

were excluded. Mentally, he was anxious, with accompanying depression. Enquiry into his family background showed that, although he was married with four children, he had considerable doubts about his sexual capabilities.

It was mentioned that he might be suffering from what sounded phonetically like "shook jong" (suk-yeong), but the origin of the term could not be identified, and the condition of Koro was unknown to the psychiatrist at that time. The case was dealt with symptomatically and he was given Librium and Nardil without benefit. Attempts at superficial psychotherapy also failed. Because of his unstable work record and his failure to respond to treatment, it was considered that he might be hysterical, if not frankly malingering.

The failure to manage this case adequately arose not only out of ignorance of the basic condition, but also by approaching it through a Western-orientated psychiatric formulation of the psychopathology.

Dr. Yap (1951) has already drawn attention to the error of classifying disorders of a foreign culture according to superficial form, rather than by a consideration of the nature of the underlying disordered function.

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REFERENCE

YAP, P. M. (1951). "Mental disease peculiar to certain cultures." *J. ment. Sci.*, 97, 313.

THE TREATMENT OF PSYCHOGENIC DYSpareunia BY RECIPROCAL INHIBITION

DEAR SIR,

I have been requested by the Executive Committee of the National Marriage Guidance Council to call your attention to an inaccurate statement made by Dr. M. T. Haslam in an article entitled "The Treatment of Psychogenic Dyspareunia by Reciprocal Inhibition" (*Brit. J. Psychiat.*, March, 1965, pp. 280-282). He says: "The patient visits her G.P., or the marriage guidance centre, where advice is given

...". The Marriage Guidance Council, after a strict method of selection and training, never teaches its Counsellors to give advice. The method used is non-directive counselling after the principles laid down by Dr. Carl Rogers. They encourage a client to talk out and work through the problems to reach solutions which they choose themselves and put into effect with the guidance and encouragement of the counsellor. The Medical Advisory Board of the National Marriage Guidance Council is responsible for seeing that counsellors are adequately supported by consultants in various branches of medicine, gynaecology, psychiatry, etc. The Board has responsible members such as Dame Hilda Rose and Professor Brocklehurst and four delegates are elected annually by the British Medical Association.

If there is any evidence of deviation from the usual methods the National Marriage Guidance Council would be glad to have details.

ALFRED TORRIE.

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DEAR SIR,

Although she would not have used learning theory terminology, the late Dr. Joan Malleon treated a great many cases of vaginismus with an approach very similar to that reported by Dr. Haslam. She too found that even longstanding cases where coitus had been impossible could be effectively relieved with as few as one or two interviews (*Brit. med. J.* (1942), *ii*, 213; *The Practitioner* (April, 1954), 172, 389).

Dr. Malleon thought that experience in early life played a large part in the aetiology of vaginismus. In a large proportion of her cases, 11 out of 20 in one series, there was a consciously recalled history of painful enemata, often with soap-sticks, in early childhood. This suggests a causal relationship that can be stated equally in terms of psychodynamics or of learning theory.

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