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†*Reading about. . .*

Psychosomatics

by Edward Stonehill

The scope of psychosomatics would appear to be almost limitless, thus presenting a daunting task of selection. Psychosomatic medicine was dominated from about 1930 to the mid 1950's by psychoanalytic concepts. Indeed, the whole field appeared as an offshoot of psychoanalysis, which many people would now regard as a distorted view. During this period the area was most strongly influenced by the writings of Franz Alexander and Flanders Dunbar. Alexander put forward his specificity theory in which he postulated a causal link between a specific constellation of unconscious conflicts, of psychological modes of dealing with them and of their emotional and physiological correlations, on the one hand, and the development of one of several organic diseases, on the other hand. *Psychosomatic Medicine: Its Principles and Applications* (Alexander, 1952) and *Emotions and Bodily Change* (Dunbar, 1946) are recommended reading.

The specificity theory was tested by Weiner and his colleagues in an elegant prospective study of duodenal ulcer. A common conflict in patients with duodenal ulcer was said to be related to the persistence of strong infantile wishes to be loved and cared for, on the one hand, and the repudiation of these wishes by the adult ego or by external circumstances on the other hand. Weiner *et al* (1957) predicted that subjects with the above-mentioned psychic conflict would develop duodenal ulcer if they also had a sustained rate of gastric hypersecretion and if they were under environmental stress that mobilised their conflict and induced psychic tension. They drew their experimental subjects from 2,000 army recruits and selected two groups with the highest and lowest serum pepsinogen levels. They were subjected to psychological tests, largely of a projective nature and to X-ray investigations. A prediction was made of ten men most likely to develop duodenal ulcer during basic training and the prediction was accurate in seven out of the ten. The study showed that neither a high rate of gastric secretion nor a specific psychodynamic constellation was independently responsible for the development of peptic ulcer.

The concept of specificity has become much less fashionable over the last twenty years or so, and the term psychosomatic has broadened to embrace a general approach to illness, the psychosomatic approach, which conceives most or possibly all disorders as multifactorially determined. This broad-based approach is applicable to any disease in which psychiatry and the behavioural sciences increase the understanding of the aetiology, presentation, treatment and prevention of physical complaints. The psychosomatic approach has been fostered in England by the Society for Psychosomatic Research, which was founded in 1955. Since 1963 the proceedings of this society's annual two day conference have been published as one of the bi-monthly issues of the *Journal of Psychosomatic Research*. This is a journal well worth browsing through and is a major British contribution to the psychosomatic approach. Concurrently in the United States two of the important journals devoted to this area are *Psychosomatic Medicine* and *Psychosomatics*. The Medical-Psychiatric liaison Group of the Departments of Psychiatry and Medicine of the University of Rochester School of Medicine starting from a psychoanalytic position has played an important part in the development and acceptance of the psychosomatic approach in medicine, and I can recommend Engel's book *Psychological Development in Health and Disease* (1962). This book reflects Professor Engel's long and distinguished clinical, research and teaching experience. It concentrates on the development and organization of basic concepts but the therapeutic framework is not illustrated by case material and this renders it somewhat heavy going. The basic psychoanalytic model on which Engel's therapeutic framework is based is reinforced by information derived from other psychobiological viewpoints. Volume I consists of a series of chapters which give a coherent summary of the biological considerations, instinctual drives,

† An occasional feature in the Book Section where contributors give their personal choice of important, memorable or informative literature.

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homeostatic mechanisms, their relationship to the nervous system as the central integrating organ in personality function and to its expression in mental functioning. The reader is carried through successive stages of growth to adulthood and a description of family life. In Volume II Professor Engel develops his concept of health and disease, as responses to environmental and psychological stresses. He elaborates more fully the significance of predisposition, pathogenesis and phenomenology, and describes states which may be interpreted as compensated and decompensated reactions.

At a time when the psychosomatic approach was only beginning to gain acceptance the first volume of *Modern Trends in Psychosomatic Medicine* (1955) was published, edited by the late Desmond O'Neill. It contains 21 essays in clinical research and covers a wide range of topics. Volume 2 (1970) and Volume 3 (1976) were edited by Oscar Hill. These volumes contain essays covering a wide range of somatic disorders in which a psychological approach is relevant to the understanding of the pathological condition. Attempts are now made to bridge the gap between the psyche and the soma by conceptualizing the link between psychological factors and the intimate pathophysiological processes of the disease under study, rather than, as in earlier work, to restrict the concept to a purely psychological formulation with no attempt to explain the way in which psychological stress could be translated into physical changes.

I return to my task of making a few specific selections from the literature in such a wide field. One development has been the identification of social and psychological variables which contribute to the causation of morbidity. Friedman and Rosenmann (1974) have accumulated an impressive body of evidence of a specific manifest personality type, 'coronary-prone behaviour patterns or behaviour pattern type "A".' This behavioural pattern features competitiveness, aggressiveness, restlessness, impatience, a sense of being under constant time pressure, ceaseless striving for achievement and a marked dedication to one's job. Individuals who display this pattern have been shown to exhibit an increased prevalence to coronary heart disease.

There has been a considerable amount of interest in recent years concerning the relationship between life events and the onset of disease process. A striking study in the psychosomatic field is that of Parkes *et al* (1969). They compared, in a careful statistical study, the mortality rate of nearly 4,500 widowers, aged 55 years or more, followed up for nine years after the death of their wives, with the expected rate for married men of the same age. They showed in the bereaved a mortality rate 40 per cent above the expected rate for married men during the first six months of bereavement and thereafter the mortality rate gradually fell to that of married men. The greatest increase in mortality was from cardiovascular disease. But there was also an increase in mortality from other diseases, including infections.

Clearly there can be no mental event which does not have a somatic accompaniment at a neurochemical level. Over the last twenty years or so researchers have started to attempt to identify links at the interface between psychological and behavioural events and biological processes. A pioneer in this area has been Edward Sachar. Sachar *et al* (1967) demonstrated correlations between psychological factors and adrenal corticosteroid functioning. The adrenal appears to respond to disequilibrium with an increase in corticosteroid production. It appears that as long as people are functioning in a stable system, be it either healthy or psychotic, they do not increase their steroid output. However, it is with change such as occurs with important life events, including bereavement or confrontation, that patients demonstrate increased steroid production. It seems to me that this interface will continue to provide one of the main areas of further understanding of mind-body relationships during the coming decade.

I hope these few examples that I have selected will stimulate the reader to delve further into the literature of the fascinating field of psychosomatics.

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Book Reviews

Human Sexuality: A Health Practitioner's Text. Edited by RICHARD GREEN. Baltimore, Maryland: Williams & Wilkins. 1976. Pp 251. $15.50.

In their introductory chapter the authors of *The Psychology of Sex* try to justify adding yet another book on the subject. It is to give the general public an account of the latest scientific advances in contrast to the many 'do it yourself' books on sexual techniques. They state (p 21)—'In this book we have picked out subjects which we thought would interest most readers, and we have concentrated on topics where scientific knowledge was available to make conclusions possible and reasonable'. The following seven chapters are concerned with male-female differences, sex and personality, fantasy and excitement, courtship and love, marital adjustment, orgasm and the new sex therapies.

As the reviewer himself has written a popular book on sexual problems he is well aware of the difficulties involved. However, as the authors stress their scientific contribution it seems a missed opportunity of educating the public in the methodological pitfalls of research into human sexuality. They evade this issue by saying it is not a textbook. But the unsophisticated reader is led to believe that he is getting a balanced and objective distillate of recent scientific work, relying entirely (except for a few selected references at the end of chapters) on the author's presentation of results and some questionnaires. What in fact he is getting is a very one-sided picture—the Eysenckian brand of biological determinism.

The American paperback edited by Richard Green and nineteen contributors, was originally published in 1975 and was intended as a textbook on human sexuality for medical students and doctors. Whether such a book is necessary at all, let alone what topics to include, remains controversial. There is one outstanding contribution (chapter 12) on 'Sexuality and the Spinal Cord Injured' which is more far-ranging than the title suggests, and an unusual (and unwelcome) one (chapter 6) on the homosexual as physician. The rest are rather pedestrian and dated accounts of familiar topics. There are many omissions —e.g., neuro-endocrine relationships, moral and ethical issues, sexual aids, sexually transmitted diseases. Legal references are to the USA only, so there is nothing on our Abortion Act. To be useful for our medical students considerable re-writing and revision would be necessary, so that in its present form it cannot be recommended.

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Sex, Hormones and Behaviour. Ciba Foundation Symposium 62 (New Series). Amsterdam: Excerpta Medica. 1979. Pp 382. $41.00. Dfl. 84.00.

The ability of various hormones to influence central nervous system function and thus modify behaviour, performance and mental state has opened up a whole new area of research with potential importance to understanding human psychology and psychopathology. The effects of hormonal

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