

Comments

Dear Editors,

The letter of Dr Okada raises a very important and timely problem and it is of particular significance that it has been written by a Japanese colleague. Modern Japanese medicine has been, since its birth in the Meiji area, submitted until recently to mainly German influences. In the field of psychiatry the two most important influences have been those of Kraepelin and Jaspers. Still, in 1954, Prof U Uchimura, then Head of the Department of Psychiatry at the University of Tokyo, while emphasising the role of Kraepelin's work as the basis on which Jaspers' psychopathology was built, considered that "modern German psychiatry seems to have been predominantly under the influence of Jaspers". I cannot discuss here the limits of a discipline which has gained its generally accepted meaning through the publication in 1913 of the "All-gemein Psychopathologie". One could argue that psychopathology is not restricted to the Jaspersian type and its derived forms, that the school initiated by Ribot, which includes names such as those of Pierre Janet, Georges Dumas, Henri Wallon, Charles Blondel, Daniel Lagache or Jean Delay represent a specifically French tradition, and that in some of its aspects psychoanalysis, whatever the hostility shown by Jaspers, has been the origin of a special brand of psychopathology. Dr Okada's assertion about the decline of influence of the psychopathological approach, even in German speaking countries where it was born, as expressed in the number of specialised journals and related papers, is perfectly right. The main factor seems to lie in the pervasive influence of the pragmatic philosophy introduced by the DSM III with its emphasis on purely symptomatic descriptions and with his rejection of what is depreciatorily termed "hypothetical unproved concepts" to which obviously those used by psychopathology belong. One can of course raise the question of the relation between such an attitude and the basic permanent trends of the American scientific thinking. How-

ever, whatever the answer, the leading role taken by psychiatrists in the United States is, in my view, the decisive factor. I do however have some reservations about Dr Okada's historical comparison between the continuing existence of psychopathological publications in Japan, Spain and Senegal and the "vigorous cultures which rose on the outskirts of the Roman Empire". Leaving aside the problem of Japan, on which Dr Okada is certainly an excellent judge, I must mention that the Senegalese and Spanish Journals, whose influence is, in any case, extremely limited, owe their existence to specific local factors; the role of the late Professor Colomb who introduced a psychoanalytic-ethnological point of view in Senegal and of Spanish psychiatrists of the older generation (such as Professors Lopez, Ibor, Sarro and Llaveró to mention a few names) who were trained in German speaking countries. One cannot escape the impression that the present defenders of psychopathology are fighting a rear guard battle even in Heidelberg or in Vienna. I personally believe that we shall witness in the future a rebirth of the discipline although certainly in a form quite different from Jasper's concepts, but I doubt that we can foresee where and how it will take place.

Prof P Pichot

Dear Editors,

It is certainly true that psychopathology has been developing very well in many countries outside Europe. The most recent demonstration of this is the creation of a society devoted to the study of psychopathology and diagnosis which is issuing its own journal in Korean. At the same time, however, there are journals and publications that express an interest in psychopathology in Europe, for example, *Development and Psychopathology*, Cambridge; *Klinische Psychologie und Psychopa-*

thologie, Stuttgart; *Analytic Psychotherapy and Psychopathology*, Rome; *Psychopathology*, Basel; *Psychologie*, *Psychopathologie*, *Psychiatrie*, Vandœuvre-lès-Nancy.

The second main point which Dr Okada makes deserves perhaps even more attention: there are vast differences of meaning which users give to the word *psychopathology*: In fact, *psychopathology* is used not only to describe the study of morbid phenomena in Jasper's sense but also to describe numerous other concepts, ranging from the clinical condition of a single patient to phenomena harming society, eg violence.

It would certainly be interesting to use the stimulus provided by Dr Okada's letter and produce and publish in a subsequent issue of *European Psychiatry* a list of journals and societies dealing with psychopathology, worldwide.

I hope that these comments may be useful and remain with best regards.

Yours sincerely,

Dr Norman Sartorius,
Director,
Division of Mental Health

Dear Editors,

I take the opportunity to respond to Professor Okada's interesting observations regarding psychopathology. I have a different perspective on this matter. In many ways, there has been an enormous increase in interest in psychopathology in recent decades. In preparing DSM IV, we conducted 150 literature reviews on the most important diagnostic questions and were impressed by the surge in research interest that has been inspired by the availability of explicit diagnostic criteria. The current emphasis on descriptive psychiatry can be understood as a return of interest in the study of psychopathology. This is very much inspired by and in the tradition of Kraepelin's work in psychopathology. The exciting next steps for our field will probably take us towards a much deeper understanding of the pathogenesis of psychopathology and this will lead to much improved methods of diagnosis and treatment.

Sincerely,

Allen Frances, MD,
Professor and Chairman