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Workaholics Anonymous Comes to Japan

A recent Tokyo Associated Press dispatch described a "group of middle-aged men, sitting on folding chairs in a smoke-filled room, taking turns talking about their addiction and the agonizing downward spiral that led them there." However, they were not talking about drugs or alcohol, but rather their addiction to work. They call themselves Workaholics Anonymous. The group was founded earlier this year by a leading authority on addictive behavior from the Tokyo Psychiatric Institute. He estimates that "ten percent of Japan's work force is in need of some kind of treatment for workaholism." Most of those who get together to share common problems express strong feelings of helplessness with respect to their desire to be accepted and to conform and be identified with their corporate "family." Much like alcoholics and drug addicts, they feel they have absolutely no control over the situation, other than to work as hard and long as psossible.

Last year the average Japanese office worker put in 2,044 hours, about 100 more than the typical American worker. The difference may be much greater, since Japanese companies and employees tend to ignore or under report working extra hours. The Japanese have frequently boasted about their strong work ethic and devotion to the corporation, but the recent rise in "karoshi," or

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sudden death due to the stress of overwork has prompted both unions and management to implement shorter work weeks and more vacations. Older workers find this change hard to accept. Sony Corporation Chairman Akio Morita recently urged that Japan should "reinvent itself to blend with prevailing attitudes and practices to avoid facing exclusion overseas."

Associated Press, Palm Beach Post, 4-29-92

Bad Stress Due to Bad Bosses

In a recent "National Boss Contest" sponsored by 9 to 5, The National Association of Working Women, bad bosses now far outrank good ones. This trend is ascribed to the fact that women are starting to fight back and express their feelings about such things as sexual harassment and unequal treatment with respect to salaries and promotions. One 55-year-old office worker's boss was the owner of an Illinois truck dealership where she had worked for ten years. She complained that he made her train a younger man to do her job, and then tried to cut her salary by \$4,182 to give him a raise. A Delta reservations agent reported that she and others who protested about "random piercing noises in their headsets" got no satisfaction, and that she was fired after rejecting a lower paid transfer. The top prize went to the head of a local government office in a small New York town. He required a mother of two to bring a note from her parents verifying that she was absent from work because of illness. The Wall Street Journal, 4-21-92

For further information on the original source of abstracts and other reprints available on similar subjects, please send a self-addressed stamped envelope to: Reprint Division, American Institute of Stress, 124 Park Avenue, Yonkers, NY 10703.

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New Computer Stress Test Measures Worker Fitness

Testing for substance abuse in workers is becoming an increasingly common practice. A recent survey revealed that three-quarters of U.S. companies have now instituted such procedures, representing a 250 percent increase over the last five years. Four and a half million transportation workers in jobs that involve safety must undergo drug testing. A new Federal law also requires additional testing for alcohol, and both tests will soon be mandated for an additional 1.5 million intrastate truck drivers. The problem is that some workers can get around this by abstaining from using illicit drugs prior to the scheduled tests. In addition, the results may take two or three days to come back during which accidents could happen in those with positive test results. Also such tests do not detect worker impairment due to fatigue, lack of sleep, neurological problems, stress, or taking legal medications like cold and cough preparations. These may produce drowsiness and impair thinking and the ability to react promptly and properly when quick decisions are required.

A variety of new computer programs, described as "fitness for duty" or "performance testing," claim to be much more effective and efficient in detecting impairment immediately. They are designed to accurately assess such things as hand/eye coordination, spacial perception, reasoning ability and rapid and correct decision making. As one proponent noted, "my concern when I get on a plane is to make sure the pilot is fit to fly at that time." Domino's Pizza does daily tests on truck drivers, warehouse workers, dough makers, and other employees, to make certain that they are alert

enough to use machinery which could cause injuries. If a worker flunks the tests, then the day is spent doing paper work, painting, or some other activity where they and others will not be exposed to potential injury. If the test is failed three times within a 90-day period, the worker must agree to counseling. A California company which transports gasoline and diesel fuel reports a substantial reduction in accidents and human errors since it began using the "Factor 1000 Program," which costs about \$100 per employee per year. NTI charges \$15,000 for its machine and Delta Software, sold by Essex, can be leased for a little under \$1,000 per year.

Manufacturers say this is cheap "considering the billions of dollars companies pay in workers' compensation and property damage." Some unions have expressed concerns about the potential misuse of performance testing. The National Air Traffic Controllers Association is concerned that the FAA might use the test to get rid of older employees whose work records are perfect but might not be able to do well on this type of evalution. However, as another union official who represents state, county, and municipal employees noted, "it's a hell of a lot better than asking our people to urinate in a jar."

The Wall Street Journal, 4-2-92

"Man is still the most extraordinary computer of all."

John F. Kennedy

Job Stress in Medical Residents

Internship and residency training are stressful times for most physicians because of the need to work long consecutive hours, important responsibilities such as having to make immediate decisions that could mean life or death, sleep deprivation, etc. Because such stress could seriously affect decision making, and court cases in which hospitals and medical personnel have been held liable for errors that have occurred during periods of overwork, many states have now limited the number of consecutive hours that interns and residents must be on duty.

To determine whether there was objective evidence of such stress, Belgian investigators studied hospital residents during training who were on call every tenth day from 9 a.m. until 9 a.m. the next morning. During this 24-hour period they were responsible for all admissions to the emergency department, as well as for routine ward work and shared responsibility for the intensive care unit beginning at 5 p.m. At 9 a.m. the following day they then had to resume their usual ward duties. Blood cortisol and ACTH levels were measured at 9 a.m. at the start of the on call period, at 9 p.m. the same day, and at 9 a.m. at the end of their tour. A significantly higher level of stress-related hor-

mones was consistently found at 9 a.m. on day two, after 24 hours of work, tending to confirm the presence of increased stress. While factors such as increased physical activity and sleep deprivation may have had an influence, it would appear that the high workload and extensive responsibilities were the most significant factors. As the researchers pointed out, "some stress is certainly desirable during residency training to enhance the acquisition of knowledge." However, other studies using questionnaires and a variety of performance tests, suggest that the common practice of 24-hour and longer tours of duty are counterproductive, and should be revised.

New England Journal of Medicine, 9-5-91

"The physician must have at his command a certain ready wit, as dourness is repulsive both to the healthy and the sick."

Hippocrates

Why Is America So Tired?

According to some authorities, one of the reasons is that we are working longer hours and not getting enough sleep. A Lou Harris poll found that between 1973 and 1988 the average work week jumped from less than 41 hours to almost 47, and true leisure time was reduced by more than one third. In the past year, both Time and Newsweek devoted cover stories to the increasing problems of fatigue, tiredness and exhaustion due to stress. Sleep deprivation is now so prevalent, that one prominent researcher indicated that, "most Americans no longer know what it feels like to be fully alert." A Fortune article entitled "The Workaholic Generation," painted a picture of baby-boom managers who typically get to the office around 7 a.m. or earlier, "put in 60-90 work weeks, take work home evenings and weekends, and travel as much as 70% of the time." More than half of CEOs polled expect middle and top managers to work at least 50 to 60 hours a week. This hectic pace often continues into leisure time activities, and many can't unwind because of time pressures. Thus trying to relax and unwind by going out to an elegant dinner that might take two or three hours, is replaced by grabbing a burger or pizza at some fast food place, so that there will be time to take in a movie or watch T.V. For many, the need to cram extra things into their free time means less time for sleep, which may also be viewed as a waste of time, since it is not productive. The problem is further compounded by the ironic fact that those who are most likely to require sleep, are often unable to get a good night's rest because of high stress and anxiety levels. As a consequence many become addicted to sleeping pills, tranquilizers, and/or alcohol.

Some effective tips for dealing with this prob-



"Ready to work at 8 o'clock, Velez!
Not just here at 8 o'clock! Ready to work!"

lem are 1. Exercise regularly. Over one third of sedentary individuals who exercises just one hour three times a week found that they slept better. 2. Sleep on a regular schedule. If you normally go to bed at 11:00 but switch to 2:00 a.m. or later on weekends, you'll throw your natural body rhythms out of whack. 3. Be careful about what you eat and drink before bedtime. Sleep is delayed by the digestive processes. A late night heavy meal can keep you up, as can stimulants such as coffee, tea, colas, headache remedies and cigarette smoking. A glass of wine or alcohol may help you fall asleep but when sedative effects wear off, and energy restoring dream sleep is suppressed so that you may find that you are suddenly wide awake at 3 or 4 a.m. 5. Use sleeping pills cautiously. People tend to become resistant to them and require increasingly stronger dosages to achieve results. 6. Stress reduction. Fifteen minutes of meditation, progressive muscular relaxation or yoga, or relaxing by taking a hot bath or reading a book can provide significant benefits. 7. Keep light out. Sleep-wake cycles are strongly influenced by melatonin secretion which is turned on and off by exposure to light. If you do wake up at night, leave the lights off. Studies have shown that even ordinary room light can affect melatonin and disturb normal sleepwake rhythms. New Women, October 1991

"Everyone should keep a mental wastepaper basket, and the older he grows, the more things will be promptly consigned to it."

Samuel Butler

Measuring Job Stress

Increasing concerns about the adverse health effects of job stress have mandated the need to develop scientific methods to evaluate and measure this complex problem. (continued on page 4)

Measuring Job Stress

(continued from page 3)

A variety of questionnaires and scales have been devised to study stress in specific occupations, particularly health care work environments. General measures are often used to rate such things as depression, anxiety, expression of anger, etc. The Mazlach Burnout inventory (MBI) measures perceptions of professional-client interactions in terms of emotional exhaustion, depersonalization and personal accomplishments. Attempts to measure occupational stress and strain in physicians and nurses have now resulted in the development of the Work-Related Strain Inventory (WRSI). This initially consisted of 45 statements designed to reflect stress-related symptoms reported in health professionals. This was based on a combination of other measures such as the Physician Stress Inventory (PSI), Self Rating Depression Scale (SRDS), Social Support Measures (SSM) and Social Desirability Scale (SDS). It was finally winnowed down to an 18-item questionnaire with the assigned items being accorded relative weights of significance, utilizing both reverse or positive scoring.

This revised WRSI test was administered to 2,000 physicians, nurses, emergency medical technicians, residents and flight nurses. Internal consistency was reliable and there was good correlation with other assessments such as the MBI, psychological symptomatology, and measures of depression and social support. The wording of the items were non-specific, so that they could apply to each of the occupational groups noted. Future studies will determine whether or not this population base can be increased to include other allied health professionals such as emergency room physicians, physical and occupational therapists, respiratory therapists, social workers and laboratory technicians. Internal and test-retest reliability is satisfactory and this short, easily administered questionnaire may well have important applications in other professional groups as well. Behavioral Medicine, Fall 1991

"The natural role of twentleth-century man is anxiety." Norman Maller

U.S. Workers Increasingly Dissatisfied, But Japan Is Worse

A recent Lou Harris Poll of office workers and executives in 15 countries suggests that the United States is still the best place for a white collar job, while Japan is at the bottom of the heap. Despite this, nearly more than one out of four U.S. workers complained that their quality of life at work had suffered, more than double those with similar complaints in 1978. In that year two out of three felt some connection between their job and life goals, in contrast

to only one out of two in the recent survey.

Although we tend to think of the Japanese as "leaders in total quality management in participative management ... that doesn't seem to have transferred from the factory floors into the offices of Japan," according to Lou Harris himself. Only 17% of Japanese office workers were very satisfied at work, compared with 28% in the European economic community, 39% in Canada and 43% in the U.S. Of the 4,000 adult full-time workers surveyed between January and April of 1991, roughly two out of three Japanese and European workers felt that their firms were continually trying to improve conditions, compared to 80% in the U.S. and Canada.

Associated Pres, 10-22-91 - Gannett Newspapers

"The reason why worry kills more people than work is that more people worry than work."

Robert Frost

Job Stress and Pregnant Workers

A recent pilot study suggests that pregnant women in high stress jobs may secrete excess amounts of stress-related hormones like adrenalin, which could trigger premature labor. This would result in the delivery of smaller babies, who would be at increased risk for respiratory and other health problems. Experiments in pregnant animals have confirmed that elevated levels of such hormones do decrease blood flow to the uterus and could possibly precipitate premature labor. Stress hormone levels were studied in 10 physicians and 13 Intensive Care Unit nurses in their third trimester of pregnancy. All had jobs requiring "long and irregular shifts, prolonged periods of standing, and mentally taxing duties such as decisions about patient care." Stress hormone levels were 58% higher on work days than on non-work days and were 65% higher compared to pregnant women in low stress jobs.

In a previous report, heavily stressed female physicians were not found to have any greater risk of pre-term delivery than a control group of women with less stressful jobs. However, they were much more likely to experience premature labor symptoms that required bed rest, or even hospitalization, to prevent premature delivery.

Science News, 3-16-91

"If everything seems to be going well, you obviously don't know what the hell is going on." Anonymous

Workers Pay to Hammer Car To Reduce Their Stress

That was a title of a recent newspaper article describing more than 300 local medical center employees who "paid \$1.00 a whack to clobber the aging Dodge in the hospital's parking lot." The car had been brought to a United Way flea market event by one of the workers, but it didn't sell. Instead "he donated it for bashing and watched proudly as the Dodge yielded its body to medical science." As one of the pharmacists who bashed the top of the car with a 10 pound sledge hammer said after his third swing, "The lady told me to purge my body . . . that definitely purged me."

In recent years we have witnessed a variety of punching bags and dolls, scream machines and other approaches to stress reduction by using strenuous physical exertion to get things off your chest or express your anger. The car bashing fad is not likely to take hold, but the incident does attest to the increasing problem of stress in health care workers and effective ways to relieve it. The medical center's consultant and stress specialist commented, "There's a lot of stress among health care workers...this is a band-aid approach. I don't think it has much long-term effect." His solution to

Palm Beach Post, April 20, 1991

"I'd rather be a hammer than a nail."

the problem is reading.

Simon and Garfunkel

Burnout in Prison Officers

While it is sometimes thought that most individuals gradually adapt to tough working environments, this does not seem to apply to prison officers and guards. In general, it is not the occupation but the person-environment fit that matters. While it is conceivable that the personality characteristics of certain prison guards might be such that they enjoy the constant stress, danger and challenge of their work, a recent Australian study suggests that most tend to become worn down emotionally and physically.

274 officers of varying rank, seniority and occupational location were evaluated. A prior study had shown that there were higher rates of emotional distress and heart disease among prison officers compared to the general population. In this report it was found that those who worked at medium or maximum security sites, tended to be "more dissatisfied, depressed, bored and anxious—and even had more colds—than those who worked at minimum security facilities." They also complained of more insomnia, back pain and stomach distress. Those who worked in the toughest prisons reported that they often feared for their own physical safety, felt more isolated, and had

little social support. Conversely, newer officers, with less time on the job, reported fewer adverse health effects, as did senior or specialists personnel who had little "front line" contact with inmates.

Australia/New Zealand Journal of Occupational Health and Safety 7:49-58 1992; New Sense Bulletin, February 1992

"In this world there is always danger for those who are afraid of it."

George Bernard Shaw

Beating Burnout and Brownout

The term "burnout" was coined over two decades ago to refer to a constellation of signs and symptoms due to job stress. Usually this happens over a period of months or years as a consequence of work overload. It is more apt to be seen in perfectionistic individuals or those who have impossible demands imposed upon them by superiors. Symptoms include fatigue, frequent infections, insomnia, gastrointestinal problems, diminished interest in sex and a tendency towards increased irritability and frustration. Often there is severe interference with concentration and decision-making ability and progressive isolation as "you work harder, accomplish less, and become more tired." According to the psychologist who first described it, "between 25 and 30% of workers" experience burnout at some time. "Brownout" is another term often employed to describe similar signs and symptoms of a lesser degree, and "rust out" implies an end stage to the problem.

While an obvious solution would be to guit, it's wiser to consult a therapist with expertise in career issues to obtain an objective opinion. Some effective strategies are: 1. Set boundaries and priorities with respect to what you have to do instead of always saying yes to work requests. 2. Learn to delegate authority as well as responsibility to others who may be able to do the job just as well. 3. Routine vacations are helpful but it's also important to take some personal time out on a regular basis to enjoy hobbies and personal pursuits. 4. Identify problems by keeping a stress audit on a daily basis for two weeks, and writing down who and what is bothering you, so that you can see where the problems lie and what can be done about them. 5. Take family and non-work friends you can trust into your confidence so that you can get things off your chest without worrying about whether your secrets will be leaked out at the office. Learn to communicate freely with them so that you on explain exactly what you mean. 6. Don't just use this as a way to let off steam, but listen carefully to their advice and suggestions, and act on them. New Woman, March 1992

Environmental Illness Or Job Stress

A mysterious ailment known as Environmental Illness (EI) is increasingly being self diagnosed by patients. The symptoms vary, but often include skin rash, memory loss and fatigue, believed to be due to unusual sensitivity to chemicals commonly encountered in detergents, carpeting or other common items at home, in the office, or in certain food products. Similar complaints are often voiced by workers suffering from "Sick Building Syndrome," who believe they are suffering from the effects of chemicals and toxic airborne products at work. In one study, 37 plastic workers in an aerospace manufacturing plant reported symptoms of watery eyes, stuffed noses, persistent headache, respiratory problems, dizziness and memory loss, after it was announced that new chemicals had been introduced into the manufacturing process. Although careful studies showed that the concentrations of these chemicals never approached toxic much less than clinically detectable levels, 50 of the 400 workers filed for workers' compensation.

"Sick Building Syndrome" has been clearly linked to stress in some reports. A variety of studies in affected individuals have shown a high incidence of depression and anxiety disorders before, as well as during, their reported illness. More than half of the chronic complainers had a history of psychiatric illness, whereas only 4% without symptoms had such problems. It was also noted that the workers who had complained of persistent psychological problems were also much more likely to have sought medical care for other physical ailtments. Many go to extremes to avoid exposure by following drastically restricted diets or confining themselves to a room designed to be free of any potential irritant. Certain doctors, who describe themselves as clinical ecologists, contend that some individuals may suffer from an immune disturbance that renders them unusually susceptible or allergic to environmental influences that do not affect others. However, the diagnostic techniques employed are generally unproven, and usually do not measure relevant immune parameters. For most individuals who believe they are suffering from Enrironmental Illness, psychotherapeutic intervention is apt to provide the fastest route to recovery. American Health, January-February 1991 Doctor, I'Ve Read, June 1991

Thomas Jefferson

Patients Who Refuse To Get Well

It is estimated that up to half of the patients seen in the office have symptoms that do not have any medical explanation. According to one leading authority on hypochondria,"10 percent of patients have no evidence of any medical disease whatever. On occasion, it is true that certain patients who may be labeled as hypochondriacs or "crocks" by frustrated physicians, really do have a problem that the doctor is unable to diagnose. More often, however, their symptoms are the result of emotional conflicts and a need for attention. Many such patients shuttle back and forth between various specialists, emergency rooms and medical laboratories in an effort to find relief. As a consequence, such "somatizers" run up medical costs that are 10-14 times higher than the national average. A recent report estimated that between \$20 and \$30 billion is spent each year on unnecessary health care for such patients. Unfortunately, this cost is passed on to everyone in the form of increased insurance premiums.

Recent research suggests that many patients may complain about their symptoms because they are more sensitive than others to physical sensations in general. While most of us disregard transient things like cold hands or a twitchy eye as being normal, hypochondriacs become firmly convinced that they are manifestations of some serious underlying disease process that must be diagnosed and treated. As a consequence, they become anxious and begin to scan their bodies for other signs of disturbances. This hypervigilance itself may uncover other complaints like a scratchy throat, muscle cramp or fatigue. These can often be prevented by instruction in various stress-reduction techniques. This allows anxious patients to learn how to distract themselves when they start to experience vague and disturbing symptoms. Such individuals often have an unrealistic view of what constitutes good health, and will improve further when they can be persuaded that some aches and pains are normal. Most studies have shown that at least two out of three patients with hypochondriacal symptoms are depressed, and three out of four also suffer from some sort of anxiety disorder, including panic attacks. When these are properly diagnosed and treated, hypochondriacal symptoms often disappear. However, it is difficult to get these individuals to see a psychiatrist, and many become angered at this suggestion because they believe their problems are real rather than in their heads.

Arch Gen Psychiatry, 10-91, 2-92

[&]quot;In matters of principle, stand like a rock; in matters of taste, swim with the current."

A Messy Desk Is a Sign of An Overworked Person

Sitting down to a messy desk is like "looking death in the face," according to the President of a large consulting firm. He points out that the average office worker has about 36 hours of work stacked on his or her desk during an average day, with only 90 minutes free to spend on it. With respect to executives, they can be expected to waste 45 minutes daily looking for something lost on a desk. According to the CEO of an executive search firm and the author of The Anatomy of a Great Executive, it's impossible to be a successful executive if you have a cluttered desk. "Orderliness is a form of power." Some people think that they can tell about your charcter by reading palms, others by going through the garbage, but a professional cleaner and the author of Clutters Last Stand-How to Dejunk Your Life, reads desks and their contents. "I can tell who's overweight by the Oreo cookies in the left hand bottom drawer . . . or how much makeup you wear, how much Vitalis you put on your hair." In the course of his activities, he's found everything, including "spark plugs, golf tees, rotten food, cockroaches, old explosive shells from Korea. They win one trophy in their life, they put it on their desk." "Desk Stress" is a term given to anxiety caused by having to deal with a messy desk. Your messy desk may also affect your chances of getting promoted, since people may start to think you are out of control. As a recent article noted, critic Roger Ebert's desk is "littered with Mickey Mouses, a gum ball machine, baby ducks and baseballs." Another senator's has so much junk on it that the staff has to put incoming mail on a nearby chair. In defense, however, messy owners are prone to suggest, "A clean desk is the sign of an empty mind.'

Gannett Newspapers, June 24, 1991

"Good order is the foundation of all things."

Edmund Burke



Increased Cholesterol Due to Threat of Job Loss

It is not generally appreciated that stress has a far more powerful effect on blood cholesterol levels than dietary fat intake. This has been demonstrated in acute situations, such as students before and after important examinations, and in a year long classical study of accountants which showed a sharp rise as income tax time approached, unrelated to any change in diet. A new study now confirms the same phenomenon in shipbuilders facing layoffs in Sweden. The increase was most noticeable in those complaining of sleep disturbances, which might partially explain the increased cardiovascular mortality observed both in the unemployed, and individuals with sleep problems.

750 middle-aged shipyard workers and almost 300 aged matched controls were evaluated with respect to risk factors for cardiovascular disease, psychological variables, alcohol consumption and dietary habits. They had initially been screened during a prior period of economic stability, and again six years later, when the shipyard was being closed. Serum cholesterol levels increased more in the shipyard workers than the control group, and there was also a correlation between cholesterol levels and sleep disturbances. Those workers threatened with unemployment had the highest increases in serum cholestrol, and hypertension was also more prevalent in those with increased cholesterols. British Medical Journal, 10-90 CV Digest, Cardiology World News, 2-3/91

"He is well paid that is well satisfied."

Skakespeare (The Merchant of Venice-1596)

Stress Affects Antibody Titers After Vaccination

A variety of reports suggest that individuals subjected to psychological stress are more susceptible to a variety of infections ranging from the common cold to AIDS. It has been postulated that this is due to depression of immune system defenses as a consequence of emotional stress. To examine this further, 80 individuals who were receiving low dose injections of Hepatitis B vaccine as part of a vaccination program were given questionnaires to report daily stressors and symptoms. These were evaluated two and six months after the first vaccination and antibody titers were measured at seven months. It was found that those in the high stress group had significantly lower antibody titers (570 iu./L) compared to the low stress group (1,440 iu./L). There was no significant correlation between antibody titers and smoking and alcohol consumption. This report would appear to confirm that antibody formation following vaccination can be impaired by psychological stress.

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Book Reviews • Meetings and Items of Interest

From Paralysis to Fatigue: The History of Psychosomatic Iliness in the Modern Era, Shorter, E., The Free Press, New York, 1992, 419 pp., \$24.95.

The term, psychosomatic, was introduced into American medicine by Flanders Dunbar in 1936. Psychosomatic illnesses were extremely popular in the 1940's and 1950's, and in this fascinating review, the author points out that certain psychosomatic complaints appear to emerge during specific periods of history and disappear. Hippocrates first introduced the term, hysteria, derived from the Greek word for womb, in the belief that vague complaints such as muscle spasm, headache, and abdominal cramps in unmarried women were due to sexual abstinence. This agitated the womb, causing it to search for satisfaction in other parts of the body, and presumably, this could spread to other nearby females giving rise to mass hysteria. One of the best examples is "tarantism," thought to be due to the bite of a tarantula, in which afflicted individuals had uncontrollable spasms of vocalizations and dancing or gyrating. In thirteenth century Italy, it was not uncommon for victims to run naked from their homes into the street, shouting, and dancing until they were exhausted. They would often be joiend by neighbors, with as many as 500 being similarly afflicted. Once bitten, it was assumed that the poison remained in the system, so that relapses could be expected in this, as well as St. Vitus dance, which was presumably due to some curse. In the nineteenth century, the diagnosis of "spinal irritation" was popular for a variety of vague symptoms such as spasms, unsteady gait and weakness, prompting many patients to seek outlandish treatments for this alleged disorder, with occasional "cures." Later on, the "reflex theory," or notion that every organ in the body could influence any other organ was in vogue, and women had their ovaries removed to cure migraines or palpitations. Thus, medical diagnoses not only seem to provide answers to the meaning of symptoms, but may also create and shape them. It is suggested that patients develop certain manifestations so that they will appear "legitimate" to physicians and that gender and family influences may play a role. Currently, although Chronic Fatigue Syndrome and Lyme disease are well defined entities, many more patients complain of the symptoms associated with these fashionable diseases than can be proven to have them. "Sick building syndrome," "Environmental Allergy" and outbreaks of mass hysteria at work, school, or large assemblages are other examples of the extraordinary ability of the mind and emotions to produce a wide variety of physical symptoms for which there is no apparent cause. This book will be invaluable to those interested in any aspect of psychosomatic illness, as well as the intriguing subject of mind/body relationships.

Meetings and Items of Interest

June 29-July 3, 13th Cape Cod Institute—Infancy and Chilonooa Preludes to Adult Development: On the Origins of Coping with Stress. Contact Gilbert Levin, Ph.D., Albert Einstein College of Medicine, 1303 Beifer Bldg., Bronx, NY 10461, (212) 430-2307.

July 2-5, International Back Pain Society—Back Pain: Current Concepts and Recent Advances, Budapest, Hungary, (4481) 206.0426. July 6-10, 13th Cape Cod Institute—Behavioral Medicine Applications. Contact Gilbert Levin, Ph.D., Albert Einstein College of Medicine, 1303 Belfer Bldg., Bronx, NY 10461, (212) 430-2307.

July 12-17, National Wellness Institute - 17th Annual National Wellness Conference: Health Promotion Six Dimensions of Wellness, U. of Wisconsin campus, Stevens Point, WI (715) 346-2172.

July 13-17, 13th Cape Cod Institute—Psychopharmacology Update. Contact Gilbert Levin, Ph.D., Albert Einstein College of Medicine, 1303 Belfer Bldg., Bronx, NY 10461, (212) 430-2307.

July 13-17, 13th Cape Cod Institute—Multiple Family Group Therapy

July 13-17, 13th Cape Cod Institute—Multiple Family Group Therapy for Abuse. Contact Gilbert Levin, Ph.D., Albert Einstein College of Medicine, 1303 Belfer Bldg., Bronx, NY 10461, (212) 430-2307.

July 14-17, Vrige U. Dept. of Medical Psychology-International Council of Psychologists, Okura Hotel, Amsterdam, Netherlands (3120) 5487212.

July 18-22, Employee Assistance Society of North America-4th Annual Institute: Building a Healthier Workplace, Ottawa, Ont. (313) 545-3888

July 24, Harvard Medical School, Dept. of CE-Neuroscience Update, Copley Plaza, Boston, MA (617) 432-1525.

July 27-31, 13th Cape Cod Institute-Psychotherapy and Spirituality 3, contact Gilbert Levin Ph.D., Albert Einstein College of Medicine, 1303 Belfer Bldg., Bronx, NY 10461 (212) 430-2307.

July 27-31, Massachusetts Mental Health Center; Harvard Medical School-Essential Psychopharmacology: The Art, Science and Practice, Seacrest Resort, Old Silver Beach, Cape Cod, MA (617) 734-1300 x469.

Aug 8-11, University of California, San Diego School of Medicine, Office of CME-The Power of the Art: Introduction to Medical Hypnosis, San Diego Hilton Beach & Tennis Resort (619) 481-9537.

Aug 16-19, American Psychological Association, Washington, D.C. (202) 955-7705.

Aug. 17-21, Hans Selye Symposia on Neuroimmunology and Stress Advances in Psychoneuroimmunology, Satellite Meeting of the 8th International Congress, Budapest, Hungary. In North America (204) 788-6320, In Europe 36-1-185-2255.

Aug. 22-27, international Association for the Study of Pain-7th World Congress on Pain: All Aspects of Acute and Chronic Pain, including Cancer Pain, Paris, France (206) 547-6409.

Sept. 1-5, 4th International Conference on Stress Management-Stress in Contemporary Living, Pierre et Marie Curie U., Paris, France. Contact: ISMA, 14 Cranleigh Ave., Rottingdean, Brighton, BN2 7GT.

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