

BOOK REVIEWS

Psychobattery: A Chronicle of Psychotherapeutic Abuse

Therese Spitzer

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Reviewed by

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Although a bit weighted in case studies which hint at obvious self-selection of material with the author's bias firmly in mind, *Psychobattery* is a well organized, competently written book. Ironically, the chapter this reviewer had the greatest difficulty with was Chapter Five, written from the medical viewpoint by the author's husband, who is also a physician. Statements that are primed to convince the reader that the medical approach is not only the most logical approach that a practitioner must adopt in the treatment of mental disease, but also the most fundamental, leaves me shaking my head at a pedanticism that is a bit too obvious. For example, in Chapter Five the author writes: "No one, of course, suggests that people must keep their own diseased hearts, livers, kidneys, or gall bladders in line without pills" (p. 74). This statement may not only be a frighteningly predictable line for a physician to espouse, but it is also unequivocally false, as the popular Bateson-Pelletier experiments can attest to. Again, a bit earlier, the author of Chapter Five writes,

...the phenothiazines, such as chlorpromazine, Stelazine, and Mellaril...cannot restore the premorbid personality, because they do not cure, they only control; but they make it possible for seventy to eighty percent of patients using them to function at least part of the time outside of an institution. They are infinitely more important in restoring the patient to such a state than any amount of psychotherapy, milieu, conditioning, or any other psychological maneuvering. In most cases where they have proved ineffective, the drugs are found to have been prescribed in inadequate amounts, or the patient has not been taking the drugs as prescribed. (p. 73)

This passage disturbs me—for it tautologically defines that which is being debated without supplying the reader with the additional evidence that would enable us to better make our determination—instead, the author sticks to his sole conceptualization in a rather stubborn fashion, trying to solve the riddle, as it comes out, as to which is the lesser of two evils: the psychotherapeutic approach or the medical approach. Whether

one mode of treatment results in poorer prognosis than another is *not* an occasion for name-calling, but instead sound empirical investigation. The author of this chapter later discusses the “unpleasant” side effects of using psychotropic drugs. For example, common effects may be Parkinson-like syndromes of tremor and rigidity, impairment of sight, low blood pressure, and especially with the oft-used Mellaril, the inability to ejaculate in men. This is certainly no small price to pay (as this author later suggests), and considering that such costs/benefits do in fact exist, it is no small wonder that biases against drug usage and the physiological/medical model exist as they do—such drug induced symptoms in themselves might be indicative of mental disturbance under other contexts.

In this vein then, we must not take the social and psychological factors that contribute to mental illness out of context either. Although I complained above that the obviousness of the case material makes for slanted presentation, most of the time the material is (paradoxically) convincing. In fact, after reading this book some of my core beliefs were altered. Therese Spitzer successfully presents her case for renewed interest in what is probably best termed psychopharmacology, and not simply pharmacology, as best posited in her section on psychological/enzyme interactions. And her main concern and complaint is well taken: with all the “psychotherapies” now in existence, why has professional and non-professional society alike been lax in their criteria for licensing and practicing therapy—just as they have *not* been lax in their licensing laws where drug distribution and prescription are concerned? There exists a bias against viewing consciousness and its disturbances in light of current physiological evidence. If, as Spitzer maintains (ironically), the brain *as organ* went awry as often as the liver, one would have no difficulty speculating about the various organic causes of mental distress. Yet we as a culture engage in such speculative behavior reluctantly. One after the other the physiological theories are either discounted, ignored, or looked at with only minimal vision, while the therapies are invented, distributed, and faithfully bought. The claim that drug damage is “permanent” while danger due to malpracticed therapy is transient is partially disclaimed by Spitzer in her presentation of additional case material. (She does note the problems of long-term lithium use and tardive dyskinesias). Certainly, while one can theoretically walk out on a therapy session, what one encountered must remain. The magnitude and format of the various therapies has reached bizarre proportions, with the actual practice of therapy approaching ridiculous limits. Thus, for this reviewer, the bias that Spitzer speaks of is related to cultural ethos, and there appears to be no easy remedy for its elimination—short of revamping our modes of conceptualizing the world. In this sense then serious philosophy speaks

quite well to Spitzer's arguments, as does some of the learned helplessness literature.

The most enjoyable chapter for this reviewer was the last, entitled *Erewhon Revisited, A Psychoparable*. Here Spitzer is at her most creative, and quite entertaining, and although her aim is to trace an imagined evolution of the treatment of mental disorder through a quasi-science fiction type journey, she must in the final analysis fall back upon the speculating and theorizing that she appears to loathe in the earlier chapters. In the end however, we must forgive her—for what she describes hints at raw truth, as attested by a quick scanning of any popular psychology journal. What frightens me most about her testimony is that the “popular” traces back to the “scientific”: the power that psychologists currently hold will not be given up easily. Psychologists' power, and the mysterious hold the therapies apparently have over the public, *comes* from their content—and as long as that content is viewed as unique, the power must remain. Spitzer is, in this reviewer's estimation, quite correct in her questioning of the therapies, their limitations, and their dangers. But her obvious adherence to the medical model as THE WAY for treatment speaks like the voice of Chapter Five. I *do* recommend her book unequivocally; it is well written, provocative, complete, and most importantly, appropriate, self-critical, and timely. There is too much evidence surrounding us that says she is correct.