

Sometimes family members will strike back in a very punitive fashion during a family therapy session, Dr. Lidz said. In one case, parents hearing their child talk of the family's drinking and the mother's lover told the therapist that they would no longer put up with her lies. In an open attempt to threaten and control, they inquired about transferring her to a state hospital. The obvious question is whether the threatened family member can withstand this kind of attack.

The key to this and other questions about family therapy, say many psychiatrists, lies in learning when this particular psychological technique is appropriate and when it is undesirable.

Dr. Bell has stated that family therapy "is very new territory—without established techniques or established theory." But he expressed confidence that this new territory could be charted.

Some of this charting is going on right now at the National Institute of Mental Health in the section on family studies headed by Dr. Wynne. He and his colleagues, working with schizophrenic families, are attempting to establish standards for use of conjoint family therapy.

SOCIOLOGY

Grounds for Abortion

► **PSYCHIATRISTS** should mind their own medical business and not get involved with the social problem of abortion, a British physician recommended.

He said there are "no psychiatric grounds for the termination of pregnancy."

The psychiatrist, said Dr. Myre Sim of the department of psychological medicine, United Birmingham Hospitals, is being "exploited" by the problem of abortion, for he "provides the most convenient way around the legal situation."

In Great Britain, as in most states in the U.S., abortion is legal if it is absolutely essential to the mother's physical or mental health.

Marking out the boundary line between being a responsible citizen and being a true scientist or practitioner, Dr. Sim said of the psychiatrist:

"Whether at other times he campaigns for reform in the law relating to abortion is his own private business, but he should not distort medical facts to serve other ends."

And the facts, Dr. Sim declared, in his report in the *British Medical Journal*, July 20, 1963, are clear and simple. A 12-year study of 213 women who were unstable during pregnancy or suffered breakdowns after delivery showed:

1. A woman who is unstable during pregnancy is no more likely to have a breakdown after delivery than a woman who is mentally fit during pregnancy.

2. A woman who has suffered mental collapse after childbirth, technically termed puerperal psychosis, may not have a breakdown a second time. Demonstrating the unpredictability of this type of mental illness, Dr. Sim described the case of one woman who had four breakdowns after her first four planned pregnancies. At the age of 43 she accidentally became pregnant again. It

Problems of the Therapist

They are also looking into the variety of problems that the therapist confronts in the family sessions: How should he deal with jealousy among family members vis-a-vis himself? How can he make the problems of individual family members meaningful to the family unit as a whole? And, most important, how can he upset—and then correct—the sick equilibrium to which the family clings so tenaciously?

Standards and techniques are emerging from this work, and some of the schizophrenic families treated have profited greatly from family therapy, which also has been used successfully in the treatment of delinquency, alcoholism and psychosomatic disorders.

The cooler heads in the psychiatric profession agree that no single therapy—not individual, or group or family—is the therapy of the future.

But like all of these techniques, when skillfully used under the appropriate conditions, family therapy can restore a sick patient to health, even when the sick patient is, as in this case, that baffling and vitally important life unit—the family.

• Science News Letter, 84:74 Aug. 3, 1963

was decided to continue the pregnancy, and she had her fifth baby without any troubling aftereffects.

3. A woman pregnant—with wanted or with unwanted child—is less likely to commit suicide than a non-pregnant woman.

4. Abortion may upset a woman's mental health even more than going through with the pregnancy. The greater the psychiatric grounds for legal abortion, the greater the risk of psychotic collapse after the operation.

5. The typical woman who breaks down after pregnancy is married, has a strict moral code, is conscientious and takes an active part in community life. There is obviously no way to tell the women who are apt to have breakdowns, from those who will keep their mental health after childbirth.

In light of these facts, Dr. Sim said, the answer to the problem of abortion is "not to recommend termination, which may indeed be harmful, but to nurse the patient through her unstable phase."

• Science News Letter, 84:75 Aug. 3, 1963

METEOROLOGY

Spectrographs Disclose Upper Air Moisture

► A NEW METHOD for determining the water vapor in the atmosphere above 50,000 feet has been developed by D. M. Gates of the National Bureau of Standards Laboratories in Boulder, Colo.

Infrared spectrometers are carried aloft by balloons and aimed at the sun. By examining the spectrographs thus obtained, the amount of water vapor beyond the limits of balloon sounding can be determined, even when the concentration is as low as one part per hundred thousand.

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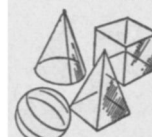
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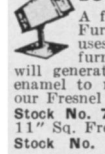
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