

including psychologists, social workers, welfare officers, parsons, teachers, marriage guidance counsellors, hypnotists and evangelists have entered the field. They are backed by even greater numbers of enthusiastic amateurs whose need for a person in distress overcomes any inhibitions their lack of training and experience should create.

The public must like that sort of thing or it would not flourish. What we as psychiatrists should be very wary of is that we do not select one group from among them and by association give them an air of medical respectability. I would go further. I would seriously question the practice of taking part in their training, for once 'trained' one has precious little control over them.

Psychiatry has been ridden for years with the practice of the cult, but as doctors we are flexible enough to surrender or modify a useless model for a more useful one. If all psychiatrists had no medical qualifications and were committed entirely to, say, a dynamic model, how would recent psychopharmacological advances have been incorporated? We have problems enough in psychiatry without creating new ones. I would not forbid meddling, neither can I aid, abet or even condone it.

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#### PERSONALITY VARIABLES AND ALPHA ENHANCEMENT

DEAR SIR,

The paper by Travis *et al.* (*Journal*, June 1974) is interesting in that it claims to demonstrate a relationship between a personality variable, i.e. neuroticism, and feedback control of alpha rhythm. However, this conclusion is not justified on the basis of the evidence which they provide.

They do indeed demonstrate that over five training sessions an increase in alpha abundance occurred in both the high-N and low-N groups. However, Lynch and Paskewitz (1971) have pointed out that to select a period during which the subject is resting for measurements of baseline alpha is unacceptable in this context, so that the true measure of alpha enhancement is  $d\alpha/dt$ , i.e. the slope of the graph.

With this in mind, reference to the results of Travis *et al.* indicates that there is in fact *no* difference between the two groups. What they do demonstrate is that subjects with high N scores exhibit more eyes-open alpha.

It is also important to consider the significance of

an increased alpha abundance over time. In the light of the work of Cleland *et al.* (1971), who demonstrated higher alpha increments with non-contingent than with contingent feedback, it is impossible, in the absence of a non-contingent feedback control group, to ascribe such changes to feedback. An alternative and more parsimonious explanation is that anxiety about the experimental situation inhibits the production of alpha activity during the early part of the experiment, but as this anxiety habituates and the patient relaxes alpha abundance increases: Travis *et al.* have demonstrated that the rate of habituation is not related to N score.

This highlights some of the difficulties in the interpretation of results of brainwave feedback experiments: Lynch and Paskewitz (1971) feel that it is unlikely that true feedback control will ever be demonstrated unequivocally in man.

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#### REFERENCES

- CLELAND, C. S. *et al.* (1971) Alpha enhancement: due to feedback or the nature of the task. *Psychophysiology*, **8**, 2, 262.  
 LYNCH, J. J. & PASKEWITZ, D. A. (1971) On the mechanisms of the feedback control of human brain wave activity. *J. nerv. ment. Dis.*, **153**, 3, 205.  
 TRAVIS, T. A., KONDON, C. Y. & KNOTT, J. R. (1974) Personality variables and alpha enhancement: a correlative study. *Brit. J. Psychiat.*, **124**, 542.

#### NORTHERN IRELAND: MISLEADING 'PSYCHOLOGY'

DEAR SIR,

Dr. Arie's gentle review of Rona M. Fields' *Psychology of Northern Ireland* (*Journal*, July 1974, p. 107) underestimates the damaging effect of such a publication upon the credibility of psychology as a discipline. This book was published alongside a series of distinguished and useful publications in the field of education and psychology and as such may be accepted by many as having the same standing.

The obvious enthusiasm and concern of the author cloak her incredible naivety, and may lead less informed readers to accept such statements as that the internees were 'forced' to take pills which 'it turned out were Librium—a drug which has been found to have a debilitating effect on the parts of the nervous system involved in sexual arousal' (p. 154). The claims that 'no man or boy who has undergone interrogation, whether or not internment has followed, has not suffered a damaging personality

change' (p. 69) or that 60 per cent of all internees showed evidence of brain damage (p. 72) presumably due among other things to 'the hooding itself (which) resulted in a decreased supply of oxygen to the brain and central nervous system' (p. 73) are clearly ludicrous to any who have striven to detect brain damage or personality change following clearly established gross cerebral insult. The resurrection of the 'bromide in the tea' myth will amuse ex-servicemen, but more serious and difficult to refute is the claim that tortures were commonplace and included electro-shock applied to the genitals. One can only hope that this will be firmly and truthfully denied.

Unfortunately many of the claims and palpable inaccuracies have received wide publicity in the Irish press and have been accepted by many as

'scientific facts'. This book uses a false veneer of psychology to denigrate the medical services, the army and most hurtfully the people of Northern Ireland. It contributes nothing to the science of psychology and confuses the understanding of an already complex situation by adding further fuel to sectarian fires.

If Dr. Fields has any data which can contribute to an understanding of the issues she raises let her publish them in the scientific press where they can be submitted to scrutiny and evaluation by her peers.

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