need to maintain the "delusion of fusion" would be greater, as a regressive defense. A consequence of this, which we term a derivative defense, would be inhibition against developing modes of speech which heighten awareness of individuality and nuances of feelings and attitudes.

A scale for "felt powerlessness" was administered, and showed significant differences among group means in the order: Isolated Community, Town Lower and Town Middle class samples. Three measures of verbal accessibility were also used; on each of these the I-C sample, which most typifies the stereotype of the mountaineer, scored significantly lower than the T-M, with the T-L group evidently between the others. An estimate of differentiation of vocabulary used also was obtained, and the results were similar.

Based on this preliminary work it is concluded that the theoretical integration proposed is promising. We also have verified the reticence of the cultural group at interest, but demonstrated that their inaccessibility is not confined to outsiders; it extends within the family. However, it is markedly less among the girls than the boys in the age-range studied. It is concluded that the abandonment of attempts to reach the women in these families by verbal methods is certainly not justified without a more intensive effort under optimal conditions than is presently usually available to them.

Finally, the futility of attempts to deal with Appalachia as if it were a single, undifferentiated culture is underscored by the distinctions in life-style demonstrated even in this small study.

Discussants: Leo H. Bartemeier, Huber F. Klemme

LSD Research

Chairman: Charles C. Dahlberg

EXPERIMENTAL INVESTIGATION OF LSD AS A PSYCHOTHERAPEUTIC ADJUNCT

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The intention of this paper is to suggest several research strategies for examination of LSD as an adjunct to psychotherapy, using as illustrative material an ongoing project in this area. No discussion of the "psychedelic" and "psycholytic" type therapies is included. What is considered, instead, is the use of LSD in "conventional psychotherapy." To remain outside the problems inherent in any definition of "psychotherapy," it is loosely defined as a procedure in which one individual is seen by a qualified professional person on a regular basis, one or more hours per week over some period of time, with emphasis upon the communicative process between the therapist and patient. Because of this emphasis, only subhallucinatory doses of LSD have been utilized for adjunctive treatment in the past, and are considered in the present paper.

Attention is given to the intensive study of "process" rather than "outcome" variables, the latter of which form the nucleus of much research work in the field. It is suggested that process variables, which have arisen out of prior clinical investigations, are appropriate "targets" for research. In exploring the efficiency of LSD as an adjuvant, such process variables might be: increased emotional expressiveness, heightened transference, greater richness of fantasy life, recall of childhood experiences, richer associations and changes in defensive structures. The question is *not* "Does LSD facilitate psychotherapy?" but rather, "What effects does LSD have on the processes which are claimed to be of significance in therapy, and how can these be operationally defined and objectively measured?" It remains for other investigators to determine whether these *are* in fact factors which facilitate psychotherapy, or whether psychotherapy as a method in itself is a valid and useful one.

Can LSD be considered an adjunct to psychotherapy in much the same way as the tranquillizing and antidepressant drugs are considered adjuncts? The question raises a host of subordinate questions which require systematic investigation. (1) At what point in therapy should LSD be administered, at what intervals, for how long a period of time, and at what dosage levels? (2) With which types of patients is LSD useful? (3) To what extent do factors of expectancy and therapist attitude change play a part in the results obtained?

The type of experimental method discussed is the longitudinal, single-case study. The advantages and disadvantages of the patient serving as his own control are discussed along with suggestions for the development of techniques tailored to the particular study, the audiotaping and perhaps, filming of sessions, and the degree of interference with the regular therapeutic process that such techniques may entail. The statistical handling of single-case studies is given some attention as well as the extra-experimental problems that invariably affect longitudinal drug studies.

CURRENT STATUS OF PSYCHEDELIC RESEARCH

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The current research program on psychedelic therapy at Spring Grove State Hospital will encompass 100 alcoholic and 100 neurotic patients who will have been treated with LSD-25 in the matrix of a therapeutic setting. This includes intensive preparation, a day-long session with a high dose of LSD-25 and follow-up interviews as needed. Evaluations are carried out one month before LSD, 1 week after, and then again at 6-, 12-, and 18-month intervals. The treatment phase is about two thirds completed. Psychedelic therapy borrows heavily on the major existing paradigms: psychoanalytic, existential and behavior therapy. The patient is asked to prepare a biography according to a prescribed form. During preparation he is asked to focus on his difficulties in living and their genetic determinants. In the early phases of the LSD session itself, there may be abreaction, catharsis, reliving, and genetic insights. Later, the focus is on such questions as the meaning of life and the value of existence. Post-LSD sessions mainly reinforce new discovered concepts of self and self-worth. Conjoint family therapy is often a valuable adjunct.