EDITORIAL COMMENT

THE METHODOLOGICAL WIND STIRS THE CONCEPTUAL CLIMATE

Research means re-examination as well as exploration. In psychiatry both aspects have undergone renewed emphasis within the last two decades, with the result that psychiatric research assumes a more honorable and important place today than formerly. The astute and confident clinician must now share primacy of place with the doubting investigator.

This change in status is due to various influences. Among these are advances in scientific methodology, in therapeutic techniques and in new ways of conceptualizing. The methodological progress has come from the basic sciences which provided electronic equipment for new methods, making possible subtle and speedy biochemical measurements and the numerical computing of various types of information from new therapeutic techniques embodied in the psychoactive drugs and the elaboration and application of statistical techniques. The net impact has been not only the alleviation of clinical conditions, but the cultivation of a specific atmosphere not previously prevalent in many clinical psychiatric settings. This is wholly salutary and has spread to invigorate criticism of various social therapies which are also developing.

The fresh concepts, that seem suddenly to abound, emanate from the flourishing biological and social sciences, including ethology. Who would have foreseen a decade ago the emergence of such a convincing account of the biology of aggression as is now available in the writings of Lorenz* and others! At the same time, there is a loosening of ties to great men’s authoritarian edicts, so that a veritable renaissance of re-examination of old ideas is as much a part of the present situation as the accumulation of new data by the process of methodological exploration. The dissolution of former certainties can be seen as not only a result of research—which has been mainly empirical, applied and pragmatic—but also as stemming from the failure of a variety of assertions to stand the test of experience and fresh scrutiny. This phenomenon is, of course, not confined to psychiatry, but is manifest in many social and cultural events on four continents.

Those areas in psychiatry that have been subject to questioning include the orthodox Kraepelinian nosology, which has been accumulating opponents despite the lack of a suitable alternative. There are renewed attempts to jettison categories and establish fresh frames of reference with the attendant danger of substituting an attractive new nebulousness for ferrous-cast patterns. At the same time, vigorous espousal of psychoanalytic tenets has given way to defensive withdrawal or honest avowal of the inadequacy or tentative nature of constructs formerly advanced as solid truth. Re-evaluation of these constructs, however, has been undertaken by an increasing number of scientists schooled in one or more of the biological sciences, but with sympathy for the complex and "softer" data of clinical psychiatry. They are paying serious attention to analytic and other hypotheses and subjecting them to objective testing where possible. Limitations of method have contributed to the testing of many fruitful hypotheses in the past. But it must be confessed that many have been more enamored with reconstructing amnestic data into an intelligible if dubiously verifiable story than with undertaking the thorny task of establishing the validity of data. Rangell* has provided succinct comments on the need for research and the broadening of sympathy with other sciences by psychoanalysts.

As part and parcel of this wave of doubting, the once hopeful liaison called psychosomatic medicine has been somewhat in a trough of despond. The early proposal was for a marriage between psychodynamic principles and physiological processes. It was hoped that this would lead to a better understanding of emotional troubles by the practitioner and a revelation for psychiatrists of what bodily processes change with mental ills. Neither ambition has been realized. Medicine becomes more technical and psychiatry still seeks to understand psychological processes in physiological terms and vice versa. The ancient body-mind problem has become acute and no amount of somatic dodging can bypass the issue. This is where new theoretical constructs must develop as Engel** has recently emphasized. This somewhat dismal if brief picture of disillusionment actually represents progress. Much good work and hard thinking have dispelled illusion