

R.V. Groenewold (1975). Klinische behandeling m.b.v. 'patiënten-units' op de psychiatrische afdeling van een algemeen ziekenhuis. *Tijdschrift voor Psychiatrie*, 17, 622-632.  
Summary op p. 634.

#### SUMMARY

*Clinical treatment with patient-units at the psychiatric ward of a general hospital.*

In the last decades several articles describing a therapeutic community were published. However, little is known about the application of such a therapeutic system to the psychiatric ward of a general hospital. In the usual form it is not suited to such a ward because of the heterogeneous population and the short stay of the patients. At the general hospital 'St. Hippolytus' in Delft (Holland), the therapeutic community-system was adjusted to its psychiatric ward. The population is divided in units of about ten patients, each one as homogeneous as possible. In this way group-treatment becomes possible. With regard to patients and staff, the 'basic principles' of the therapeutic community-system (democracy, non-directivity, etc.) are put into practice as far as possible. In this article the system at the ward is compared to the therapeutic community-system, and a description is given of the process of change from the old to the new system. Advantages and disadvantages are discussed.

H.G.M. Rooymans (1977). Psychiatrische diagnostiek van onverklaarde lichamelijke klachten. *Tijdschrift voor Psychiatrie*, 19, 155-174.  
Summary op p. 210.

#### SUMMARY

*Psychiatric evaluation of patients with undiagnosed somatic complaints.*

Aim of this study was to gain insight into the argumentation of the psychiatrist in accepting (or rejecting) a possible psychological origin of undiagnosed somatic complaints. The study was based on the psychiatric records of 223 somatic in-patients with functional complaints. All patients were during their stay in the hospital seen by a psychiatrist. A description of some demographic and psychiatric characteristics of the patients is followed by a detailed discussion of the relative differences on a number of variables between four subgroups and the total population of patients. The most important conclusions were:

1. Patients who were diagnosed as 'psychosomatic', i.e. with psychogenic complaints (56% of the total population), didn't as a group at most variables differ from the total population of patients;
2. The view of the patients themselves as expressed in the beginning of the interview, about a possible relation between their complaints and emotional stress was of course of great importance for the opinion of the psychiatrist;
3. The frequency of anxiety-states was higher than expected in patients who associated their complaints and emotional stress, and lower in patients who denied such a relationship. These correlations were absent with depressive patients;
4. Verification or falsification of the hypothesis that somatic complaints have a psychological origin is only possible in the universe of the individual patient.