

EDITORIAL

NEED OF THE HOUR: AN INTEGRATION OF THE BRAIN AND THE MIND

Recent advances in neurobiological data and theories have resulted in a tendency to look upon the mind and its disorders from a reductionistic and purely biological perspective. However it is also true that our increased understanding on the biological aspects of psychiatry still leaves us puzzled by the complex nature of the problems we have to deal with and skeptical about simple theories and explanations, whether they be from the field of biological sciences or behavioural sciences. What is required is an attempt to bring these all together in a manner meaningful and useful for both research and clinical work.

Can the human being's beliefs, desires, fears and frustrations be reduced to purely materialistic entities? If a person's state of mind can be accounted for in entirely biological terms, will psychiatry be replaced by neurosciences? The fact remains that inspite of all the advances in neurosciences, we have come nowhere near explaining the various mental phenomena. For example as Slavney (1992) pointed out, neurosciences can do very little in explaining the various reasons and motives for culturally sanctioned self-mutilatory behaviour. When we attempt to apply our psychiatric knowledge in the field of Forensic Medicine, we are again forced to face philosophical concepts like free will, determinism etc. An experimental or purely objective approach in evaluation do not provide the answers for our questions.

At the same time the psychiatrist need not be phobic about neuroscience. It is neither a threat nor a replacement for psychopathology; it is only psychiatry's latest tool for understanding brain pathology (Mundt & Spitzer, 1993). The tension between man's attempt to understand his purposive self on one hand and the impersonal matter on the other will always remain in the field of psychiatry. It is our business to deal with the effects of the disturbed 'I'. Evoked potentials, neuroendocrine substances, dream interpretations or identifications of negative automatic thoughts, all are only various tools which are useful in the process of understanding that disturbance and finding solutions for it.

Thus the difference between psycho-philosophical and biological schools is one of approach - one is interpretive in nature and the other is experimental. Both are important for psychiatric theory and practice. They complement rather than compete with each other. Though the relationship between mental and physical life is still a subject of controversy and debate the psychiatrist has to take an integrated approach to truly advance his understanding of both the individual patient as well as the entire field. To believe that any one method of enquiry is the only correct method to gain new insights into human mental life is not only naive but also counter-productive.

In that heydays of psychoanalytical and existential schools the interpretive approach was on the verge overestimating the generalisability and applicability of that approach. Unfortunately today we are witnessing the neurosciences facing the same risk. Yet in reality, neither of the two approaches teaches us the neglect the thoughts, desires and hopes of our patients and their views of their lives.

As we survey the Indian scene, we see a number of very promising and enthusiastic young psychiatrists entering the field with a purely biological orientation. In spite of our repeated assertions about the value of ancient Indian mental health concepts and the need to develop an Indian style of psychotherapy, our training programmes are not geared to do this - the finished products of our teaching centres are mostly brain-oriented and not mind-oriented.

The significance of J. Krishnamurthy's teachings and their relevance to mental health as lucidly brought out by Prof. Venkoba Rao in this issue of the journal is to be evaluated and understood in this context. When Krishnamurthy urges us to discover ourselves and thus understand the root of our problems, it is the best example of the interpretive approach to emotional problems. Concepts such as "a true teacher never gives, he explains, he points the way" and use of questioning and discussing as the right methods to come to an understanding of oneself will be totally acceptable to psychotherapists of all persuasions - east and west.

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Integrating these concepts into our practice will make our psychiatry have a mind also along with the brain.

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