psychosis and pseudopsychosis are clinical pictures nosologically close to each other.

References