

SCIENCE DISCUSSES PSYCHIATRY

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The journal *Science* (31 Oct 2003, pp.808-810) discussed the need for a revision of psychiatry's *Diagnostic and Statistical Manual of Mental Disorders*. The discussion was based upon a book titled *A Research Agenda for DSM-V* (ISBN 0-89042-292-3) published by the American Psychiatric Association. The book itself is available on the Internet. As a book review, *Science's* discussion seems both fair and adequate, although damning of psychiatry.

1. As reported in *Science*, the most recent edition of psychiatry's diagnostic and statistical manual, which carries the short title DSM-IV-TR, is unsatisfactory as a diagnostic tool. This DSM yields diagnoses that are dependably repeatable, but are, for the most part, meaningless as to the cause of the disorder. The various diagnosed disorders do not connect with our rapidly expanding knowledge of what is going on physiologically within the brain. It is this fact that has evidently alarmed psychiatrists into admitting the limitations of psychiatry as currently practiced. As explained in *Science*, it is hoped that all diagnostic problems can be understood and solved in ten years, which is the tentative planned length of the research agenda.
2. Beyond the foregoing problem, diagnoses under DSM-IV-TR require a minimum number of checks on a checklist of the symptoms that point to a particular disorder. For a particular disorder, some 20 to 50% of patients may fail to meet the required diagnostic symptom count and so are categorized as "not otherwise specified" (NOS). These are ignored in experimental trials, even though the patient may clearly be suffering from some of the symptoms of a well-known disorder. Insurance companies pay for NOS treatment, but it is evident that psychiatric diagnoses today do not deal with all of the subtleties of mental disorders.

To put it briefly, many mental disorders cannot be definitively diagnosed today. By publishing this book, the profession of psychiatry is recognizing psychiatry's limitations, and plans to spend ten years researching its problems in the hope that the situation can be resolved by then.

The trouble with psychiatry could lie in the fact that psychiatrists have traditionally ignored part of their data. For example, nowhere in past DSMs is there a treatment of "love" except in its physiological, pathological, and relational aspects. Surely love is a mental activity of some importance. Why, in psychiatry, is there no study of how love differs from lust?

My colleagues think of me as a parapsychologist. However, for the last several years I have been considering issues associated with love. I have put my observations into a document that could be titled "A Study of Love and Lust." Fearing an adverse public reaction to such a forthright title, I have called this document, simply, "Psi Bonds: What Are They?"