A symptom checklist and scoring system, the New Haven Schizophrenia Index (NHSI), was devised to reliably differentiate schizophrenic from non-schizophrenic populations in a variety of treatment settings. The NHSI provides a relatively inclusive framework for the diagnosis of schizophrenia [1,2]. Work groups were formed to develop criteria for peer review of psychiatric practice.[3,4] Several groups adopted relatively restrictive criteria as part of a strategy to differentiate from the amorphous group of schizophrenias a relatively coherent clinical population for study. Our strategy was oriented toward the goals of utilization and peer review and was thus applicable to a wider selection of cases. We were able to demonstrate that the use of a more inclusive diagnostic scheme did provide the basis for the differentiation of a coherent patient group and for the development of programmatic research strategies.

We began our research at a time when a number of other groups were considering the development of diagnostic criteria for the study of schizophrenia.[5,6] Others use it to suggest that there may be some danger in prematurely adopting an overly restrictive approach to diagnosis in this area and that the adoption of several diagnostic schemes is a useful research strategy.[7,8]