

December 5, 1968

Dr. Harvey Tompkins  
Chairman, Panel on Neurology and Psychiatry  
Health Research Council  
Department of Hospitals  
125 Worth Street  
New York, New York 10013

Dear Dr. Tompkins:

The HRC review of the proposal "Methadone in the Treatment of Chronic Active Psychosis" was read. I am taking the opportunity (as the suggestion of Dr. Lehr) to acquaint you with our program and the reasons for our interest in this compound.

This study is part of an evaluation of centrally active compounds to determine what relations can be defined between drug induced EEG changes and clinical behavior in man. Most commonly used drugs have been assessed (see review) and we are now attempting predictive studies. Examinations of cyclazocine, fenfluramine, thiothixene, and sulthiame have been completed and those of doxepin, naloxone, marijuana, THC, and heroin are in progress.

Methadone is widely used in treating opiate dependence. We have found no useful reference to its use in psychosis. Methadone evinces EEG characteristics that warrant the prediction that its use will be associated with a sharp reduction in active psychosis. If true, the EEG-behavioral theories will receive some affirmation; if not true, the theory will require reassessment. This project is not a simple clinical evaluation, as the reviewers imply, but a test of this hypothesis. We have carefully justified each experiment (especially this one) to the Department Chairman and the Research Committee of the College.

The study is part of an NIMH supported program, "Quantitative EEG Studies in Human Psychopharmacology" - supported since 1962 in Missouri and since 1967 in New York. A copy of the relevant portions of the grant application, as completed in 1966, are enclosed.

Dr. Harvey Tompkins

-2-

December 5, 1968

The rejection of this project, justified by conventional catechisms does justice neither to the Panel, nor our scientific progress, nor the treatment failures who may be helped if the method is successful. I trust the Panel will have an opportunity to review its recommendation.

Sincerely yours,

Max Fink, M.D.  
Professor of Psychiatry

MF:kp

cc: Dr. David Lehr  
Dr. Alfred M. Freedman