

## ***This Week's Citation Classic***

Wing J K, Birley J L T, Cooper J E, Graham P & Isaacs A D. Reliability of a procedure for measuring and classifying "present psychiatric state." *Brit. J. Psychiat.* 113:499-515, 1967. [MRC Social Psychiatry Res. Unit, and Bilateral Diagnostic Study, Inst. Psychiat., Maudsley Hosp., London; and Cane Hill Hosp., Coulsdon, Surrey, England]

**The Present State Examination and associated techniques provide a means of describing and classifying psychiatric disorders so that the results of research into causes, epidemiology, treatment, and prognosis, carried out in different parts of the world, can be more precisely compared. [The Science Citation Index® (SCI®) and the Social Sciences Citation Index® (SSCI®) indicate that this paper has been cited over 185 times since 1967.]**

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"The fact that psychiatrists tend to use a common terminology (systematised in the International Classification of Diseases) promises a substantial degree of agreement about categories such as paranoia, schizophrenia, affective psychosis, anxiety state, and obsessional neurosis. But every schoolboy knows that no two psychiatrists can agree. At least, that was the case in the late 1950s and there were two good reasons for the opinion. First, several studies had shown appallingly poor reliability. Second, the conceptual, not to say ideological, approaches adopted by different groups of psychiatrists ensured that terms like 'schizophrenia' had many different connotations. Nevertheless, several quite reliable scales for rating behaviour had been constructed and this suggested that progress could be made even, perhaps, in rating the presence or absence of subjectively experienced 'symptoms.'

"My own education and predilections had led me to be suspicious of the inordinate and largely unsupported claims of psychoanalysis, on the one hand, and of the organic schools,

on the other. The only way to test these and other theories seemed to be to devise a means of describing the 'phenomena' precisely and reliably and then to construct rules by which they could be classified.

"The first requirement was met by constructing a Present State Examination (PSE) which covered most of the symptoms likely to be experienced by people with functional psychotic and neurotic disorders in a flexible, but standardised, clinical interview. The 1967 paper reported the results of several years of testing the third, fourth, and fifth editions of the schedule. Since then, much experience has been gained in large international studies<sup>1</sup> and in smaller research projects. The PSE is now in its ninth revision and has been translated into 30 languages. It has been used extensively for purposes of clinical description and measurement of change.

"The second requirement was met by constructing an algorithm (the CATEGO program) which classified PSE symptoms and thus provided a reference classification on the basis of which research studies could be compared, no matter where in the world they were conducted. Other elements have been added—a Syndrome Check List for rating past episodes and an Etiology Schedule for adding information about possible causes.<sup>2</sup>

"With all its imperfections, the system has clearly met a need. The latest innovation has been to devise a means (the Index of Definition) of defining a threshold above which sufficient symptoms are present to allow a descriptive classification to be made. This allows a crude comparison between the results of population surveys in different parts of the world and a comparison, for example, of the severity and concomitants of depression in a community and in a hospital sample.<sup>3</sup>

"Other workers have developed similar techniques and, in due course, the advantages of each will need to be combined insofar as this does not also combine their limitations. The ideas behind the PSE/ID-/CATEGO system, however, have so far stood the test of time."<sup>4</sup>

1. World Health Organization. Schizophrenia: an international follow-up study. New York: Wiley, 1979. 438 p.
2. Wing J K, Cooper J E & Sartorius N. Measurement and classification of psychiatric symptoms: an instruction manual for the PSE and CATEGO program. New York: Cambridge University Press, 1974. 233 p.
3. Wing J K, Bebbington P, Hurry J & Tennant C. The prevalence in the general population of disorders familiar to psychiatrists in hospital practice. (Wing J K, Bebbington P & Robins L N, eds.) What is a case? The problem of definition in psychiatric community surveys. London: Grant McIntyre, 1981.
4. Wing J K. Reasoning about madness. New York: Oxford University Press, 1978. 265 p.