

ADDENDUM

Regarding my interest in the measurement of slow wave activity I am interested in a paper with the tentative title "Neuropsychological Changes with Induced EEG Slowing".

There has of late been several studies claiming specific psychological patterns associated with EEG slowing. I feel that a comparison of placebo, chlorpromazine and EST on a number of psychological tests is worthwhile. For 2/3 of the EST patients we have measures of the percent time delta. We have no such comparable measures for chlorpromazine or placebo. What I would like to obtain is comparable data by hand analyses as soon as is possible. Rather than have Hanna measure these immediately I would like to obtain the hand measurements that Karl did as a starter and have Hanna do the remaining ones.

In any case I will send you a copy of the abstract I would like to present before the Academy of Neurology or the EPA. I have already done most of the group comparisons for the psychological tests. Abstracts have to be in by December 1, and I will therefore get the abstract to you by November 23. However, I would like to make some statement regarding the percent time delta with placebo or chlorpromazine. The figure for the convulsive group is 50%. Now, is the figure for the chlorpromazine group 10% and that for the placebo 5%.

Please let me know as soon as possible.

Sincerely,

① There are not comparable to the ECT data and probably of such low reliability as to be unusable.

② You are suggesting a conclusion that is probably untrue: "delta" of ECT is ^(similar) = or \approx delta of CP.

(a) ECT: we used words "delta" "slowing" "theta" and "slow wave" without precision and no hand measure of that period is comparable to any recent measure.

(b) Waves of 3-7 cps in ECT are induced at high voltage;

with "trains" common; exaggerated by hyperventilation;
respond to autochallenges directly, etc.

Waves of 5-7 cps are seen with CP, with 3-4 very
rare; of low voltage, not exaggerated by HV; and
I am not sure about response to autochallenges, but
it is limited.

③ Any figure you pick is artificial. I do
not believe we have data to allow comparability of
ECT "slowing" and CP "slowing".

If you wish to compare test performance
change in PL, CP + ECT, I think the EEG statement
can best be qualitative (as above) + not quantitative.

If you wish quantitative data, I do not know how to
derive this from the CP + PL data ^{as} "comparable
data by hand analysis".

I will be glad to read the abstract
but would hope that haste does not get science out
on a limb!

Trax