

EDITORIAL:
DISSOCIATION OR
DISSOCIATIONS?
MULTIPLE PERSONALITY
DISORDER OR MULTIPLE
PERSONALITY
DISORDERS?

Richard P. Kluft, M.D.

In recent months I have been turning my attention to the diversity of the phenomena that I encounter in my clinical practice, my consultations to others, and my reading of both the published literature and the manuscripts that cross my desk both as the Editor-in-Chief of *DISSOCIATION* and in my work for other journals as either an editor or a reviewer. I never cease to be impressed with both the commonalities and the differences that I observe.

As clinicians and scientific investigators labored to study and establish the legitimacy of the dissociative disorders, often in the face of combinations of hostility, ridicule, and indifference to their efforts, it was natural that they focused on defining the central phenomenology of these conditions, especially multiple personality disorder (MPD), soon to be renamed dissociative identity disorder in *DSM-IV* (American Psychiatric Association, 1994). Unfortunately, there has been a relative neglect of the study of the co-morbidity associated with MPD/DID. This has led to several vexing problems. Among these difficulties is the dilemma of determining whether apparently co-occurring conditions should be understood as additional psychopathologies or as epiphenomena of a superordinate MPD diagnosis (Putnam, Loewenstein, Silberman, & Post, 1984). Although I have reviewed this problem elsewhere (Kluft, 1991), it is still my impression that it remains largely unresolved. Another issue is dealing with the ongoing argument advanced by those who wonder whether MPD/DID should be regarded as a syndrome rather than as an independent mental disorder. Although it is my judgment that MPD/DID has been established as a free-standing mental disorder (see Boon & Draijer, 1993), I have seen a number of patients recently who raise in my mind the interesting question as to whether there is also a symptom complex of MPD/DID phenomenology that is more productively understood as a syndrome that can occur under the rubric of other mental disorders.

Furthermore, as I inquire about the subjective experience of patients who endorse dissociative phenomena, I am impressed by the variety of experiences that can lead to affirmative responses to the dissociative items on the various screening measures and structured interviews currently available. I am not alone in these concerns, having heard them expressed in various ways by a number of colleagues in the dissociative disorders field. I believe that clinical and research attention to the diversity as well as the commonalities among dissociative phenomena and dissociative disorder patients is both an inviting and important area for inquiry.

This issue of *DISSOCIATION* embraces a variety of top-

ics and concerns, some of which have a connection to this theme. Articles by Sanders and Green and by Murphy continue the scholarly study of the Dissociative Experiences Scale (MPD) (Bernstein & Putnam, 1986) and invite a closer scrutiny of the meanings of DES scores, items, and subscales. Sanders and Green have found intriguing gender-related differences in the MPD subscales. Murphy demonstrates the existence of high-scoring individuals in a "normal" student population and raises thought-provoking considerations. Papers by Powers and by Schnabel study reports of alleged UFO abductions and invite us to scrutinize with deeper attention the meaning of patients' reports of remarkable experiences, an exploration that the field must address with aclearity. Powers approaches the topic with psychometric measures, Schnabel with the tools of the investigative journalist. Kluft's study of treatment trajectories questions whether there are two or more subgroups of MPD/DID patients, at least in terms of their treatment responses. Gleaves' energetic book review raises many hard questions about the quality of data and reasoning that has been used to challenge the MPD/DID diagnosis.

Three very important articles in this issue are not related to the theme of this editorial, but command the attention of the dissociative disorders field. Loewenstein's masterful report to the Clinton Administration Task Force on Health Care Financing Reform summarizes much of what has been published that establishes the scientific study of MPD/DID and outlines our current understanding of the treatment of this condition and information bearing upon its cost-effectiveness. Also, Lynn and Robert Benjamin contribute two articles to this issue, further explaining and elaborating their efforts to treat MPD/DID in a family context. In their first article they demonstrate the application of Nagy's contextual family therapy model to MPD/DID patients and their families. In the second, they begin the description of their fascinating and important work with groups for the significant others of MPD/DID patients. It is very clear that this is a group whose confusion and pain must be of great concern to those who treat dissociative disorder patients.

Let me call the reader's attention to several other items of interest. I am pleased to announce the appointments of Glen O. Gabbard, M.D. and Rosalinda O'Neill, M.A., M.F.C.T. to the Editorial Board of *DISSOCIATION*. Dr. Gabbard is a distinguished scholar and clinician with a profound understanding of the dissociative disorders from a psychoanalytic perspective. Ms. O'Neill brings to the Editorial Board the perspective of a group of clinicians that has not been rep-

resented on the Board, despite their considerable presence in the ISSD. It is also my pleasure to acknowledge our reviewers for 1993, who have made it possible to publish articles of distinction in *DISSOCIATION*. Our reviewers are the scientific and clinical conscience and caretakers of our field,

and the mentors of everyone who submits a manuscript to this journal. We could not produce a credible journal without their assistance.

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1993 - 1994 ACKNOWLEDGMENT OF REVIEWERS

DISSOCIATION is pleased to acknowledge those colleagues who have served as reviewers during the period 1993 - 1994, for Volumes 5 and 6. The generous contributions of time and expertise made by our reviewers allow us to help authors improve their manuscripts and to ensure that the high standards of *DISSOCIATION* are met or surpassed.

The readership has reason to be grateful to these individuals.

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