

chiatry is in need of trained laboratory investigators and psychiatrists who can devote their time to laboratory research. On this point, psychiatrists of all schools will readily agree.

FELIX DEUTSCH

Clinical Versus Statistical Prediction

P. E. Meehl

Minneapolis, Minn., Univ. of Minn. Press, 1954, 149 pp., \$3.00.

This book does not raise a new issue; it attempts to resolve a controversy and to point out the practical considerations involved in it. It is brief, concentrates on its one problem, marshals the two opposed views with impartiality and with the clarity of an expert in both methods, and supplements the theoretical analysis with the evidence of the few researches relevant to its theme. It is a book which can be recommended unreservedly, and which ought to be obligatory reading in any training program for psychiatrists or clinical psychologists.

The problem is how best to use psychological data for prediction of behavior. One alternative method considered is the statistical (mechanical, actuarial), which fits such data into established equations or tables, and eschews further inference, judgment, or other clinical skill. The other method hinges precisely on such clinical interpretation of the data. Meehl is not concerned with arguments about objective versus projective, psychometric versus biographical, data. His problem is how any of these should be weighted, in what manner they ought to be combined; however, since weights can be zero, the question of validity is implied. Although sympathetic toward the clinicians who recoil from any mechanical approach to assessing personality, Meehl condemns them for their ignorance of statistical principles and for confusing therapeutic with diagnostic considerations. Structural use of statistics, such as factor analysis, has evidently not proved of diagnostic value to date. Meehl therefore distinguishes this from the discriminating or validating use of statistics which, he demonstrates, is an indispensable tool in clinical practice. For, whatever his method of prediction, only thus can an honest clinician convince himself that he does better than he would by flipping pennies. While cautioning about the pitfalls of impressionistic validation, Meehl nevertheless takes pains to point out that the problem is more complex than could be disposed of by

proving the superior accuracy of computing machines over the human brain. The evidence of research, however, supports almost unanimously the case for the actuarial method. Some studies previously quoted in favor of the opposite conclusion are shown to be irrelevant to the main issue, while of the twenty Meehl has found in the literature as more or less suitably designed to test the case between the two methods of prediction, in all but one "the predictions made actuarially were either approximately equal or superior to those made by the clinician." The limitations of these studies, as indeed of the statistical method in general, are admitted, but the burden of furnishing empirical proof now clearly rests on those who argue for the superiority of the clinical method. Meehl allows for the possibility that a few exceptionally gifted clinicians might do better than the statistician, but the probability of attaining their standard is low, while proficiency in actuarial prediction can be achieved without exceptional ability. The average patient, therefore, stands a better chance of being correctly diagnosed by the statistical method than by the clinician's "real understanding."

Meehl's concern in this book is an essentially practical one: Which is the most efficient method of prediction in clinical practice? The conclusions of his analysis are unambiguous enough, as are their practical implications. Here they are commended to the attention of those psychiatrists who like to call on the clinical psychologist's diagnostic services and appreciate these better the more purely "clinical" his method. They should, at least, ponder the one bold "clinical" generalization Meehl makes (which, no doubt, he could support statistically)—that in private practice clinical psychologists spend significantly less time on administering and analyzing fancy tests and on building dynamic formulations on these than they would in an institutional setting or as consultants to a private practitioner.

GEORGE A. TALLAND

Sexual Hygiene and Pathology: A Manual for the Physician

J. F. Oliven, M.D.

Philadelphia, J. B. Lippincott Company, 1955, 481 pp., \$10.00.

Since it has been the customary experience of patients seeking enlightenment in sexual matters