

February 14, 1964

Dr. Max Pollack
Hillside Hospital
P. O. Box 38
Glen Oaks, New York

Dear Max:

I have received the records and as soon as I have a chance, Turan and I will go over them. I hope we can confirm some of the "analyzer" data.

Two events occurred at the meeting of the Clinical Committee which may interest you. I was discussing the general problem of the EEG analysis with a number of the staff, and our recent discriminate function came up for discussion. I indicated that the group of schizophrenic patients who stood out were most likely those who were classified as childhood schizophrenia. Knowing Dave Engelhardt's interest in this question, I suggested that he undertake such a study in his populations in Brooklyn. He became very much interested and asked me to collaborate. This is most difficult, but I suggested that you may still be interested in it, and I knew of no one who could do a better job. Are you still interested in tracking down the EEG changes in kids? If so, I would suggest that you call him in Brooklyn, and I know that you will find him helpful.

The Clinical Committee also discussed the problem of evaluation of drugs for the treatment of depression. In addition to the collaborative studies of schizophrenia, they will probably launch one on depression this fall. When the model was presented, to compare imipramine against placebo, I took the position that we could learn even more if there were a sufficient number of subjects treated with imipramine, chlorpromazine, and placebo. They seemed to accept this recommendation with the exception of the addition of Kemadrin to the chlorpromazine. They will probably make a study similar to our own.

One truth emerged, and that was that we had failed to present clearly the data on the therapeutic efficacy of chlorpromazine in depression. Before John Kramer left, I had asked him to write this up, and my records have only an incomplete draft of that report.

Dr. Max Pollack

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I believe it would be worthwhile to summarize the observations in the depressive group alone, comparing the clinical results with the three compounds. It would be most helpful if this were completed before the beginning of May, so that copies could be made available to the Clinical Committee as a basis for their collaborative study.

If they undertake such a study, it represents a unique opportunity for us to have a test of some of our hypotheses presented in 1959, which can only be adequately tested with a large sample.

My own schedule is very tight for the rest of this month. I believe I could work seriously on this problem in the latter part of March. Does it interest you and Don?

I would still like to see a copy of your schizophrenia report, and if there is an extra one available, I would suggest that you send it to Dave Engelhardt.

Sincerely yours,

Max Fink, M.D.

MF/jb