

Expansion of the Concept of 'Medical Model' in Psychiatry

The future of psychiatry as a medical speciality is becoming to be questionable (e.g. Torry, 1978; West, 1978). To participate in such an argument one has to clarify before all what the medical model, by now, could mean.

Two medical specialities jump to present the apparent appropriate analogue that could fit psychiatry as a medical speciality, viz, neurology and endocrinology. The first represents the histopathological (so called organic) orientation, where the second refers to the chemical model in terms of 'hyper' or 'hypo-secretion' of this or that chemical substance influencing behavior. The former model, neurology, looks so invasive as to let some authors like Torry (1978) to claim that "..... (psychiatric patients) who truly have disease of the brain will eventually be annexed by neurology. This exemplifies how such neurology has monopolized 'true diseases' of the brain'. However, this monopoly did not exploit enough adoption of the evolutionary dissolution model of Jacksonian approach to psychiatry as has been suggested by authors like Levin (1961) or Ey (1962, 1967). The endocrinology, as analogue, is also over evaluated, not only through the rationale of studying the effect of hormones on behavior, but also through the mechanistic quantitative interpretation of neuroleptic action in terms of enhancing or diminishing neurohormones or neurotransmitters.

The medical model itself, in general, is undergoing certain transformations through the technological advances and increasing etiological informations. Medicine presented as an empirical art of healing is getting less and less emphasis in medical education and practice. If this could be accepted in any other medical speciality, it is hardly so for psychiatry when properly conceived in its behavioral and phenomenological realities.

However if a medical analogue is to be borrowed to help in clarifying some psychiatric concepts. I feel that both neurology (as representing focalizing histopathological model) and endocrinology (the quantitative chemical model) are the least fit to fulfill such a goal. Going back to the physiological basis of the medical model, we may adopt concepts related to digestive - metabolic system as well as the phasic function of the circulatory system. The filling (acquisition) of information, their unfolding and assimilation through reorganization and integration during dreams (Webb, 1973) as well as during circadian rhythmic activity (Rakhawy, 1980) are but illustrative examples justifying this approach. More, such language could be helped in illustrating dislodgement of wholesome information to be redissolved and thus re-integrated (just like redigestion in ruminative animals). The domineering (or leading)

level of the brain organization is occasionally referred to as pacemaker (Smith, 1970; Rakhawy, 1978, 1979).

I believe that such extension of the use of such physiological - medical language stemming from various other organ - systems and specialties is liable to provide better orientation about psychiatric problems. It may dilute the misleading existing monopoly. The result of such revision and reorientation is expected to alter psychiatric practice in consequence with the altered conceptualization. Periodicity of psychiatric illness could be better interpreted in terms of abnormal unfolding as a compensation for unassimilated, accumulated information (Rakhawy, 1980); Chronic schizophrenia is looked at as the extreme dysrhythmic unassimilating brain disorganization.

In closing, I wish to say that this expansion of medical - physiological model in psychiatry should never be taken as an easy escape from the wholistic phenomenological nature of our speciality. We have to avoid undue simplification. Changing our vocabulary from **localization, hyper- or hypo-** this or that chemical substance and focal derangement into organizational language in terms of **level, harmony, synchrony and assimilation** is apt to change our conceptualization not only in psychiatry and brain function, but also in life and medical art.

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