

TRANSCRIPT OF VISTARIL TAPE

So whatever you do, you are under some stress, but that may be excessive and, in that case, some measure must be taken against it. There are lots of physiological or psychophysiological means through techniques of relaxation which we won't discuss today. We have to try to use psychological means and self-control in order to avoid anxiety, but its useless to tell a patient, "Don't be anxious." If he is the type, he is anxious and if you can't control it that way you have to help him by giving him some minor tranquilizer at least.

Now, there, I think one should select one that is not particularly dangerous and has not too many side effects. One should take amounts which are not too soporific and do not derange the normal function to an excessive degree. Especially in the evening if you can't go to sleep before because of anxiety. Another aspect of the use of tranquilizers is that you should not only give it once, when the patient is in a case of acute anxiety, but that very often you may have to prolong treatment.

For example, a patient who had a cardiac infarct will remain anxious after that too for months afterwards. In fact, if he is so disposed, even following complete recovery, he will spend the rest of his life in a state of anxiety worrying about whether he won't get another cardiac infarct. So, I think a mild condition of tranquilization, as long as it does not interfere with your normal functioning, for example, driving your car properly and so on, should in some cases, be a constant procedure.