

September 26, 1962

Drs. Donald Klein and Max Pollack  
Hillside Hospital  
P. O. Box 38  
Glen Oaks, New York

Dear Don & Max:

Thank you for your recent note. I shall try to answer your questions seriatim:

1. Abstract: A good idea, and I have taken the liberty of making some editorial comments. The conclusion promises individual profiles. How do you plan to do this?

Since I will be unable to participate meaningfully in these analyses, I would suggest you submit this from Hillside Hospital only, under your joint authorship. I would be pleased to read the draft report as written.

2. All covariance analyses are in the master books or the "duplicate" book. The covariance of the Rorschach (Problem 15) was given to Ira and a copy of the write-out is in the big book. Covariance of "new" ratings are in the large book and should have your notes with them. It is marked Problem 11-14, dated April 6. One copy was given to you for your work and should be in your desk as well.

3. Group comparison: Under separate cover I am sending you the original U-test and K-W test sheets (with errors corrected after machine processing); the operative procedure for IBM program; the program deck for the 7072; the write-out of the program; and the test problem write-out using this program. This is a completed program for book tests, and can be run on a 7072. It cannot be run on a smaller machine since it needs a large memory. Program goes to step of "table look-up" which is very time consuming and best done by secretaries. Reference is Siegel's Non-parametric Statistics.

(a) Cost: We will be billed \$400 for this job. This will be added to the September statement from the Washington University Computer Center. Since it is applicable to 2715 and 4798, I will suggest that one-half the cost be charged to each grant.

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(b) Runs: The Washington University center will run this program for us at the following charges:

For punching data @2.75/hr.  
For 7072 time \$5/min. (user's rate)

To punch 100 problems (50 subjects x 3 drugs) will take about \$20 for punching. Each run of both M-W and K-W takes about 1 minute on 7072. If you wish any runs on the presently available data, have the girls transcribe the raw data to sheets (covariance sheets will do nicely) and send them on to us here.

Good luck with the APA.

Sincerely yours,

MISSOURI INSTITUTE OF PSYCHIATRY

Max Fink, M. D.

MF:aw

Summary: Self-descriptive questionnaires have been advocated as a preliminary device in psychiatric case study. In this investigation various patient-rated instruments were analyzed, and the self-ratings were compared with measures of ward and interview behavior and with psychiatric diagnosis.

Self-ratings in the areas of symptom, mood, personal attitude and social attitudes using the: 1) Frank Symptom (John Hopkins) check list; 2) Clyde Mood Scale; 3) Whitman Attitude Scale and 4) California F Scale were obtained in one hundred forty-four voluntary psychiatric in-patients referred for psychotropic medication.

In addition, each patient was rated by observers using the 1) Jenkins Psychotic Reaction Profile (Ward Behavior); 2) Clyde Mood Scale; 3) Hillside Hospital Somatic Treatment Referral Scale and 4) the Interview section of the Lorr MSRPP.

A factor analysis of the self-descriptive scores resulted in the following factors: 1) Clear Thinking; 2) Somatic Complaints; 3) Dysphoric Complaint; 4) Friendly Mood, Dependent Action; 5) Aggressive Mood and Action; 6) F Score, Friendly Action and 7) Angry-Dependent-Withdrawn Feeling.

A factor analysis of the description by observer scores resulted in the following factors: 1) Angry; 2) Withdrawn; 3) Tension-Apprehension; 4) Communicative Disorganization; 5) Somatic and Neurotic Complaint; 6) Sleepy Depression; 7) Guilty Intropunitiveness and 8) Rate and Reactivity.

These factor scores were analyzed as profiles for each patient, and led to groupings according to:

- 1) Self-descriptive profile; 2) Description by other profiles.

The relationship between these groupings and psychiatric diagnosis will be discussed.

Non-Parametric Statistical Tests  
Operating Procedure

Data should be punched in the following format:

1. The first card should be blank (or at least numeric) in column 1. The other 79 columns will be printed as the first line heading for that particular problem.
2. The second card is a control card punched in format (I2, I1, 10I3) containing the following information:
  - a. I2 - the number of columns for this problem - maximum of 10, minimum of 3.
  - b. I1 - a 1 or a 2. 1 means the signed scores will be analyzed; 2 for absolute scores.
  - c. 10I3 - up to 10 numbers giving the number of elements in each column, maximum of 150 for any one column.
3. The data cards follow, punched in format (5H , 15F5.0); i.e., the first 5 columns may contain identification and will be ignored. There should be a set of data cards for each column, one set right after the other. However, each column must start on a new card. Also, the number of elements for each column must correspond to the number punched in the control card.

The preceding gives the format for one problem. Any number of problems may be run at one time, with no pause in between. The complete data sets should follow one right after the other.

The data should be put on tape in card image form (Fortran card-to-tape). They will be read from tape 3. Output will be on tape 2. The systems tape can go on any unit.

No tape mark is written on the output tape by the system at the conclusion of a set of problems. If the Batch Compiler is on unit 0, units 1 and 4 are ready, and alteration switch 1 is on, a tape mark will be added. Otherwise, it must be done manually.

# Non-Parametric Statistical Tests - Operating Procedure

0+1

Data should be punched in the following format:

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~~Footnote to data preparation: there must be a segment mark following the last problem; i.e., the last data card should be followed by a card which is blank except for an "S" in column 1.~~