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Neuro-Electric Therapy: criticisms of the 1984 Bethlem Study

From Dr Margaret A. Patterson (Harley Street, London)

SIR—In your December 1988 issue (1387-1394), Dr John Strang continues to tendentiously describe what he now chooses to categorize as 'electro-acupuncture' (often referred to as the 'Black Box'). If by this vague definition he still means my treatment process of NeuroElectric Therapy (NET), then he continues to misrepresent this form of treatment in his public statements and should not be taken seriously. Needles have not been used in NET since 1974; nor is NET even based on the acupuncture system.

It is little wonder that he is confused since his 'on-call consultancy service from the manufacturers' was, according to his 1984 article,¹ a commercial salesman—someone who had no knowledge of electronics, medicine or addiction. All the electronic settings that he quotes he used were incorrect.² Despite his uninformed attempt to copy my methods (he did not seek my advice, nor even inform me of his experiments), he concluded at that time: "... the subjects [on 'NET']... showed a more rapid improvement" than those on methadone.¹ However, in his most recent article, he reverses his own documented conclusion when he states: "... it [the 'Black Box'] was found to be less effective than the standard 21-day oral methadone withdrawal regimen...".

From a different article describing the same experiment,³ he declared: "Sleep patterns in the group receiving electrostimulation [ES] only were found to be significantly more disturbed than in the methadone withdrawal group". Significantly, he fails to quote from this article itself the stated conclusion that "of the people who woke up in the night those in the ES group initially spent more time awake but this effect reversed from night 15 onwards".

In addition, his 1984 report was only on nine cases who completed treatment, whereas my detailed analysis of 102 cases shows very different results from his.⁴ Finally, the drop-out rate he quotes for his own methadone withdrawal is 59.8% and 38.8%¹ and my drop-out rate with NET over 7 years was only 1.6%.⁵

As I have stated repeatedly when writing about NET treatment, it is only the strict application of the multiple wave-forms required, at the right time and for the right duration, that will achieve the results I have published. Independent, double-blind clinical trials using both my upgraded stimulators and my perfected methodology, are at present being conducted in association with accredited universities in the United States. Why Dr Strang and his colleagues are so strongly opposed to properly investigating my methodology, while persistently denigrating it, remains a mystery.

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The Bethlem Study on NET: putting the record straight

From M. Gossop, J. Strang & B. Bradley

SIR—We were delighted to hear that 'independent, double-blind clinical trials' are being conducted using Dr Patterson's 'perfected methodology'. Such investigation is precisely what NET needs. Our own attempts to conduct an independent investigation of NET^{1,2} and most especially the results that we obtained clearly did not satisfy Dr Patterson, though we conducted the trial as best we could and reported the results honestly and fairly. Perhaps we could take this opportunity of describing what the study was about.

We were aware that some impressive claims were being made for NET and felt that this form of treatment was worth investigation. Accordingly, we went to great trouble to set up a clinical trial on one

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