Psychiatry and the Big Book

To the Editor: My wife keeps saying that I should go to a psychiatrist. Yet a number of AAs I've talked to say this is silly; I don't need to do anything but go to AA meetings and read the Big Book. I'm confused. What's the answer? Anon.

Dear Anon:

Sorry, but I can't give you the answer. What I can and will do, though, is give you my answer. Double underline that "my" for there's nothing in the least official about this.

There are, I know, many AAs who have an unbounded faith in the fellowship. There is no question of personal conduct, they insist, that does not find its answer in the Big Book. They seem to feel that all those psychic ills they thought were troubling them were strictly liquor induced. On that point I speak from personal experience. Some time before circumstance finally bludgeoned me into AA I went to a psychiatrist. I was convinced that I was drinking because I was so terribly unhappy, and I thought the psychiatrist could help me lick the unhappiness. He didn't. I now know why he couldn't. Having linked myself to the program, I've found that I had my original diagnosis slightly twisted. I wasn't drinking because I was unhappy; I was unhappy because I was drinking. Once I stopped the drinking the multiple pressures of paranoia and schizophrenia and manic-depressiveness that I thought were bearing in on me abated. It seems to me reasonable that this experience of mine is a fairly common one.

A man or woman drinking may be afflicted by Gargantuan fears. For example, he finds himself thinking that people on a bus are staring at him, probably following him, possibly plotting against him. He wakes in the middle of the night in unreasonable terror. These are out and out symptoms of psychosis, as anyone will tell you.

Yet if the man or woman stops drinking, the fears will probably evaporate because he no longer is haunted by terror at the realization that when drunk he has no control over his actions and often can't remember what his actions were. What might appear to be a symptom of psychosis turns out to be only a natural and inevitable consequence of the abuse of alcohol.

At the same time it seems to me plain that there must be some alkies who could really benefit from psychotherapy. After all, even some of the so called normal people are normal enough to need the ministrations of a psychiatrist. It doesn't seem logical that having the disease of alcoholism should confer some automatic immunity to mental illnesses.

Many today find it fashionable to bum-rap the psychiatrists, of course. They call them head-shrinkers and make bad jokes about them. Undoubtedly there are quacks among the analysts. And, even more undoubtedly, psychiatry isn't an exact science. Yet this blanket dismissal of psychotherapy doesn't wash. The documented cases of real benefit from treatment on the couch are impressively numerous.

If an AA broke his leg no one would think of telling him he should heal it by conscientious reading of three chapters daily of the Big Book. If an AA has fractured his psyche, no one ought to recommend as the single therapy a fruitful meditation on the Twelve Steps.

Whether or not you, Anon., need psychiatry is something I'm certainly in no position to judge. I'm not too sure your wife is the best available judge on that score, either. Wives do, after all, come with built-in tendencies toward prejudice on the subject of their husbands, and not all the prejudices are charitable.

If you yourself decide you need the help, though—and if you can afford it—I'd say you'd do wrong to let well-meaning AAs dissuade you. One thing else I'd say, however: don't try deluding yourself that the sessions with an analyst can be a substitute for AA.

No matter how many hours you spend on the couch, no matter what marvels of transference you manage and what insights you gain, you'll still be up against a stubborn fact:
you're an alcoholic and that means you can't ever take a drink again without inviting drunkenness.

Even if the analyst succeeds in spotting the trauma that troubles you now and gets you to recognize it, he won't be able to alter this fundamental condition. He won't free you to do that contradictory thing that people call "drinking like a gentleman."

He may be able to make it easier for you to live with yourself. He can't—and if he's competent he'll admit from the start that he can't—make it the least bit easier for you to live with liquor.

Anon., "Here's How," Chicago, Ill.