

Sobell M B & Sobell L C. Individualized behavior therapy for alcoholics.
Behav. Ther. 4:49-72, 1973.
[Patton State Hospital, California Department of Mental Hygiene, CA]

In a controlled trial, it was found that inpatient alcoholics who received a multicomponent behavioral treatment with a goal of controlled drinking had a superior outcome at follow-up to comparable alcoholics who received traditional, abstinence-oriented treatment for alcoholism. [The *Social Sciences Citation Index*® (SSCI)® indicates that this paper has been cited in over 140 publications since 1973.]

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At times we've wished this article had received less attention. The study reported in the article is one of many studies that contradict conventional wisdom in the alcohol field, forming the basis for what some consider to be an ongoing scientific revolution.^{1,2}

Our involvement in alcohol research began serendipitously in 1969 when we were hired as summer students at Patton State Hospital in California. Soon thereafter, Mark (then a graduate student) was offered a position supervising alcoholism research. The conduct of the study was greatly facilitated by a young, energetic research staff, open-minded hospital staff, and two colleagues, S. Casalaina and H.H. Schaefer. Influenced by earlier research at the hospital (involving observing alcoholics' intoxicated behavior)³ and by two contemporary publi-

cations,^{4,5} the experimental treatment was radically different from traditional treatments (see reference 3). Most notably, some patients had a controlled drinking goal.

In 1969 a patient asked why he could *only* recover through abstinence. A literature search failed to answer that question but unearthed several reports of successful nonabstinent outcomes. With one exception, these reports had aroused little controversy; the ideological behemoth of conventional wisdom slept undisturbed by occasional anomalies.

In our study, patients were first assigned to goal-eligibility conditions (abstinence or controlled drinking); then, within each goal, patients were randomly assigned to the behavioral or traditional (abstinence-oriented) treatment. The most striking result was that, over two years of follow-up, the behavioral/controlled drinking group functioned significantly better than its comparison group.³ Other researchers have subsequently found support for controlled drinking as a viable alternative for certain populations of alcohol abusers.²

Interest in the study probably relates to its being the first North American study to use a controlled drinking goal, its innovative treatment procedures and follow-up measures, and its role in challenging conventional wisdom.² In 1982 allegations that our study had been fraudulently conducted received widespread media attention. Subsequently, the study was scrutinized in three independent external investigations, and in each case the allegations were determined to be without foundation. Our recent article, "The aftermath of heresy," describes the allegations and our defense and shows how the attack exemplifies the current battle between folk science and empirical science in the alcohol field.⁶

1. **Partson M E, Sobell M B & Sobell L C.** *Emerging concepts of alcohol dependence.* New York: Springer, 1977. 369 p.
2. **Heather N & Robertson I.** *Controlled drinking.* New York: Methuen, 1983. 318 p.
3. **Sobell M B & Sobell L C.** *Behavioral treatment of alcohol problems. Individualized therapy and controlled drinking.* New York: Plenum, 1978. 225 p.
4. **Bandura A.** *Principles of behavior modification.* New York: Holt Rinehart & Winston, 1969. 677 p. [See also: **Bandura A.** Citation Classic. *Current Contents/Social & Behavioral Sciences* 11(29):10, 16 July 1979.]
5. **Partson E M.** A critique of alcoholism treatment concepts with special reference to abstinence. *Quart. J. Stud. Alcohol* 27:49-71, 1966. (Cited 115 times.)
6. **Sobell M B & Sobell L C.** The aftermath of heresy: a response to Pendery *et al.*'s (1982) critique of "Individualized behavior therapy for alcoholics." *Behav. Res. Ther.* 22:413-40, 1984.