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Correspondence

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THE PSYCHIATRIST IN SEARCH OF A SCIENCE

DEAR SIR,

In his admirable article (*Journal*, March 1975, p. 205), Dr. Slater quotes a few sentences of mine but appears to have misunderstood my meaning. The points at issue are perhaps of general interest.

Dr. Slater writes that science has nothing to say about subjective states. This is a highly contentious assertion and might be taken to imply that there can be no such thing as the scientific study of, say, perception. But whatever the logical status of the 'endopsyche', unfortunately the patient usually complains of pain in just that intangible location, and the language in which he describes it is that of *experience*. The psychiatrist's first task is to try to grasp what is being communicated, and in doing so he acts, entirely legitimately, as part priest and part philosopher, that is to say, as a sensitive human being. But if as a scientist he wishes to go beyond the role of listener, he must not only seek to make psychological sense of what he hears—a task which the humanist might do just as well—but must proceed to transmute the experiences into *phenomena*. They are then tractable as objects of scientific discourse.

Psychoanalytic theory proffers help at many levels. It provides both the psychiatrist and the patient with a perspective of man, a poetic vision of the evolving individual. Next, it offers a 'scientific' theory in which the phenomena, the empirical data of which it treats, are themselves feeling-states, so that the act of translation from experiences to phenomena is much more direct than is the case with most psychological theories. Moreover, psychoanalysis encompasses a range of vicissitudes, from childhood fantasies to fear of death, provided by no other single framework.

Of course a great deal has to be added to empirical observation in order to construct such a system. Yet it is not so very remarkable that intelligent men whose training has at least exposed them to scientific thinking should be prepared to subscribe to much that is unsupported by any direct evidence. I suggested in the passage quoted by Dr. Slater that the reasons lie in the 'effort after meaning' and are to be traced to the pressures of the therapeutic situation rather than found in any scientific basis for the theory. But my concern was certainly not to defend the anti-science; it was to suggest why scientific studies of psychoanalytic hypotheses have so little impact on a clinical approach, which to adopt a phrase of Sir Aubrey Lewis's, has 'outlived its obiturists' and which will doubtless continue until a better-founded but equally general theory is available.

Finally, may I gently protest at the bewildering honour Dr. Slater does me by grouping me among various eminent Freudians. If simply commenting on such matters (and in a book review at that) is enough to gain entrance to their ranks, should we conclude from Dr. Slater's article that he too is now to be counted among the leading psychoanalysts of the day?

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DEAR SIR,

In his article in the March issue, Dr. Eliot Slater has carried out a thorough investigation into the status of the different schools providing psychotherapy and has come to the conclusion that their tenets exclude them from the realm of scientific medicine.

I offer the following solution of the dilemma. We have to admit that the mind is not a subject for science, though the brain is. The mind is a subject for an ethic which is based on the recognition of personal freedom and not on determinism. In the psychotherapy which follows from such a premise the patient is faced with his challenges, which include the sexual drive, stressed by Freud, the striving for power considered by Adler, and the 'archetypal' experiences elucidated by Jung. In addition, he is expected to confront his cerebral condition, investigated by neurologists (for instance the disabilities due to advancing cerebral arteriosclerosis). The patient must also come to terms with his genetic endowment and his social milieu. Thus the insight gained by the different schools of psychological