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FAMILY AND SOCIAL FACTORS IN THE COURSE OF SCHIZOPHRENIA

DEAR SIR,

In their letter (Journal, April 1977, 130, p 417) in response to an earlier letter from ourselves in which we criticized certain aspects of their work concerning the influence of relatives on relapse in schizophrenia, Dr Leff and Professor Brown have cleared up some of the issues which troubled us.

It is true that in the 1972 paper by Brown et al, we had taken first episodes as meaning first admissions, a thing it is easy to do in reading an account of a study which uses 'key admission' as the base for research design and analysis. In fact, no mention is made in the 1972 paper, or in Vaughan and Leff's 1976 paper, as to what proportion of their sample were first admissions. The authors have now pooled their data and analysed first and readmissions separately, and have found that High Expressed Emotion (EE) in relatives towards the patient is predictive of relapse in both cases.

However, the matter is not entirely resolved, because the authors have missed the central point of our criticism, which is that the raters were, in the case of readmissions, probably rating factors (those composing EE) used to predict outcome (relapse in the nine months after discharge) in the knowledge of outcome. This conclusion is based on the fact that in the 1972 study relapse led to readmission in 83 per cent of cases, and the analysis of correlations between the variables showed that previous admissions were highly correlated with relapse, ranking second to high EE. The raters can hardly have been unaware of the pattern of previous admissions.

Thus the authors have established the important fact that their findings concerning EE apply to first admissions, but there must remain a reservation about the ratings of EE for readmissions.

Professor Brown and Dr Leff evidently do not think much of a pencil-and-paper test compared to their painstaking ratings of the components of EE. However, now that we know that high EE predicts relapse in first admissions and, as indicated in our letter (Journal, January 1977, p 102), that our self-rating interpersonal perception technique have some power to predict relapse during the nine months after discharge in a sample of 40 first admissions, it seems likely that our test was measuring some of the same factors as contributed to the rating of expressed emotion. In our test, the patients and parents score the test at the same time in the same room, and this generates considerable feeling and emotional commitment in the great majority of cases. In this situation, we have found that both patient and parents will score on paper terms about themselves and each other which it can be difficult to get them to express in words. This probably accounts for our test giving significant results in several realms, and it looks promising in the present context. The advantage of a technique which does not require a trained rater and which can be administered in about 30 minutes, is obvious.

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DEAR SIR.

Dr Scott and his colleagues are fighting a rearguard action against logic. They agree that we have demonstrated that high Expressed Emotion is predictive of relapse within the group of patients who have had previous admissions. Yet they maintain that knowledge that the patients were readmissions enabled us to predict outcome and hence biased our assessment of Expressed Emotion. Knowledge that a patient has had previous admissions enables one to predict a worse outcome than in the case of a first admission. But within a group of readmitted patients it does not help one to determine who will do well in the subsequent nine months and who will relapse. This is exactly what the measure of Expressed Emotion does enable one to do.

It is worth emphasizing that we built into the design of our studies a precaution against any extraneous factors biasing the assessment of Expressed Emotion. Checks were made on the reliability of the ratings by having another rater assess the taped interviews blindly. In the most recent study, Leff rated a random selection of Vaughan's audio tape recordings without knowing which families they