A clinical trial of desensitization and two forms of psychotherapy for phobic outpatients is described. Results were compared over two years, throughout treatment and follow-up. Ratings were made of symptoms and social adjustment. All three raters agreed that desensitization led to the greatest improvement in phobias. The Science Citation Index (SCI) and the Social Sciences Citation Index (SSCI) indicate that this paper has been cited in over 180 publications since 1967.

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"My interest in behaviour therapy began in 1962 at Maudsley Hospital, when I shared in the care of a phobic patient with Victor Meyer, a member of the psychology department who was using the new methods. Sir Aubrey Lewis encouraged me to find out more about behavioural treatments, and to try to devise a way of evaluating them. I read the literature on the evaluation of psychotherapy and was soon convinced of the difficulties of assessing the effects of any kind of psychological treatment. However, it seemed possible that some of these difficulties could be avoided in an investigation of behaviour therapy. First, it would be possible to study only patients who shared a single diagnosis—phobic disorder—because advocates of behaviour therapy were making specific claims about their ability to treat such cases. If this was done, assessment would be simplified because it could concentrate on phobic symptoms, which are easier to rate than the intrapsychic changes which are the concern of psychotherapists. Secondly, the new methods of behaviour therapy were only likely to be adopted in preference to brief psychotherapy if they led to substantially better results; and this question should be answerable with the existing, rather insensitive, assessment procedures provided that they could be shown to be reliable.

Although these judgements proved to be largely correct, the research success of the research depended on three pieces of good fortune. The first was the presence in London at the time of Joseph Wolpe, the originator of the form of behaviour therapy I was proposing to study (viz., systematic desensitization). Wolpe was extremely generous in advising me about his treatment. The second piece of good fortune concerned Heinz Wolff, a consultant psychotherapist at Maudsley Hospital. He immediately saw the potential importance of the investigation and agreed to supervise the psychotherapy which was to be the treatment against which the behaviour therapy was to be tested. The third stroke of luck concerned Isaac Marks. With the help of Lewis, I had obtained financial support from the Medical Research Council to pay for a research worker who was to join me in carrying out the project. Marks was available at the time and accepted the post. In this way, a long and fruitful collaboration began. With this team, and with the help of many other doctors working at Maudsley, the trial proceeded without any major problems, and the resulting paper was accepted for publication.

I think that the work has been cited frequently because it was one of the first attempts to compare behaviour therapy with brief psychotherapy in patients with clinically significant problems. Also, despite many shortcomings inherent in a study carried out with few resources, the results showed that clinical trial methodology could be used to evaluate behaviour therapy. Moreover, in discussing the results, it was emphasized that although we had been evaluating behaviour therapy and brief psychotherapy as alternatives, we saw no reason why they should not be used together in selected cases. This statement, together with Wolff's direct involvement in the research, helped to initiate a more constructive exchange of ideas between psychotherapists and behaviourists.

Subsequent progress in the behavioural treatment of phobic disorders has been reviewed in the monographs by Mathews et al. and by Marks."