

Doctors of the Mind

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PSYCHOANALYTIC THERAPY, PRINCIPLES AND APPLICATION. By Franz Alexander, M.D., Thomas M. French, M.D., with staff members of the Institute for Psychoanalysis, Chicago. 353 pp. New York: The Ronald Press. \$5.

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THE increasing consciousness since the war of the frailty of human adjustment has served at least one important purpose: to a large extent it has broken down the obstacle that prevented men from going to psychoanalysts, whom they regarded as doctors for the insane. At the present time, the obstacle that prevents many men and women from going to psychoanalysts is a more serious and intrinsic one. This is the time-money factor. Normal procedures in psychotherapy consume too much of the analyst's time and too much of the patient's time and money.

In isolated instances analysts have had some success with patients after only a few consultations. This had been the experience of Doctors Alexander and French, and the staff that worked with them at the Chicago Institute. Encouraged by their findings, the institute doctors set themselves the task of isolating the factors that contribute to

brief therapy. Mrs. Albert D. Lasker, "quick to see in the institute's first observations implications for improving the mental health of the country," established a fund for the experimental project. The results, based on over 500 cases studied since 1938, are to be found in "Psychoanalytic Therapy."

In many instances, the analysts found that it was not necessary to recall all the events that contributed to a patient's neurotic reactions, and that they were able to sift out all the secondary and marginal causes of his emotional difficulties. These findings are, of course, counter to traditional psychotherapeutic procedures, but, the authors feel, not at all counter to the spirit of Freud.

IT was characteristic of the man that Freud experimented freely and continuously with both his theories and techniques, revising and rebalancing toward greater accuracy and effectiveness. His more outstanding pupils saw this as a part of the Freudian tradition and avoided the rut of slavish adherence to immutable rules. Staff members of the Chicago Institute under the guidance of Alexander and French carry on this tradition in "Psychoanalytic Therapy." They present the evidence and refer to Freud as "one of the great experimenters of all time."

The authors could not ignore the fact that from time to time patients who, according to the books, should have required a long period of treatment get well and stay well after very brief therapy. In true scientific spirit they saw this as worthy of study and as calling perhaps for revision of the existing concepts. Every experienced psychiatrist can point to miraculously prompt recoveries, as puzzling to him as they are gratifying to the patient or his family. They know as well that these things take place also outside the profession, dependent



Sigmund Freud.

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on deep intuition or chance. The authors point to a classical instance in the conversion of Jean Valjean due to the unexpected kindness of the priest.

It is common practice when people find their behavior inadequate or trouble-making to seek a confidant with whom to talk it over—over the back fence, in the parsonage or in the doctor's office. Psychoanalysis is the most detailed, intense and unrestricted talking-it-over that we know of, as well as the most carefully and experimentally studied. And so it is understandable that psychoanalysts should take the lead in investigating these therapeutic surprises and in developing methods where they can be brought about by design. Psychoanalysts recog-

nize that when two people talk things over in the very close and confidential relation of helper and the one helped, the relationship between these two comes to include a powerful element which they have called transference. In this relation the one helped makes, at least in his own mind, the helper play stand-in for persons, such as parents, who in earlier years were critically involved in shaping his character. But the well-trained doctor becomes a very different parent, since he presents a new and less disconcerting reaction to the patient's behavior.

Since character patterns tend to persist and be repeated in reaction to any person standing in the role of the parent, the transference gives the doctor the op-

portunity to study these patterns, to devise ways of changing them and even to practice new and healthier habits. In this way the unhealthy character tends to be healed. This is well exemplified in Case A, a young man who expected the doctor to be exactly like his domineering and abusive father. The doctor corrected his childish fears by offering to him a new kind of relationship. The degree to which this transference drama is allowed to develop is a fundamental in understanding these surprisingly rapid successes and in designing them.

NOW let us see what this group has distilled out of their large mass of experience and experiments. The most revolution-

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any element is that for many cases heretofore considered typical for prolonged daily psychoanalysis, the traditional psychoanalysis becomes not so much a method of treatment as an orientation for the doctor from which the nature of the problem may be promptly sensed and the effective therapeutic approach selected.

Psychoanalytic theory and experience may indicate that the patient is better left undisturbed with his peculiar sensitivities and behavior and that the effort be focused on shaping his life situation, his work, his home, his friends, so that he can live more satisfactorily with himself. Some may through more superficial re-education circumvent the character disabilities without radical change of character itself. Others will be able on their own strength to effect a more radical change if the doctor, or someone else, can provide them with the backing, companionship, encouragement, that they need in order to tackle life problems.

IF Victor Hugo was able intuitively to sense such a fundamental psychoanalytic concept as that which he introduced into the Valjean episode—and other writers have done likewise—it is not surprising that many doctors lacking the blessings of Freudian imprimatur have also intuitively applied this same principle in helping patients. It is also to be expected that having experienced success but not having studied the process as the authors have done, doctors have generalized their experience and applied a technique where it was inapplicable. This has actually happened. Short of the abbreviation of the more classical psychoanalytic procedure, doctors, including psy-

chiatrists, have used practically every device revealed in this book. What they have not done is to select their treatments on sound grounds as is now beginning to be possible. Some always used the same method or varied it only by hunch. This was too easy. It takes more skill to abbreviate treatment than to follow a more comprehensive process.

Most exponents of psychoanalysis have fought for their own patterns. These authors go to bat for the patient, even if it leads them to another form of treatment than their own. By their liberality and deep understanding they open the door for treatment to many who could not otherwise be accommodated. In this, they and their book are eminently successful, and it should serve for a long time to come as a milestone on the road to scientific psychiatry. It reflects the maturity of the field, its place as a part of science and the dissolving of all traces of cultism. Its principles should be understood by all who deal with people who are in trouble; its practice should be encompassed by every psychiatrist.