

PSYCHIATRY

Rehabilitated May Drink

Rehabilitated alcoholics may return to normal drinking without reverting to alcoholism, contrary to the popular belief that abstinence is the only permanent cure—By Edith Lederer

► THE SUCCESSFULLY treated alcoholic may be able to drink again. Contrary to the popular belief that abstinence is the only cure for the confirmed alcoholic, four researchers told the 121st meeting of the American Psychiatric Association in New York that patients who return to normal drinking may be "as healthy mentally, socially, vocationally and physically as abstinent ex-alcoholics."

In a follow-up study of 32 male alcoholics who had been discharged as "improved" from the Cincinnati Alcoholism Clinic, the researchers found no differences between those who remained abstinent and those who returned to normal drinking habits.

Dr. E. Mansell Pattison, National Institute of Mental Health, Bethesda, Md., and St. Elizabeths Hospital, Washington, D.C., and also Drs. G. C. Gleser, E. B. Headley and L. A. Gottschalk, all of the University of Cincinnati, suggested that abstinence be considered as only one possible "prescription" for treating alcoholism.

In another "drinking" study two researchers found that chronic alcoholics are responsible for at least one-half of all traffic deaths.

Dr. Melvin L. Selzer, University of Michigan Medical School, and Sue Weiss, research assistant, University Hospital, Ann Arbor, told the APA that "the alcoholic driver

today, even when repeatedly apprehended, is neither effectively restricted from driving nor required to seek treatment."

In a study of 72 drivers responsible for fatal traffic accidents in Washtenaw County, Mich., 40% were found to be alcoholic, 10% pre-alcoholic, and 50% nonalcoholic.

Many of the alcoholic drivers were frequently paranoid, violent, depressed and suicidal, the researchers reported. Almost half of them had been previously arrested for drunk driving or drunk and disorderly conduct, and five had long since had their driving licenses revoked.

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Many Doctors Take Drugs

► THE RATE of drug addiction among physicians is about 30 times that of the general population.

It is estimated that one in every hundred physicians is addicted to narcotics, report Drs. Peter L. Putnam of the University of California at Los Angeles, and Everett H. Ellinwood, a staff psychiatrist at the U.S. Public Health Service Hospital, Lexington, Ky.

Drug addiction has been described as an "occupational hazard" of physicians and is a symptom of emotional disorders in many

physicians, Drs. Putnam and Ellinwood told the 121st annual meeting of the American Psychiatric Association.

In a study of 68 physicians discharged in 1952 from the U.S. Public Health Service Narcotics Hospital in Lexington, Ky., the researchers found that morphine and demerol were the most commonly used drugs. Many of these doctors used barbiturates and alcohol in addition to the narcotic.

Most of these addicted physicians were married, Protestant and residents of one of the southern states. About 50% had been admitted to a hospital only once, while the rest had from two to eight admissions from 1940 to 1962.

When this group was compared with 68 other physicians listed in the 1950 directory of the American Medical Association, no differences were found in their group memberships, medical specialties or types of practice. However, the addicted physicians moved from one city to another twice as frequently as their counterparts.

After 10 years only 39 of the original patient physicians remained listed in the AMA directory while 55 of the other group retained their listings. Although this is significant, Drs. Putnam and Ellinwood point out, it is also significant that more than 50% of the patient group were able to retain their identity as physicians.

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Race Hatred Fear-Based

► THE ANTAGONISM between Negroes and whites in the United States is only one example of man's universal need to identify some "outsiders" as a source of danger to his way of life.

Dr. Louis Jolyon West, chairman of the department of psychiatry, neurology and behavioral sciences at the University of Oklahoma School of Medicine, Oklahoma City, said that a major part of "organized human violence" arises from this near universal tendency. Dr. West was a consulting psychiatrist in the Jack Ruby case.

"Once the stranger is defined, all of the familiar myth-engendered taboos and warnings are heard: forbid intermarriage; avoid close contact; suspect their motives; beware of their degraded practices and mysterious treacheries; remember that they are beneath us, they are sexually dangerous, they want to displace us, overcome us, drag us down," the physician told the 121st annual meeting of the American Psychiatric Association.

This stranger, Dr. West said, must above all contain elements of man's secret self. "Inevitably when we unconsciously invest our hidden sexual and violent feelings in the stranger, an important part of ourselves becomes ensconced within his skin; insofar as we hate, fear and secretly relish that part of ourselves, we shall hate, fear and secretly relish it in him," he said.

The stranger threatens man, Dr. West pointed out, so man must crush him, or segregate him to preserve the safety of "his people." Man must make sure that the "outsider" remains a stranger, so that he cannot find out the truth—that he and the outsider are as similar as he is to his brother.

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Union Carbide

SIMULATED SPACE—The UK3, the first scientific satellite designed and built exclusively by the British, will be tested and exposed to the ravages of outer space in this environmental test chamber built by Robinson Technical Products, Inc., Hingham, Mass.