

January 9, 1967

Dr. Richard Abrams
104 Childress
Sheppard AFB, Texas 76311

Dear Dr. Abrams:

I have discussed your request with Dr. Freedman and Dr. Kaplan and we have reviewed the experiences you have already had in relation to the study program in the Department. I am pleased that the Chairman has been able to affirm that a study program should be undertaken during the latter portion of your training.

During the first few months the initial assignments will be made in those areas in which you lack specific experience as narcotic addiction, the mental hygiene clinic and child psychiatry. As soon as these are accomplished in a satisfactory fashion, we believe that the study program you have outlined may be undertaken.

The critical part of the study is in the development of different EEG patterns with unilateral ECT. I have read the Zamora article and am unimpressed. I have requested the Martin article but have not yet seen it. Surely, your own experience becomes very critical and I would suggest that you outline the observations which you yourself have made regarding the EEG differences with unilateral and bilateral ECT. Especially, if you have samples of the records in subjects treated with unilateral ECT showing improvement clinically and comparing these with other subjects of approximately the same age showing improvement with bilateral ECT.

In reading your protocol of December 6, the introduction is straightforward and so is the hypothesis, however, of the four alternate explanations, the fourth is unclear. The first three are quite good.

The method is relevant and I would only add that the EEG delta activity is to be recorded following ECT at a specific time, probably 24 hours. Your suggestion of the determinations of CSF acetylcholine and cholinesterase is a good one, but this may be the most difficult part of the study to accomplish.

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At our last meeting you suggested that you would like to collect the literature relevant to this problem. The citations which I have listed at the end of my few reports are those that appeared to me to be most relevant. Surely, by checking these one can obtain the citations to many other articles which, perhaps should be in your library. If you wish, I would suggest that at the next opportunity for you to be in New York that you visit with me and we can go over my collection making such notes as may be necessary to provide you with the basis for a literature review. I have not carried out a systematic survey of ECT literature since 1959 and perhaps an alternate solution would be to check through the major indices for literature and ask for the articles which may have appeared in journals not ordinarily available in the major New York libraries.

I am delighted that we will have an opportunity to undertake this study program.

Good luck in your present programs.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry

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