

May 11, 1971

Mrs. Lorraine Lasker  
Research Administration  
New York Medical College  
New York, New York

Dear Mrs. Lasker:

RE: Comparison of Accelerated  
Convulsive Therapies

I would be grateful if you would respond to the note from Mr. Parris regarding our study of ECT.

ECT remains the principal, effective therapy of psychotic depressions. In comparison to antidepressants, all studies have shown it to be more effective in outcome and more rapid in onset.

Since 1966, multiple treatments under oxygenation have received special study with good results.

The principal defect in ECT today remains the 5-8 days required for treatment, particularly in suicidal cases.

ECT is an active treatment at Metropolitan Hospital.

Contrary to the consultant's opinions, ECT is now receiving additional study because its efficacy is not duplicated by drugs, particularly at such centers as Harvard (Drs. Schildkraut and Kety); Johns Hopkins (A. A. Kurland); Washington University (Eli Robins); U.C.L.A. (A. Mandell). These scientists are actively involved in re-assessing ECT and this study is part of the renewed interest.

I have studied ECT since 1954; and this project is an effort to answer a public health question. Its relevance to suicide and depression is high. Although I did not carry on studies in 1962-1968, I have renewed my studies because the newer techniques offer special possibilities to reduce hospitalization and suicide.

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In addition, I have been asked to edit a special issue of "Seminars in Psychiatry" (Grune and Stratton) on ECT for February 1972; and to be consultant to NIMH in an international symposium on ECT in 1972.

We are continuing to treat our patients with ECT as the staff recommends. I hope you can allow these trials of our techniques so that we can classify the issues of frequency of seizure and electrode placement.

Sincerely yours,

Max Fink, M.D.  
Professor of Psychiatry

MF:kt

cc: A. M. Freedman