

the pharmacologist-psychiatrist who could chastise the trainee as follows: "Of course the patient has red spots. Those are hemorrhages that you produced. Don't you know that Prozac vies with Coumadin for space on the plasma proteins? You gave Prozac, dislodged Coumadin, and that's the trouble. Aren't you supposed to be a psychiatrist. Learn pharmacology!" And, for 2 generations of American Psychiatry, the pendulum swung. People learned pharmacology. But, in many instances, they forgot about meeting people, meeting their families, sharing visions, sharing tears, sharing anything. Simply stated, "meeting", "talking", "sharing feelings" were thought to have no psychiatric therapeutic power. With the ascendancy of pharmacology, 3000-4000 years of human history teaching how important we are to each other was put aside. The importance of relationships within and between generations was largely ignored. Doctors in America didn't talk much with patients. Doctors in America almost never talked with family members. If there was talking to be done, it was assigned to non-medical professionals.

But, for good reasons, the pendulum swung back. First, and most important, there are many, too many, casualties in systems of care which are importance of interpersonal relationships in psychiatric care. While pharmacotherapy is sometimes adequate in the short-term management of psychiatric illness, in the longer-term, the lives of those patients frequently go downhill, symptoms return, relapses occurs.<sup>10</sup> For many psychiatric disorders, the short-term improvement does not hold because: the intensity of the illness may ebb and flow so that the initial medication regime is inadequate/inappropriate at the later time; the weak relationship established between doctor and patient and family at the beginning of treatment does not allow the patient and family to return to ask for additional needed help; or perhaps the weakness of the initial relationship doesn't even assure compliance in the short term, and so the patient and family can't manage problems with side-effects, for instance. and they give-up on psychiatric medications as well as other aspects of psychiatric care.

Beyond these weaknesses of impersonal, "drugs-only" care, there is increasing evidence from meticu-

lously conducted brain imaging studies that "relationships", i.e., talking in therapy, change the brain, increase synaptic connections, and work to counteract the pathology in the brain that is associated with the symptoms we call mental illness.<sup>11</sup>

One of the most important recent research studies in the United States involved a multi-center study of longer-term treatment of serious depression by comparing 3 treatment programs: medication alone; cognitive therapy alone; and combined medication and psychological therapy. The outcome was striking. The combination of medication and psychotherapy was effective some 85% of the time. The other 2 treatment groups had success (only) some 50% of the time. The magnitude of the differences came as a surprise to the researchers themselves.<sup>12</sup>

#3. I have learned from by Taiwanese friends that kindnesses are never unnoticed, never forgotten, never unacknowledged, never unreciprocated. And that is true of kindnesses between all people in this world. It is the nature of people everywhere that kindnesses touch us deeply, deepen our sense of worth, and make us want to pass on the kindness as best we can-and not just to the individual who was kind, but to others as well.

#4. I believe personal insights may come more easily and are more easily accepted in the company of non-judging, tolerant friends. This has happened to me across a cultural space. I remember that on 1 occasion here in Taiwan, perhaps in 1969, Dr. Yeh congratulated me for my ability to "bargain" with such great determination over some small trinket I was buying. The negotiation had been a long, tough, winner-take-all bargaining session involving (only) 1 or 2 Taiwan dollars. And in that moment, suddenly, maybe for the first time, I realized that the "winner" in bargaining wasn't the one who got the cheapest price. I realized that "the winner" was the one who made it fun, elevated the dignity of the players, avoided cheating or being cheated. That was a big lesson for a competitive Yankee like me. And from that day on, "winning" has had a broader, wider, more-human meaning for me. I'm grateful for that. (And so are the salesmen I have encountered all around the world.)

#5. Cosmology and heaven. I've never spoken of