

ADDENDUM

Having re-read and re-considered and re-written the enclosed correspondence several times, I was ready to mail it. It has become necessary for me to tear open the envelope in order to add information which changes the complexion of the local scene in an unfortunate way.

There is a movement afoot to combine the department of Psychiatry with that of Neurology. If this is done, I shall lose my present valuable degree of autonomy to a slight but annoying degree, since the chief of Neurology, Maj. Robert Williams, is professionally "senior" (board-certified in both Neurology and Psychiatry) although his experience is less extensive than mine in Psychiatry proper. What will ensue is a department of Neuropsychiatry in which there will be a Psychiatry section, but all decisions about utilization of manpower, etc., will be Dr. Williams'; he'll always have the last word. Without going into the local political shenanigans which brought this about, I can tell you that it is on a one-month trial basis now, and that I plan to oppose it in favor of the previous system. The reasons for this are that it is essentially less efficient than the present set-up (i.e. two autonomous services), Dr. Williams is essentially a neurologist and isn't likely to see eye-to-eye with me on a number of points, and finally, he is opposed to hypnosis. He is one of those conservative traditionalists who actively deprecates research or treatment involving hypnosis, states that it is "tampering with the soul", and has definitely spoken out against it.

I intend to try to get Lt. Col Carlos Alden, chief consultant in Neuropsychiatry, to make a statement that the maintenance of two separate departments of Neurology and Psychiatry is justifiable in cases where local conditions make it advantageous in any way, and to send such a statement to Col. Brna here. I also intend to attempt to persuade the local people to return to the former way of doing things. If unsuccessful in this, it will be much more difficult to operate the experiments, but we shall do so nevertheless, dealing with local friction as best we can. As long as there is support from Headquarters USAF, and I am delegated the necessary authority and permissions, there is no reason why we cannot go ahead.

The ultimate solution to the repeated occurrence of this type of situational interference is, of course, a return to civilian status. I plan to return to full-time University work as soon as my resignation will be acceptable (there is a theoretical understanding that I won't resign for 3 more years). If I were back on the staff at Cornell Medical Center where my previous hypnosis research was done, there would be no problem. I could receive some funds disguised as a U.S. Public Health Service grant or some such thing, go onto a half-time research basis, and plug away at the problem with considerable independence. This future eventuality we'll have to discuss at some later date.

Meanwhile, let's get on with it as best we can. If someone in the Surgeon General's Office, or the Surgeon General himself, were in on this problem, the local problem would be a lot easier to solve! Well, I'll work on it, appreciating any help or suggestions from the powers that be.

Sincerely,

LJW