This Week's Citation Classic

Winokur G, Clayton P J & Reich T. Manic depressive illness. St. Louis, MO: C.V. Mosby, 1969. 186 p. [Washington Univ. Sch. Med., St. Louis, MO]

Manic-depressive illness is described using a classical disease model. Definition, epidemiology, symptoms, genetics, other etiologies, course of illness, and special factors (personality, suicide, occupational status, post-partum impact) are presented. The data base is a systematic clinical and family study. [The Science Citation Index® (SCI®) and the Social Sciences Citation Index™ (SSCI™) indicate that this book has been cited over 330 times since 1969.]

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"In the middle 1960s Paula Clayton and I studied the family histories of 426 affectively ill inpatients. We were interested in heterogeneity within the rubric of broadly defined manic-depressive illness. On the basis of family differences, we separated two types of affective disorders. depressive illness and depressive illness, the former showing a mania. It seemed to us that manic-depressive illness constituted the best example of a homogeneous disease in psychiatry. We decided to do a systematic clinical and family study in manicdepressive illness and, as is usually the case in a medical setting, we looked for somebody who would do the hard work. Ted Reich was a resident who was available and interested in research.

"We collected consecutive admissions of manic-depressive patients and conducted a follow-up and family study. After developing a simple structured interview (a far cry from the current complex systematic interviews), Reich traveled around interviewing both probands and family members. The field work was particularly interesting in that families were always trying to ply him with

gifts and with various forms of nourishment. Whether this was a commentary on the families of bipolar patients or Reich is unknown.

"After the material was collected, it was clear that we had the only recent systematic study in the United States on manicdepressive illness. Interesting findings included a high degree of familial affective disorder, more affected females than males in the families, age of onset that was quite early in the probands, a strong suggestion of X-linkage in the genetic transmission of the illness, development of specific symptoms within the mania (i.e., short-lived hallucinations and delusions), and a followup which suggested the illness was serious in terms of morbidity and subsequent episodes.

"Our biggest problem was Ted Reich's flight of ideas which necessitated the imposition of deadlines but also enriched the book. Paula, Ted, and I interacted daily on the project and we remained very good friends.

"The reason for the book's success and frequent citation was that there was a concatenation of events in American psychiatry which made it reasonable to consider psychiatric problems as medical entities. The book is quite clearly based on the idea that the medical model is a useful concept, although at no time did any of us interact with each other on the basis of that particular term. The material was presented so that clinicians could understand the data. Manic-depressive illness looks like any illness in medicine. It has a time of onset, a specific clinical picture, and a circumscribed course. There is evidence for a genetic factor. Thus, the book was probably the first in recent times to go back to the old classical viewpoint in psychiatry. This was probably refreshing to a lot of people who for years had had psychiatric problems described to them in words that bore no relation to reality and had these illnesses attributed to a variety of theories, none of which were really