Heaton's book amplifies Drury's comment with a groundbreaking analysis of how these various languages are used, how they tend to beguile rather than inform, and how we may come to see some of the traps they hold. Though aimed at the psychotherapist –for whom it should be an essential text – this work holds profound insights for those of any discipline concerned with how we try to make sense of ourselves and our world.

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**Mike Harding**

## Heidegger, Medicine & Scientific Method

Peter Wilberg. (2003). New Gnosis Publications.

This book draws upon Heidegger's reflections upon science as *'method'* and, as such, draws primarily from the source text of the *Zollikon Seminars* (Heidegger 2001). The author claims that medical and scientific paradigms have avoided the question of what illness *is –'reducing it to a biological, behavioural or neurological disorder while ignoring the .... connection between individual health and the health of human relations'*. The author clearly states at the beginning that his desire is to re-appropriate phenomenology from present day usage as a *'qualitative scientific research methodology'* or even from phenomenology's apparent *'exclusive relevance' within the human sciences* to the basis of a more foundational or *'fundamental science'* which thus will have particular relevance to the understanding of medicine in particular.

The text commences with a well articulated presentation of Heidegger's discourse from the Zollikon seminars regarding *'tears'*- revealing how a scientific methodology may be able to *'measure tears'* and to account for tears by hypothesis of physiological or psycho-somatic causation but that this, in essence, rules out, in advance, any genuinely empirical approach, say, to the observation of grief or any exploration of the way *'we actually experience these phenomenon'.* In fact, dare I say it, this explication appears to better articulate Heidegger's arguments than the source text itself and I would recommend this passage as useful for Existential Psychotherapy trainees attempting to understand Heideggerian phenomenology and its relevance to psychotherapy.

There follows a general critique of the *'scientific methodological approach'* in Healthcare generally: RCT's (randomised controlled trials) are contrasted, by the author, with the phenomenological method as applied systematically within Eastern spiritual traditions where

*'fundamental research is ...essentially methodical and meditative in nature.'* p6

I was stimulated by reading this but I was as much excited by the fluent style of explication of Heidegger's philosophy and its relevance to scientific medicine per se as I was frustrated by the lack of sufficient reference to other contemporary philosophical thinkers in this area or, more specifically, the dogmatic style or positioning of the text with regards to scientific medicine generally. This is because this text presents as much polemic as philosophy- the author often making apparent grand statements without further explication or with accurate references for the curious reader.

As a truly sympathetic reader - philosophically there are clearly problems of viewing illness within a purely or primarily medical or pharmacological context- I was surprised that the author does not appear to acknowledge whether the current scientific/medical paradigm offers any insights into illness or current treatments generally. For instance: on p14 Wilberg claims that *'adverse reactions from legally prescribed drugs'* are the 4$^{th}$ major cause of death in the USA and on p64 that *'scientific'* medical treatment is the fourth largest cause of death in the Western world. No references were given to either of these grand statements and as medical treatments and legally prescribed drugs are, on the whole, given to ill people I cannot help but want to bring a little scientific incredulity to these propositions. Perhaps I am also a symptom or victim of the times- of dominating epistemes? (Foucault, 1974) - in that I nowadays seek statistical references from a text to substantiate statistical statements given by the author?

An example where Wilberg's writing moves beyond such polemic statements is when he commences to deconstruct the endeavour of finding discrete local causes and hence *'final solutions'* to human problems. Still writing in his polemical style Wilberg states that the *'law of phenomenological science'* runs directly counter to the law of causality. He gives an example of someone going to the doctor with a skin complaint- someone who is being bullied at work- and the GP merely treating the skin complaint without considering the wider holistic lived-context of this person. He then furthers this on p.16 by elaborating upon the problems of languages of causality and giving a useful contextualisation of an event as holistic rather than causal. He states that we might say that: *'the rain caused me to get wet'* and actually isolate these apparent discrete phenomena from the *'getting wet in the rain'* and other contextual phenomena such as *'waking late', 'worrying about the meeting', 'leaving in an anxious rush'* and *'forgetting my umbrella'* as well as non-physical *'field events'* such as the atmosphere of a social gathering or the *'aura'* of another person: all contributing to the event. This part of the text would

have direct relevance to existentially orientated psychotherapists working with clients seeking causes to their problems and is well articulated.

After the critique comes the response: we are offered a contrast between medicine as a form of engineering- diagnosis- versus that of direct acquaintance with a particular patient- gnosis.

This *'gnosis'* is framed alternatively, as *'Field-Phenomenological Medicine'* or *'Meta-Medicine'* as well as *'onto-biology'* and the author courageously goes to the heart of Heidegger's earlier ontology: exploring how *'things'*- for instance symptoms- come to exist for us within the '*clearing'* of primordial awareness. I think Wilberg manages excellently to illustrate Heideggerian philosophy and reveal it in a very specific way in such a short text and, as such, offers a useful introduction to Heidegger's thinking and relevance to healthcare for general healthcare practitioners. Unfortunately, if his intention is to introduce philosophy to healthcare practitioners, his style may also alienate these same readers. For instance: Wilberg states that we can: *'study and respond to illness as a physical phenomenon or understand the physical signs of illness themselves in terms of what they bring to light..'* I quote this statement to emphasise what often seems to suggest an apparent either/or positioning of this text. Perhaps this was not intended? For philosophically informed readers I believe something may also have been lost in this type and style of explication: Without the repeated hermeneutic invitation to re-consider, to re-question what *'is'*- for instance in this case illness and it's physiological component- the writer may inadvertently at times be falling into the same metaphysical trap: stating this is how it is.

Wilberg, within this text, reveals some clarity of philosophical praxis but also reveals a lack of understanding about current scientific endeavour - for instance he claims that in *'placebo controlled studies'* the *'placebo effect'* of the actual drug is discounted as effect. Unfortunately the author does not reference this claim any further but I don't believe that this is actually true- for instance it seems to me to be the whole purpose of many of these studies is to measure and thus consider whether it is possible to discount this placebo effect statistically and to still have a significant effect with treatment. On this subject the author repeatedly fails to reference authors and quotes: this occurrence is so numerous within the text that I gave up documenting it. I personally found this very frustrating as I believe it could do a disservice to an important message.

This text made me re-visit many everyday assumptions about healthcare and medicine. The author claims we need to find meaning with illness and I wholeheartedly concur. However; the author also challenges the medicalisation and medication of disease per se and here I decided to err on the side of a pragmatic pluralism: of recognising the need to place limitations upon a pure scientific or medical explication of illness and to maintain this discourse upon and within its (medicine's) philosophical

foundations but not to refute it completely. Kabat-Zin who brought meditation into medicine is fond of quoting their shared etymological roots in the Latin verb *'Medere'*- to take a measure of (Kabat-Zinn, 2005) and this seems a good place to find a balance between such different approaches.

Wilberg seems to appropriate a particular reading of Heidegger's view on science which did not reveal itself in his relations to Medard Boss or to the medical practitioners at the Zollikon seminars (Heidegger, 2001). I think it was Derrida who said that *'we cannot step into the same Heidegger twice'* and I think it is beholden to remember that we each (read) and hence step into a different Heidegger. For instance: Medard Boss described the Existential Foundations of Medicine and Psychology (Boss, 1983) not the refutation of it! Perhaps I am a little tetchy here; but my own living invites me into many spiritual and social margins where there is an almost ideological aversion to conventional medicine and conventional medical treatments and where this text could be read in this way. From personal experience I hold this exclusion of bio-physical medicine to be a dangerous or unethical extreme. For instance: Would you refuse to have a tumour surgically removed- or advise your son or daughter to do the same- in case of interfering with an existential gestation process?

Surprisingly the most interesting part of this text comes at the end when Wilberg describes - what I imagine to be - descriptions of his praxis emphasising the *'felt sense'* with ill clients. This is fascinating and comes very close to describing inter-subjective experiences that I hold to be true and that which I believe – for me- are the result of cultivating a 22 year old regular mindful-meditation practise. Wilberg philosophically contextualises these experiences with great clarity and I would recommend this text just for these passages alone! Further on in a passage at the end entitled *'Heidegger & the Goddess'* the author makes conceptual leaps between Heidegger's hermeneutic of *'Theory'* in relation to Greek thought and to Indian Tantric Ontologies: great stuff!

Reading this book reminded me of reading Szasz's Myth of Mental Illness: (Szasz, 1974) and it's style is reminiscent of that era. It's as if Wilberg were taking a Szasz-ian position to illness as a whole rather than mere *'mental illness'*. I did not have to agree with Szasz entirely with regard to his philosophical position on *'mental illness'* to benefit from reading it and for readers of Wilberg it could be the same. For instance: Szsasz's writings offered to me a reference point and thus enabled me to orientate my own thinking to apparent 'common sense' evaluations within our discourse on mental illness: from here I was able to situate my thinking with the help of debates within the SEA journal and elsewhere (e.g Fulford, 1989 who approaches the evaluative and epistemological problems of the language of 'illness' with the aid of Wittgenstein's

thinking.). Perhaps Wilberg's position/text could be held up as a reference point with which to consider illness philosophically?

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**Daren Messenger**

## Can the World Afford Autistic Spectrum Disorder? Nonverbal Communication, Asperger Syndrome and the Interbrain.

Digby Tantum (2009). London: Jessica Kingsley

> *Neurotypicals may dominate the social world, but people with autistic spectrum disorders rank amongst the great explorers of the untrammelled mind*
>
> (Tantum D, 2009).
>
> *Some... love solitude and t he dark and living apart from mankind, others love spaciousness, light, and meadowy surroundings, and gardens rich in fruit and streams. Some love riding, listening to different sorts of music, or conversing with wise or amiable people... Some sleep too much, some weep, some laugh.*
>
> (Klibansky R, Panofsky E, Saxl F. 1964).

*'Can the World Afford Autistic Spectrum Disorder?'* is a fascinating existential volume, with numerous new concepts and terms that are most rewarding for both the curious reader, and the psychotherapist. The book comprises of an introduction, 8 chapters, 16 pages of notes, a 10 page reference list, a subject index and an author index. Initially, book was titled, *'Things unsaid'*, to emphasise the importance of what language usually leaves out. The experience of belonging emotionally and spiritually to a social group, is often lacking with people with an ASD, and they may never actualize the state Heidegger calls *'fallenness'*. The author speaks of subliminal nonverbal communication, or the concept of the interbrain, and central coherence, which for autistic people is easily interrupted, or generally weak. Social cues are often nonverbal and people with an ASD have difficulty in interpreting this specific signalling system. This type of