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Behavioral Changes of Chronic Schizophrenics in Response to Reserpine

The double-blind design was successfully employed in the evaluation of the effect of reserpine on the behavior of lengthily hospitalized chronic schizophrenics.

Reserpine in a dose of 3 mg. appears to have a salutary effect on the behavior of some of this population when evaluated by the testing devices described.

Seeming improvement was noted primarily in the areas of Accessibility and Contact Span.

Major toxicity did not occur.

(Authors' Abstr.)

Effects of Mescaline, LSD-25, and Adrenochrome on Depth Electrograms in Man

During depth-electrographic studies, mescaline and d-lysergic acid diethylamide (LSD-25) have been administered to five patients; two of them had psychosis with convulsive disorders, and three had chronic schizophrenia. The most striking observation in the epileptics was that mescaline and (LSD-25) had a pronounced quieting effect on the spike and sharp-wave foci in depth recordings. An increase in paroxysmal activity characterized by waves of 2 to 5 c.p.s. occurred in the patients who had chronic schizophrenia. Mescaline and (LSD-25) elicited the appearance of a double-spike focus deep in the temporal lobe in one epileptic patient.

The clinical effects and those on the depth electrogram produced by mescaline and (LSD-25) were reversed by the injection of chlorpromazine.

Intravenous administration of adrenochrome to two patients who had chronic schizophrenia produced an increase in paroxysmal activity manifested by waves of 2 to 5 c.p.s. An increase in paroxysmal activity of 2 to 3 c.p.s. occurred in a patient who had a psychosis with a convulsive disorder.

(Authors' Abstr.)

Model Psychoses Induced by LSD-25 in Normals. I. Psychophysiological Investigations, with Special Reference to the Mechanism of the Paranoid Reaction

d-Lysergic acid diethylamide (LSD-25) given to 25 normal adults produced widespread temporary alteration in psychic functioning which resembles most the undeteriorated schizophrenic reaction type.

Insight and detachment are sufficiently preserved to allow recognition of the split between thinking and feeling as reality control becomes disturbed.

Rorschach tests completed in 13 cases allowed a fairly good prediction of a psychotic-like change from the control to the drug test, though the type of model psychosis could not be reliably anticipated.

Paranoid-like reaction (14 cases) showed a better correlation with the occurrence of complex synesthesiae, especially when the cross influence involved the examiner's voice and thoughts, on the one hand, and the subject's thoughts, and bodily sensations, on the other.

Theories aiming at elucidating the working mechanism of this drug point toward enzyme inhibition, on the biochemical side, and predominant vulnerability of the temporal lobe-diencephalic circuits, on the neurophysiological side.

(Authors' Abstr.)

Model Psychoses Induced by LSD-25 in Normals. II. Rorschach Test Findings

Of 25 Rorschach studies obtained in the LSD and in the lucid state, 13 were of sufficiently good quality to permit comparison.

The number of responses and the factor of "sexuality" were the most reliable indicators to predict a psychotic reaction.

The Rorschach test furnishes considerably less precision with which the type of psychotic reaction can be predicted.

In the paranoid reactions alone, the occurrence of complex synesthesiae appeared to have more of a predictive value than the Rorschach test results.

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Communist Interrogation and Indoctrination of "Enemies of the State". Analysis of Methods Used by the Communist State Police

The methods used in Communist countries for the interrogation and indoctrination of persons regarded as enemies of the state have their roots in secret police practices which go back for many years. These methods have been refined and systematized by much use and experience. Data about these procedures have been collected and analyzed. The general dynamic features which underlie them are understandable.

Those who live in Communist states recognize that at times the state police are almost unlimited in their power and their action may be swift and arbitrary. When residents of such communities become aware that they are suspected by the police, their feelings of impotence and uncertainty are greatly augmented. As they are increasingly avoided by their friends and associates, they feel isolated and rejected, and develop intense anxiety, often colored by feelings of guilt. Their sudden seizure under dramatic circumstances is additionally traumatizing. They usually enter upon their prison experience feeling fearful, vaguely guilty, helpless, and completely uncertain of their fate.

When the initial period of imprisonment is one of total isolation, such as that used by the KGB, the complete separation of the prisoner from the companionship and support of others, his utter loneliness, and his prolonged uncertainty have a further disorganizing effect upon him. Fatigue, sleep loss, pain, cold, hunger, and the like augment the injury induced by isolation. The cumulative effects of the entire experience may be almost intolerable. With the passage of time, the prisoner usually develops an intense need to be relieved of the pressures put upon him and to have some human companionship. He may have a very strong urge to talk to any human and be utterly dependent upon anyone who will help him or befriend him. At about this time he also becomes mentally dull and loses his capacity for discrimination. He becomes malleable and suggestible, and in some instances he may confabulate.

The interrogator exploits the prisoner's need for companionship. He uses items from the prisoner's biography derived from police files, from the prisoner's associates, and from hours of interrogation to arouse further guilt, conflict, and anxiety. He makes use of the dependence of the prisoner, which is strengthened by the intimate sharing of information about his life. He frustrates and further disorganizes the prisoner by rejecting his statements. He scolds, punishes, and threatens him when he does not co-operate, and approves and rewards him when he does. Then, by suggesting that the prisoner accept half-truths and plausible distortions of the truth, he makes it possible for the prisoner to rationalize and thus accept the interrogator's viewpoint as the only way out of an intolerable situation.

The methods of interrogation and indoctrination used in Communist China are in many respects similar to those of the Russian state police, from which they were in part derived; but in some respects they are quite different because of the special needs and traditions of the Chinese. In the Chinese prison, the individual interrogator is still important, and in occasional cases the management of the prisoner may quite closely duplicate that of the KGB. But in most instances the efforts of the interrogator are supplemented by the effects of the interaction between the prisoner and six or eight of his fellow prisoners with whom he is incarcerated in a crowded cell. Here the group replaces the interrogator as the focus of the prisoner's relationships. In this setting of complete lack of privacy, there is an unremitting routine of self-criticism sessions, group-discussion sessions, rote learning, constant repetition of Communist viewpoints, and the repeated rewriting and rejection of autobiographical essays. The group exploits the feeling of emotional nakedness and unworthiness which the self-criticism sessions engender, dwelling upon items obtained from the prisoner's life history during these sessions which arouse in him guilt, conflict, and anxiety. These feelings are greatly potentiated when the group rejects, isolates, and reviles him because of his "improper" attitudes and past behavior. The prisoner is thus placed in a situation in which he cannot avoid having his past life reviewed and questioned and cannot avoid hearing an exposition of the Communist position. Moreover, for a period, sometimes of years' duration, he has access to nothing but Communist-oriented history and Communist interpretation of current events. Like the KGB interrogator, the group rewards and approves the prisoner when he co-operates and behaves in accordance with their aims, and thus indicates to him that the only possible solution to an intolerable situation is the acceptance of the "proper" point of view.

Under pressures such as these, prisoners usually rationalize a change in attitude and hold it for an indefinite time. In general, this change in attitude is only as great as the prisoner feels it must be to enable him to relieve himself of the intolerable pressures under which he labors. In the KGB pre-trial interrogation, the achievement of a successful rationalization and a satisfactory protocol is usually accompanied by a profound feeling of relief, and an unspoken agreement with the interrogator that may even have overtones of warmth and friendliness. In the Chinese group cell, where the pressures are much more prolonged and the demands upon the prisoner are correspondingly more intense, the ultimate achievement of a proper rationalization and group acceptance is associated with feelings of relief that are occasionally exhilarating and sometimes show some of the features of a religious "conversion".

Men under the complete control of Communist police have been made to say and do many things which their captors desire. Some people have proved to be much more malleable than others; but even under the most strenuous circumstances some men are remarkably refractory and refuse to co-operate with their captors up to the point at which they develop confusional states and delirium. The most effective features of the Communist procedures are those which would operate even in the absence of control. Prisoners who were not excessively abused and who encountered men who appeared to be dedicated, selfless, and even "idealistic" in their attachment to the ostensible goals of Communism have acknowledged these features of their captors; and those who were presented with plausible evidence have accepted it tentatively. When they have discovered that they would be rejected, reviled, and punished for non-co-operative behavior, they have refrained from doing or saying anything which would bring such abuse upon them when they were in Communist control. Those whose past lives have been colored by feelings of much guilt, by lack of purpose or commitment, and those who were previously sympathetic to Communist views have been more amenable to the Communist methods.

Prisoners who have been released from Communist control and have been able to assure themselves that they will no longer be punished for "improper" opinions have gradually readjusted their attitudes to their new environment. Their memories of the punishments and brutalities which they have endured have been lively. For most prisoners these memories

override all others. When they have felt safe to acknowledge their resentment, they have expressed extreme hostility toward those responsible for their bad prison experiences, and they have nearly always rejected Communism and all those connected with it.

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A Study of Thalamo-Striate Relations in the Monkey

1. The retrograde cell degeneration in the thalamus following lesions in the corpus striatum has been studied in the monkey.

2. The centromedian and parafascicular nuclei have been shown to project to the putamen only; within the projection there is a precise topical organization.

3. The intralaminar nuclei, centralis medialis, paracentralis and centralis lateralis project to the head of the caudate nucleus in a similarly organized manner.

4. The nucleus reuniens is directly related to the cortex of the infralimbic area (area 25); the parataenial nucleus probably projects to the nucleus accumbens and the paraventricular nuclei appear to be related to the lateral pre-optic area.

5. These findings have been discussed in relation to the anatomical literature and to the physiological concept of a diffuse thalamo-cortical projection system.

(Authors' Abstr.)

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Surface and Depth Electrography of the Frontal Lobes in Conscious Patients

In a group of 5 psychotic and 4 non-psychotic patients the electrical activity of the depth of the frontal lobes was recorded for 1 to 4 days, using multilead needle electrodes. Electrical

activity of the motor and pre-motor areas was also recorded in 4 of these patients by plate electrodes. Results were as follows:

1. Typical patterns of electrical activity repeatedly observed included: (a) low voltage; (b) alpha-like; (c) high voltage fast; (d) high voltage slow irregular; (e) paroxysmal rhythmic slow; (f) spikes and sharp waves; (g) other types. Some rhythms seemed to be located in determined regions of the frontal lobes.

2. Very similar spatial distribution of rhythms within the frontal lobes was found in patients with different types of illness.

3. In general the electrical activity was symmetrical in both sides of the frontal lobes. In one patient the activity was asymmetrical.

4. No correlation could be established between electrical activity of the depth of the frontal lobes, and motor movements, sensory stimulations, or changes in the mood of the patient.

5. Voluntary motor movements inhibited the electrical activity of specific cortical motor areas. Sound stimulation of the patient with music or noises increased the electrical activity of motor and pre-motor areas.

(Authors' Abstr.)

The Form, Voltage Distribution and Physiological Significance of the K-Complex

1. A study has been made of the morphological features of the K-complex during consciousness, sleep, and barbiturate anaesthesia, in 80 psychiatric patients and 15 normal subjects. No differences between the two groups of subjects came to light. During consciousness the phenomenon is elicitable in about 20 per cent. of subjects but is prominent only in about one-third of these.

2. To the "sharp wave" component, the only one clearly discernible in the awake subject, there are added in unconsciousness one or more high voltage slow waves followed by a burst of "spindles". Both the latency and the duration of the sharp wave component are increased during sleep and barbiturate anaesthesia. In these and other states of diminished awareness the phenomenon is universally present, it is abolished in deep unconsciousness.

3. Evidence is presented suggesting that the K-complex is specially adapted for responding to transient disturbances in the environment. Swift adaptation occurs to continual stimuli; those given at shorter than 2-3 seconds intervals in sleep are interpreted as continual. Different forms of stimulation evoke identical K-complexes.

4. Studies of the voltage distribution of the K-complex by a special technique reveal congruent distributions during both first and second components which are consistent with the activity of a stationary source or sources. The widespread distribution of these two phases is hence attributed to their being mediated by some diffuse projection system to the cerebral cortex.

5. Attention is drawn to the similarities between the K-complex with its initial electro-positive deflection and after-discharge, and the localized changes of smaller voltage evoked in specific sensory areas by various types of afferent stimulation. The K-complex is however distributed over a diffuse area and is identical for different stimuli. There is evidence to suggest that it is the correlate of a crude perceptual process which tends to initiate arousal. Such a theory satisfactorily accounts for the known facts about the complex; its non-specificity, diffuse distribution, and its presence in prominent form only in states of unconsciousness.

(Authors' Abstr.)

The Relation Between Electro-cortical Waves and Responsiveness of the Cortico-spinal System

1. Studies of the responsiveness to electrical stimulation of the system of cortical neurones giving rise to evoked volleys in the medullary pyramid have been carried out in cats.

2. Phasic variations in responsiveness and relayed activity have been correlated with phasic changes of cortical surface potential during the elicitation of augmenting waves and during spontaneous spindle waves. Relayed pyramidal volleys appear during the initial surface positivity of each of these cortical wave forms. During the positive and early negative phases of the surface potential waves, the responsiveness of the efferent neurone system is augmented. During the late phase of cortical negativity, and for 50-150 m./sec. thereafter, responsiveness of the efferent neurone system is depressed. These changes affect the indirect portion of the evoked pyramidal volley to a significantly greater extent than the direct portion of the volley.

3. Responsiveness of this corticofugal neurone system has also been tested during the elicitation of that particular form of recruitment wave which develops upon stimulation of the midline nuclei of the diffuse thalamic projection system. During this type of recruitment response there is no relayed pyramidal volley. Neither is there any detectable alteration in responsiveness of the efferent neurone system.

4. The marked differences in the effects associated with these electrically similar potential changes indicate the existence of at least two fundamentally different mechanisms subserving thalamo-cortical relationships.

(Authors' Abstr.)

The Electroencephalogram in Dementia. Some Preliminary Observations and Correlations

1. In 71 patients with dementia of various aetiologies, 55 had abnormal EEG records. Of these 52 showed non-focal slow waves, and 3 predominantly fast records.

2. In the overall group of patients, there was a statistically significant relationship ($p < .01$) between the degrees of dementia (operationally defined as progressive involvement of categories of the sensorial examination) and the degree of EEG slowing.

3. The number of demented patients with major disturbances of mood, thought content and behavior, and EEG slowing, was not greater than those who only had uncomplicated sensorial defects, nor could they be differentiated by EEG alone.

4. Regardless of etiology of the dementia, there would appear to have been a statistically significant correlation between clinical evidence of the severity of dementia and EEG slowing.

5. Sixteen of 71 patients had normal EEG records, none of whom had the severest degree of sensorial dislocation.

6. The possible significance of these findings is discussed in the light of previous work.
(Authors' Abstr.)

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Selection of Patients for Treatment with Frenquel

A preliminary study of a new anti-hallucinogenic agent, Frenquel, has been carried out. Female patients suffering from auditory hallucinations were selected from a single Ontario Hospital for the study. These numbered 64, of whom 56 had continuous hallucinations and 8 had intermittent hallucinations which were absent at the start of the trial. Twenty-five patients were given a placebo, and 39 received Frenquel. The dosage was one 20 mg. tablet three times a day by mouth for 14 days, and patients were observed until they had reverted to their initial condition. This took place in all cases within 10 days of cessation of treatment. No toxic effects were observed.

Sixty-four per cent. of patients receiving the placebo were unaffected, while only 28 per cent. of those given Frenquel showed no change. Six of the latter group of 11 were suffering from intermittent hallucinations which were absent at the start of the trial; one had a history of head injury as the initial incident in her illness; and two were among the only three patients in the entire group who had been in hospital for more than 30 years.

Twenty-three per cent. of the 39 who received Frenquel showed minimal or mild improvement in mood, sociability and interest. It was held that this result could not be fairly ascribed to the action of the drug.

Forty-nine per cent. of the Frenquel group showed complete or marked diminution of auditory hallucinations, in association with diminution or cessation of delusions and in-

appropriateness of mood together with improvement in mood, behavior, sociability and interest.

It was held that intermittent hallucinations contraindicated the use of Frenquel, and suggested that a stay in hospital of 30 years or more was an unfavorable factor.

Age, length of hospitalization up to 30 years, and the presence of a family history of mental illness were shown to have no significance in determining the selection of patients for treatment with Frenquel.

Patients with normal pre-psychotic personalities, with marked delusions of all types, in association with incongruity of affect, without intellectual deficits, but showing little antagonism are those most likely to benefit from the drug.

It is suggested that further and more intensive studies in this limited field are now called for, and that higher dosage over a longer period or a maintenance dose of this drug may well prove a more than useful weapon in the psychiatric armamentarium.

(Author's Abstr.)

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Diffuse Degeneration of the Cerebral White Matter in Severe Dementia Following Head Injury

It has been shown that a closed, apparently uncomplicated head injury may be followed by a diffuse degeneration of the white matter and consequently may completely and permanently incapacitate the patient. The extreme dementia produced by such a lesion should not be confused with coma, which has different physical signs. The nerve fibre degeneration is not due to cortical cell loss, nor to infarction or laceration of brain substance. Its pathogenesis has not been determined but evidence points to physical damage of nerve fibres at the time of injury as a likely cause.

It is at present not possible to say how frequently such white matter degeneration occurs because it has not been looked for in acute head injuries. In our series of 26 patients dying from head injuries six weeks or more after the accident, it was the significant pathological finding in about one-third of the cases.

It is impossible to say whether the nerve fibre damage is at any time reversible and what part, if any, it plays in the production of the signs of concussion, but the possibility that it may play a part should be borne in mind.

It should be remembered that such a diffuse white matter lesion may have to be looked for with care and that it is not enough to examine the brain-stem reticular formation or the cerebral cortex when investigating cases of severe disturbance of consciousness after head injury.

(Author's Abstr.)

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