For example, a therapist may be interested in the treatment of a patient, expect success, and then like the patient. The patient may react to the therapist with similar feelings and stimulate the therapist with more interest in the patient, greater enthusiasm for treatment, and increased expectation of favorable results. All these factors may contribute to the final success of therapy.

Understanding of the complex interactions of the therapist's interest in the patient, treatment, and results requires more than retrospective speculation. Careful prospective studies are necessary to determine the relevance and primacy of these factors for placebogenesis and therapeutic effects.

Indirect latroplacebogenics

The physician's interest in his or her treatment and patient is a necessary component of almost every specific therapy, has a synergistic effect with most therapies, and often produces psychological or placebo effects in and of itself. Although the concept of direct iatroplacebogenesis has been demonstrated in many studies, another probably more subtle and extensive process, indirect iatroplacebogenesis, has not been considered adequately in the literature (Berman, 1949; Board, 1959; Frank, 1961; Glover, 1931; Greenachre, 1953; Honigfeld, 1964b; Rosenthal, 1963b).

Medical History

Medical history is characterized by a succession of prestigious physicians with compelling intellectual and emotional investments in various therapeutic theories and practices. These are frequently elaborate, detailed, expensive, time consuming, fashionable, esoteric, and dangerous. The majority were later judged to be ineffective (Shapiro, 1959, 1960a). A common factor in these therapies is the interest of the physicians.

The greater a physician's interest in a theory of therapy, particularly if he or she has innovated it, or if he or she is a recent convert, the more effective that therapy will be. This may occur because the patient displaces the interest from the therapy to himself or herself and experiences the physician's interest in treatment as a personal one. Many psychological factors arise in the patient-physician rela-

tionship. Hopes, expectations, fantasies, fears, feelings of guilt and inadequacy, and so on, become involved in the relationship and treatment. For example, if a patient has ego-alien impulses and fantasies, an interest on the part of the physician, to whom transference has developed, can decrease superego pressures, conflicts, and eventually symptoms. The patient may simply feel that if a physician is interested, then he or she is not worthless.

The physician may be neutral or minimally interested in the patient. However, the physician's commitment to a treatment modality may produce an intense interest in the results of therapy. The patient may experience the physician's interest as an interest in himself or herself. In addition, the physician's interest in his or her treatment may enable the physician to tolerate or be unaffected by the personal idiosyncracies of the patient. The patient may expect criticism or rejection and be surprised or reassured when the physician responds with interest. In other words, some treatments, although ostensibly directed at the patient, may unknowingly affect the physician, and then mediate psychological change in the patient. The effectiveness of these treatments would be primarily due to the process of indirect iatroplacebogenesis.

Pharmacotherapy

Once fashionable insulin coma treatment is increasingly thought of as a complex placebo treatment (Shapiro, 1960a). The interest of the staff, necessitated by the dangers during treatment, may provide part of the explanation for its effectiveness. Patients were selectively chosen for this treatment and were a therapeutic elite. The treatment was expensive, fashionable, elaborate, time consuming, esoteric, dangerous, and patients required considerable attention during and after treatment.

A physician with an interest in psychochemotherapy usually has considerable knowledge about such treatment. He or she will be interested in the symptoms and the differential response of the patient to various drugs and will be careful to observe side effects, especially those that may be dangerous. The physician may encourage the patient to call at any time if side effects develop.