

PSYCHIATRY

# This War's Neurosis

More physical symptoms such as stomach ulcers and "soldier's heart"—less deafness, blindness and paralysis than in 1918, is prediction.

► THE WAR-CAUSED neuroses this time will be different from those of the last war, when we called them shell shock. There will be more physical symptoms, such as peptic ulcers and "soldier's heart," and less so-called functional symptoms of paralysis, trembling, hysterical deafness, blindness or paralysis of the vocal muscles. This is the prediction of Dr. Sandor Rado, psychiatrist of New York, based on his experience in the last war.

However, these breakdowns can be cured and prevented by prompt psychiatric treatment, whether the symptoms are called physical or emotional, says Dr. Rado, writing in the current issue of *Psychosomatic Medicine*.

Potential victims cannot be weeded out by any selective service process, he says, for they are apt to be outstanding examples of physical and mental health, many of them excellent soldiers, prior to the war experience which strains their endurance beyond the breaking point. When this point is reached, they collapse totally—physically, mentally and emotionally—and the organism unconsciously chooses those symptoms which will be most incapacitating, thus most effective in getting it out of an intolerable situation. This has nothing to do with malingering: it is a physical-emotional process like any other disease, over which the patient has no control.

This traumatic type of neurosis which can attack previously healthy people, is distinguished by Dr. Rado from the ordinary neurosis of civilian life in that it requires different treatment and cannot be predicted. Those who show predisposition to breakdown can and should be weeded out by pre-induction examination.

The spread of psychoanalytic knowledge is cited as the biggest reason for the changing symptoms of war neurosis, a change also reflected in civilian practice. Certain symptoms have lost their effectiveness since they are labelled "functional," "psychogenic," or "escape mechanisms." Others, supposed to be more physical, are still useful because they have not been so labelled. Some

day, when all possible symptoms have been labelled with emotional tags, we may give up the useless distinction between "physical" and "emotional" diseases, as Dr. Rado suggests. The new approach summarized in psychosomatic medicine maintains that no disease can be either one or the other, since all contain both physical and psychological factors. Whether they are treated by primarily medical or psychiatric methods depends on the individual, not the symptoms.

Thus the treatment for war-caused traumatic neurosis will call for a psychiatrist, whether the symptom is a peptic ulcer or an anxiety attack. (This emphatically does not mean that every case of peptic ulcer needs the same treatment as a war-shocked soldier). Breakdowns can be prevented or shortened by early detection of symptoms, says Dr. Rado. While details of treatment will have to be adapted to the types of cases developed in this war, he indicates broad outlines to be followed.

Some method of hypno-catharsis is necessary, through hypnosis or hypnotic drugs, to induce the patient to re-live the traumatic experience and emotions which are in danger of being permanently forgotten, or "repressed." But Dr. Rado believes there will be relapse unless further treatment is given. The patient must be desensitized to all war memories, whether repressed or not, therefore these must be robbed of their power to terrify and turned into a source of pride and satisfaction.

He must be made to see the war as an ordeal which proved his endurance, rather than his failure. Obviously this attitude cannot be preached to him, but he must be helped toward it by the intricate therapeutic methods of a skilled psychiatrist. Medication will also play a part in treatment.

The enormous number of "shell shock" cases in the last war, which could not be explained organically, forced the acceptance of psychoanalytic concepts, according to Dr. Rado, but this was not done without misunderstanding and needless cruelty. The unconscious con-

flict of a conscientious soldier between military duty and self-preservation, which resulted in a "flight into illness" was misinterpreted as a conscious, deliberate attempt to escape. He was accused of malingering and given futile disciplinary measures. In other words, in changing the emphasis from "organic" to "psychogenic," the word unconscious was overlooked.

According to the psychosomatic approach, we are now in a transitional stage. Instead of looking for an organic explanation for every disease, we now look for the psychological explanation, but we have not yet abandoned the "either-or" type of thinking.

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POPULATION

## Maintaining Birth Rate Falls on Women Over 30

► MOTHERS TODAY are younger, but the burden of maintaining our birth rate near its present level under war conditions will fall on the women over 30 years of age, statisticians of the Metropolitan Life Insurance Company declare.

In 1920, they report, women under 20 were contributing 8.6% of the total births for that year but by 1940 women of this age group contributed 11%. Women of 20 to 24 years also contributed an increasing percentage of children to the nation, from 28.1% in 1920 to 31.3% in 1940. During the same two decades, women of ages 30 to 34 contributed fewer children to the nation, the percentages dropping from 19 to 17.7%.

The percentage of younger women in the population, however, has decreased and that of older women has increased during the same two decades. This trend will probably increase. At the same time the war has interrupted family life most for the younger women who will consequently contribute fewer children. This places the burden of maintaining the birth rate on the women of 30 or over, which means the average size of existing families must be increased.

The unfavorable effect of the war on the birth rate of the immediate future may be moderated, because most married women of 30 years or more already have children so that their husbands are for the most part still out of the classes called for military service. In addition, many thousands of these families are now in better economic position than ever to rear more children.

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