

†*Reading about.* . . .

Psychotropic Drugs

by John Pollitt

Psychotropic drugs are but one of our tools in treatment and when appreciating articles or books about these compounds, it is always stimulating to see that the author(s) know as much about people and the disorders they are treating as about the drugs which they are using. It is also helpful when the separation between symptomatic and curative treatment is made, and "comfort" and "cure" are distinguished. Papers which help doctors help patients rather than those of somewhat esoteric interest have more appeal, and I think we may ask: Does the author relate this to the work of the clinic and ways to assist the next patient?

I have always liked review articles rather than specific isolated investigations, but in articles concerned with the assessment of drugs it is refreshing when the means to the end such as statistics and mathematics are kept in perspective.

In a field in which a voluminous literature has appeared monthly for at least 20 years, choice has to be personal and subjective, and I have chosen books and articles most of which have stood the test of time, because they provide means of assessment, describe discoveries, or evaluate and apply them.

I make no excuse for including *Burton's Anatomy of Melancholy*, which was the only book which got Dr. Samuel Johnson out of bed two hours earlier than he intended (Boswell). Although his approach to drugs by name, science and formula was limited, his knowledge of people was profound, and he was very widely read. He enjoyed the background of any successful 'review-book' writer, and he had the gift of making his points rather than concealing them, of classifying clearly and maintaining interest in an apparently inexhaustible knowledge of sad and melancholic people. Considering that Burton lived over 300 years ago, the 800 pages show a remarkable insight and although the treatments appear stereotyped and crude, the mechanisms of many could hardly have failed to stimulate the hypothalamus!

† An occasional feature in the Book Section where contributors give their personal choice of important, memorable or informative literature.

Although this book is of historic interest, it gives breadth and meaning to the modern drug scene. It is a remarkable book by a remarkable man and there must be very few scholars who cannot poach his references. There is an interesting comment made in the 'Account of the Author' in the 1891 edition, where Mr. Granger says, 'He composed this book with a view of relieving his own melancholy, but increased it to such a degree that nothing could make him laugh, but going to the bridge foot and hearing the ribaldry of the bargemen, which rarely failed to throw him into fits of laughter'.

The Scientific Basis of Drug Therapy in Psychiatry edited by Marks and Pare (1965), impressed me very much at the time and has done so increasingly since. It was an early attempt in the setting of a conference to bring understanding to this area of psychotropic drugs. A host of interesting ideas was brought together in a few sessions. Many of the practical details and theories have held up extremely well, and many of the problems which remain unsolved today were already clearly formulated at the time. The book still lives up to its scientific title and it was an important milestone pointing firmly in the direction in which chemical restoration of brain and mind function would develop.

Among the many articles one would gladly choose must be included the paper by Alec Coppen and his co-workers on *Prophylactic Lithium in Affective Disorders* (1971). This controlled trial, carried out at five hospitals on a substantial sample of patients who were followed-up for ample time, supported very strongly the earlier contention of Bastrup and Schou that lithium had a specific prophylactic action in recurrent affective disorders, including pure recurrent depressions (unipolar affective disorder). This result of careful work, in the setting of controversy, confirmed a new concept in psychiatric treatment ranking in importance with the control of schizophrenia by the use of phenothiazine compounds. This feat required a full understanding of the academic aspects of the problem, the methodology and statistical hurdles, the clinical and human aspects

of the illness, the personal characteristics of the professional participants and the needs of the multitude of patients suffering from episodic affective disorder.

The relevant section of *Physical Treatments in Psychiatry* by William Sargant and Eliot Slater, and Peter Dally's book *Chemotherapy of Psychiatric Disorders*, I have found particularly useful in that they give advice on the use of psychotropic drugs based on extensive and wide personal experience in treating patients. It is refreshing to be able to avoid the need to review, or read critical reviews, or weigh up conflicting evidence and to rely on the distillate of classical psychiatric practice in good faith.

Psychotropic drugs show us perhaps more often than any other phenomenon of interaction in psychiatry the importance of taking a broad view. The question is not only which drug is likely to help this patient, but also what effects will this have on eyes or bladder, a potential pregnancy, diabetes, and an irregular heart action. Additional questions about substances which may prevent the action of anti-depressants need answering if the psychotropic drug is to be used safely.

To answer questions of this type, which arise daily, a wide variety of information is often required. This is not always available to many psychiatrists, but a good source is Goodman and Gilman's *The Pharmaceutical Basis of Therapeutics*. There is always something new to learn in psychopharmacology these days, and while checking details, it is easy to browse in neighbouring areas. It is perhaps a painless form of education for the post-membership practitioner. Where purely descriptive information is needed Martindale still excels, and for a more intensive discussion of psychopharmacology, Michael Shepherd, Malcolm Lader and Richard Rodnight's book is supremely sound.

The book, *Tranquillity Denied* by Hordern (1976), represents to me an ideal cultural review, bringing together the history, evolution and growing points from the literature, both medical and otherwise, on the general area of stress in society today. While dealing comprehensively with the techno-society, including permissiveness, pornography and pollution, the discussion is fully documented. There is no sense of strain in the arguments, the statistics of the kind quoted speak for themselves. The whole story, unhappily for this age, has the pure ring of truth. Psychotropic drugs are well covered, and given their

medical status, but the reader is free to draw his own conclusions.

Turning from the scene which is changing continuously, perhaps the conclusion should rest with an unchanging, but far from static endeavour that of assessment. May I be forgiven for leaving the field of catecholamines, carboxylases and compliance, but having read of propositions, predictables and Pascal in Jevons' *Elementary Lessons in Logic* while at the stage of 2nd M.B., I have found it particularly useful when evaluating arguments, articles and results. I do not know if Jevons is still obtainable, and perhaps this book (or its successor and competitors) is not widely read by doctors, but as it had been reprinted (presumably unchanged) 34 times between 1870 to 1946, it must have been read by a multitude; possibly even by many of those we treat!

What of the future? The literature published is steadily increasing, yet the time for digestion is dwindling. Perhaps the review type article will tend to supersede the 'abstract'. If so, I think the psychotropic portion of the *Journal of Pharmacotherapy* will compete very favourably.

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