Submission for Symposium PPRS New York January 14-19th

Title: Concepts and Methodology of Single Case Research: the On-Line Archive.

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Brief abstract

Single case studies are quintessential for psychotherapy research and practice. When conducted carefully, they can expand academic knowledge, be of immediate use for the practitioner, and promote the dialogue between researchers and clinicians. At the present time, however, the field of single case research suffers from a lack of access to published materials, which hampers the full exploitation of its potential, both scientifically and clinically. The project we present here addresses this deficiency by the construction of a database and online search engine that gathers single case studies from ISI-ranked journals from different theoretical backgrounds. We developed a theory-free instrument, the Inventory for Basic Information in Single Cases (IBISC), to rate a consistent set of important variables for each case. In this panel, we will discuss the broader framework and methodological considerations underlying our focus on single case studies. Subsequently, the construction of the archive will be described, together with information about its practical use and the characteristics of the included cases. Finally, an illustration will be presented on how the archive can be used to conduct clinically meaningful research. In an initial study, we performed a meta-synthesis of 11 published cases carrying a diagnosis of perversion. For these cases, we investigated transference patterns by means of qualitative methods.

Overall summary:

Single case studies are quintessential for psychotherapy research and practice. When conducted carefully, they can expand academic knowledge, be of immediate use for the practitioner, and promote the dialogue between the researchers and clinicians. Fortunately,
there already exists a large field of published single cases. At the present time, however, the field of single case research suffers from a lack of access to these materials, which hampers the full exploitation of their potential, both scientifically and clinically. The project we present here addresses this deficiency by the construction of a database and online search engine that gathers single case studies from ISI rated journals without regard for theoretical affiliation. In a first step, we inventoried all psychoanalytically oriented clinical and empirical single case studies (N = 445) published in these journals. In a second phase, we developed a theory-free instrument, the Inventory for Basic Information in Single Cases (IBISC), to rate a consistent set of important variables in each case. Finally, in a third step, we used our case archive to study 11 cases with a reported diagnosis of "perversion."

This panel aims to present the three related issues: first, to understand the conceptual and practical background of focusing on single case research, both in conducting single case studies and constructing an archive for published single cases; next, to describe the construction and content of the single case archive and demonstrate how the related search engine works (www.singlecasearchive.com); lastly, we provide a concrete example of how the archive can be used to facilitate clinically oriented research. To the latter end, we offer an illustration of a recently completed meta-synthesis of 11 published cases of psychoanalytic treatment of perversions.

The first presentation focuses on the background of our single case research project. Two main issues will be discussed: on the one hand, methodological considerations concerning measurement error in cross-sectional and group studies, and, on the other, the problematic lack of clinical relevance of purely quantitative research. From this perspective, we offer an argument for the importance of single case research and the place of the single case archive.

In the second presentation, the construction of the archive itself and the selection of clinical cases to be included will be the focus of attention. After a short description of the case selection procedure and the instrument (IBISC) for inventorying basic descriptive information, the different characteristics of published treatments and evolution over time (I don't know what you mean by this phrase) will be discussed in more detail. Finally, special attention will be paid to the different psychoanalytic schools present in the case studies and to the value of systematic research using naturalistic single case studies firmly rooted in clinical practice.

The third presentation will illustrate how the archive can be used as a starting point to aggregate knowledge from different case studies. Using specific selection criteria, a set of cases on a specific topic can be selected and used as data for further research. The example to be presented in this panel concerns an investigation of the transference relationship characteristic of perverse patients in eleven case studies. We used the qualitative method of thematic analysis to code passages in these studies referring to transference. As a theoretical framework, we applied a version of Lacan's L-schema to distinguish imaginary and symbolic aspects of the transference. We found a surprising coherence in the clinical descriptions, despite varied theoretical frameworks employed.

Finally, Our discussant will speak to the value of collecting analytic cases as a naturalistic portrait of what clinicians are doing and as an avenue to explore differences and commonalities across clinicians and schools of psychoanalysis. Analysis of published cases, studied from a research perspective, would be accessible to clinicians, who are probably less interested in reading RCT or other more "rigorous" studies. As an illustration, the paper on
cases of perversion will be discussed. Problems and advantages of this approach are highlighted.

**Learning Objectives**

After attending this session, participants should be able to:

1. Understand the scientific context and arguments for single case research.
2. Learn to use published single cases as data sources for investigating clinically oriented research questions.
3. Know how to access and employ the Single Case Archive.
4. Distinguish between different types of case studies.
5. Differentiate different types of case study methodologies.

**Audio-visual equipment:**

Possibility to show power point presentation (with internet access).

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**Component Presentation 1:**

"The Single Case Archive: Methodological Background"

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**Abstract:**

The first part of this symposium focuses on the methodological background of the single case archive. It is argued that single case research provides a solution to several long-standing problems of psychological research in group designs. Statistical testing of hypotheses always happens under the assumption that the variables under investigation are measured without error. Nevertheless, empirical research shows that this assumption is violated when it concerns psychological measurements in group designs. Psychometric studies often warn of the impact of this violation on the quality of statistical inference. Unfortunately, this finding did not change widespread malpractice in the field of empirical research in psychology. Single case research addresses some of the problems associated with measurement error. At the moment, however, the field suffers from a lack of ready access to the entirety of published single cases, which hampers the full exploitation of their potential, both scientifically and clinically. Researchers and clinicians who apply standard search procedures to electronic databases are at risk of missing a substantial portion of the cases relevant to their research questions or clinical issues. Under these conditions, screening of full article texts becomes necessary for selection of a comprehensive set of single cases, which makes the search for relevant cases a time-consuming and discouraging enterprise. The single case archive was constructed to change this state of affairs and to make the field of single case research more accessible for clinicians and researchers.
Summary:

The aim of this project is the promotion of the single case design in psychological research. The choice for the single case design is motivated by the observation that the proportion of error variance in psychological measurements in group designs often is dramatically high. More specifically: the proportion of error variance in psychological measurements in group designs is too large to test hypotheses. Error variance usually is not accounted for when determining the power of a psychological test. This is very strange, since it is clear that it is straightforwardly associated with it.

This problem becomes clear when we consider the impact of measurement error on the most basic test, the test of the strength of a correlation between two variables a and b. Correlational tests always start from the assumption that the variables that are involved in the test are measured without error. This means that in studying the strength of a correlation between two variables, the discrepancy between the correlation observed in the study and the true correlation will become greater as error increases in the measurements.

One of the best ways to illustrate this violation of the assumption of error-free measurements is through studies addressing the convergent validity of psychological measurements. If one measures the same psychological variable - for example, a certain personality trait – by means of different measurement methods – for example, a questionnaire, a q-sort, an implicit measure, etc. - how well do the measurements converge? The answer is that the different measurements will show correlations somewhere between .00 and .45.

There is a difference depending on the variables to be measured, of course. For example, correlations between self-reports and reports of spouses, partners, peers and clinicians range from .14 to .44 (Meyer, Finn, Eyde, et al., 2001); correlations between self-reports and projective tests range from .04 to .13 (Meyer et al., 2001); correlations between self-reports and observer ratings range from .15 to .32 (Meyer et al., 2001); and correlations between explicit measures and implicit measures range from -.22 to .33 (Meyer et al., 2001). To make the size of these correlations more tangible, table 1 presents data from a thought experiment in which a carpenter measures the same windows by means of three different measurement methods, and in which the three resulting series of measurements correlate .45 (which equals the upper limit of cross-method agreement in psychological research).

We conclude from this table that psychological measurements contain a huge proportion of error variance. The question then is, what are the consequences for psychological research? As early as 1904, Spearman warned the research community about this problem. His disattenuation formula makes clear that measurement error actually decreases the power of a significance test to this extent that the observed correlation is totally different from the real correlation.

Table 1: Three series of a carpenter’s measurements of the same window that correlate .45.

<table>
<thead>
<tr>
<th>Window 1</th>
<th>Measurement obtained by Method 1</th>
<th>Measurement obtained by Method 2</th>
<th>Measurement obtained by Method 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Window 1</td>
<td>180 cm</td>
<td>130 cm</td>
<td>60 cm</td>
</tr>
<tr>
<td>Window 2</td>
<td>100 cm</td>
<td>200 cm</td>
<td>150 cm</td>
</tr>
<tr>
<td>Window 3</td>
<td>160 cm</td>
<td>220 cm</td>
<td>130 cm</td>
</tr>
<tr>
<td>Window 4</td>
<td>100 cm</td>
<td>170 cm</td>
<td>210 cm</td>
</tr>
<tr>
<td>Window 5</td>
<td>30 cm</td>
<td>100 cm</td>
<td>20 cm</td>
</tr>
</tbody>
</table>
In addition to the dramatic problem of measurement error, there is another massive problem in mainstream psychological research. Most of the research is purely quantitative in nature, meaning that the connection with any concrete phenomena of everyday clinical practice is difficult to make. It is widely recognized that there is a gap between academic research and clinical practice, with a belief in some quarters that this problem is due to the clinicians, who are not interested enough in academic research. I argue that the problem has to be situated in the first place in academic research itself. If research does not start from concrete clinical descriptions, how would clinicians ever be able to relate research to practice? And if clinicians can’t relate research to practice, why then would they be interested in it?

Without entering into psychometric details, we argue that single case research, and by extension multiple case research, offers a solution both to the problem of measurement error (because it avoids some of the major sources of error variance) and to the problem of the gap between quantitative analyses and clinical reality (Desmet, 2013). As noted above, however, the lack of surveyability and accessibility hampers every effort to accumulate data across cases. Briefly described cases are usually published in journal articles, sometimes as the focus of the piece, other times as illustrations in the course of conceptual or technical accounts. Abstracts of these articles frequently lack detailed information about the cases. They often only mention that a clinical case is presented, without further specification. Even when the case is the focus of the article, the range of relevant information cannot be compiled in the limited format of an abstract. Consequently, researchers and clinicians who apply standard search procedures in electronic databases are at risk of missing a substantial portion of the single cases relevant to their specific research questions or clinical issues. Under these conditions, screening of full article texts becomes necessary for selection of a comprehensive set of single cases. This state of affairs makes the search for smaller cases a time-consuming and discouraging enterprise, which is usually neglected or left incomplete. Thus, a fertile field of empirical data is left fallow.

The single case archive was constructed to change this state of affairs and to make the field of single case research more accessible for clinicians and researchers. The other presentations in this symposium will discuss the construction of this archive.

References


Component Presentation 2:

"The Single Case Archive: a Status Report"

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Abstract:

Single case studies are quintessential for psychoanalytic theory, research and practice. At this moment, however, the field of single case research deals with a lack of surveyability, which hampers the full exploitation of its potential. This reading discusses the construction of an (online) single case archive that intends to deal with this problem. We selected case studies presenting psychoanalytic or psychodynamic individual therapies that were either the focus of the particular article or included as illustrative accounts of sufficient size. Basic information on patient (age, diagnosis...), therapist (age, training...), therapy (duration, session frequency...) variables and research methodology (type of case (clinical, experimental, systematic), type of data...) was systematically screened by means of the Inventory for Basic Information in Single Cases (IBISC). Four hundred and sixty-five single case reports met our inclusion criteria. A summary of the results of the IBISC screening is presented. While descriptive information on patients is mostly well presented, information about the therapist is often lacking. A study is proposed that intends to identify the psychoanalytic schools the different authors belong to. The review showed that most published analytic cases represent clinical treatments; empirical naturalistic and experimental single cases are a minority. Because of the clinical and academic strengths of systematic cases these are discussed in more detail.

Summary

Single case studies are quintessential for psychoanalytic theory, research and practice. They allow investigating psychotherapy processes without losing clinical significance, thereby addressing the famous science-practitioner gap. Despite the recognition of the historical importance of case studies and their role in psychotherapy practice and training, the role of case studies remains largely contested from an academic point of view, especially with respect to the issue of generalization. Nevertheless case studies have always been written and published, and, as discussed in the first presentation, a major step forward in making results from single-case studies more useable would be to systematically aggregate the findings from a number of case studies on the same topic. Unfortunately, the exploitation of the full potential of the field of single-case studies is currently hampered by a lack of ready access to this type of case gathering (Desmet, Meganck, Seybert, et al., 2013). A first step as a precondition for all further analyses thus consists in the construction of an (electronic) database that organizes and assembles published single-case studies and classifies them according to case-descriptive information (see also Fishman, 2005; Iwakabe & Gazzola, 2009). This is the goal of the Single Case Archive (SCA) (www.singlecasearchive.com) that will be discussed in this presentation. Currently it consists of 445 psychoanalytic and psychodynamic single cases published in ISI-ranked journals. For the selection of the cases the following inclusion criteria were used: (1) the single-case concerns individual psychoanalytic treatment, (2) the case study describes a therapy that is not only ‘psychoanalytically inspired’ but that can also be qualified as psychoanalytic in terms of
therapeutic technique (e.g. music therapy, exclusively cognitive methods, art therapy, etc. were not included), (3) the case study is either the focus of the article or an illustrative vignette of sufficient size (more than 50% of the publication or longer than five pages), (4) the case study is written in English, French, or German, (5) the case study is not merely a reflection on a previously published case, but presents an original analysis of therapeutic data.

All articles we collected were screened by means of the newly constructed Inventory of Basic Information in Single Cases (IBISC). This inventorying instrument is independent of theoretical orientation and maps the presence of basic information on patient (e.g. gender, age, diagnosis…), therapist (e.g. gender, age, training…), therapy (e.g. duration, outcome, session frequency…), and research method (e.g. type of data, type of analysis…). We used the database that was constructed based on these characteristics to build a search engine that is available online (www.singlecasearchive.com). The practical use of the archive will be demonstrated during the presentation.

Looking at publication trends we notice a sudden increase in single cases published in ISI-journals in the nineties, which is both absolute and relative (compared to publications in the field of psychology and psychoanalysis; see figure 1). Despite this increase, which can be interpreted in different ways and might suggest a more positive evaluation of case studies, they remain a marginal part of publications in these journals (around 3% of psychoanalytic publications). Patient, therapist and therapy characteristics of the single cases in the SCA will be discussed and placed within the historical context of psychoanalysis. Remarkable findings are for example the change in the proportion of lay psychoanalysts as compared to psychoanalysts with an MD and the change in gender ratios both for patients and therapists over time.

![Figure 1](image_url)

In general, there is a lack of descriptive information in most single case reports. Also issues of privacy and informed consent receive little explicit attention. Most information is provided concerning the patient, yet therapist and therapy characteristics are hardly considered. In order to address the lack of information, we are conducting a survey among the authors on their psychoanalytic orientation. Results from this survey will be presented. In the future, these data will allow searching the Single Case Archive for case studies from specific psychoanalytic schools.

Not surprisingly, most cases were clinical case studies (88%), while a minority were experimental (6) or naturalistic systematic single case studies (49). Clinical case studies are the classic type of case studies where usually the therapist provides a narrative report of what
happened during a therapy- thus, a subjective reporting on, for example, the process of therapy or a certain construct. Experimental case studies represent the other extreme where rigorous methods are used to test hypotheses about the effects of treatment and specific interventions. Changes are then compared to baseline scores of target behavior. Finally, naturalistic systematic case studies refer to case studies conducted in a real life context, yet material is mostly gathered from different sources (e.g. quantitative and qualitative, therapist reports and questionnaires...) and interpretation is not done or not solely done by the therapist, but rather a research team is involved in this process. Methodological issues concerning the different types of studies will be discussed both from a clinical and a research perspective. Systematic single case studies and their specific methodologies will be elaborated starting from an in-depth study of the methods used in the systematic cases contained in the single case archive.


**Component Presentation 3:**


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Abstract

The Single Case Archive is especially helpful for comparing and synthesizing multiple case studies, as it permits selection of relatively homogeneous sets of cases. We will present methodological considerations and results from a meta-synthesis of case studies on the psychoanalytic treatment of perversion. Transference in perversion, we found, is characterized by specific problems such as a defiant and polemical attitude, erotic transference, projections, and aggression. It has been noted that this transference poses particular problems in psychoanalytic treatment and engenders the risk of countertransference acting out. We propose that Lacan’s L-schema can contribute to this discussion as it distinguishes between an Imaginary and a Symbolic dimension in transference. Eleven case studies on sexual perversion were selected from two databases (www.singlecasearchive.com and Web of Science) and thematically analyzed using the L-schema. The results indicate that identification, fusion, and rivalry in transference are situated on the Imaginary axis. These aspects are related to repetition and resistance, and focusing on them is counterproductive. Rather, the analyst should focus on the Symbolic axis, by paying attention to the content of the transference and by stimulating the patient to put his emotions and phantasies into words. Examples will be provided. The thematic analysis reveals the importance of the position of the analyst in this work, which is described within the L-schema as being the representative of
the otherness in the Other. We conclude that conditions for change can be established by
occupying this position, rather than through insight and transference focused interpretation.

Summary

Single case study research permits investigation of phenomena in their particularity
and complexity to a level that can never be attained in group designs. The drawback of this
method is the lack of generalizability, as the results for one case might not apply to another
case. However, in a meta-synthesis of case studies, experience and knowledge from several
published case studies can be aggregated. The Single Case Archive is especially useful for
conducting a meta-synthesis as it enables selection of relatively homogeneous sets of cases. In
this presentation, we will demonstrate how the archive can be used to conduct a meta-
synthesis of published case studies. We selected eleven case studies on the psychoanalytic
treatment of perversion in order to search for patterns of transference across cases.

It has been noted for several decades that the treatment of perverse patients is
classified by a specific transferential relationship (Etchegoyen, 1978; Jimenez &
Moguillansky, 2011). Such patients tend to erotize the therapeutic relation, use both words
and silence to make the analyst excited and impatient, and take a (latent) polemical and
defiant attitude. The perverse patient projects his erotic phantasies onto the analyst and wants
the analyst to join him in his perverted world. From the perspective of Lacan’s L-schema,
these phenomena can be considered imaginary aspects of the transference. The Imaginary
dimension stands for the experience of self-coherence in relation to a mirror image. Along the
Imaginary dimension, we claim to know who the other is and what the other wants,
and inversely we assume to know who we are ourselves. This dimension has an organizing role in
mental life, but also a quality of misrecognition: it neglects the otherness of the other, as well
that fact that in our own subjective functioning the unconscious makes up a dimension of
otherness that repeatedly disrupts the smooth continuity of our self-experience. The question
then arises: can the perverse patient relate to the otherness in the analyst and see that his
symptoms and phantasies are products of the unconscious? In terms of the L-schema: can the
perverse patient function on the Symbolic dimension?

In eleven case studies on the psychoanalytic treatment of perversion, we selected
passages in which the author explicitly discusses an aspect of the transference. Next, we
conducted a thematic analysis on the selected passages following the procedure outlined by
Braun and Clark (2006). Then we used the L-schema as a framework for coding what took
place in the transference.

The codes relating to the Imaginary dimension in the transference were grouped into
three main themes: 1) identification, 2) fusion, and 3) rivalry. The first theme of identification
refers to the fact that the patient repeats former relationships within the transference. The
patient recognizes in the analyst the image of an old object (e.g., parent) and identifies with
the corresponding role (e.g., child). The transference relation can also be organized around the
image of the object of perversion that is recognized in the analyst: the patient then identifies
with the role of sexual partner in the transference. The theme of fusion means that the
difference between the analyst and the patient becomes blurred, and the patient seems unable
to conceive that the analyst thinks, feels, and desires differently from himself. In the context
of this fusion, the analytic situation itself can become a source of sexual excitement.
However, this tendency towards fusion comes together with rivalry and a struggle for power.
As the patient measures his self-image against the image of the analyst, the question
automatically arises as to who is superior. Some patients start their treatment in a very provocative way by articulating their sexual interests in great detail. Others try to convince the analyst of the superiority of their mode of sexual enjoyment and turn their perversion into an ideology. In the context of this rivalry, forms of aggression towards the analyst can be noted.

The codes relating to the Symbolic dimension in the transference were grouped into three themes: 1) addressing the Other, 2) the otherness of the Other, and 3) the analysis of the symptom. The first theme, addressing the Other, refers to the fact that the patient, at a certain point in his life, decides to start talking about his symptom instead of merely ‘living’ it. None of the patients approached the analyst with the sole request to be cured of their perversion. The most prominent reason for starting analysis was depression, hopelessness, and/or anxiety because of the social isolation that resulted from their perversion. The second theme concerns the otherness of the Other and refers to the position taken by the analyst. The perverted patient puts the analyst under great pressure to identify with a certain image, such as a sexualized image or the image of a parent. In several case studies it is reported that the analyst tries to maintain a distance from this image and to differentiate between the analyst him- or herself from the image that is projected onto him or her. Another aspect related to the theme of the otherness in the Other is the extreme tolerance and the difficulties avoiding a countertransferential acting out. One of the most difficult tasks in the treatment of perverse patients seems to be enduring the patient’s provocations. The third and final theme concerns the analysis of the symptom. By this we mean the work of free association and interpretation that enables the patient to articulate the narrative material that unconsciously determines the symptoms. In the various case studies, we found fragments that demonstrate the progress of perverse patients in unraveling the unconscious associations related to their perversion. Evidence of this analytical work can be situated at several levels: questioning the motives for thoughts, feelings and actions, questioning identity and questioning the perverse fixation.

The thematic analysis of 11 case studies revealed that transference in perverse patients is not only characterized by imaginary aspects of resistance, but also by productive aspects. The perverse patients puts the analyst great under pressure – overtly or subtly – to identify with a certain image on the Imaginary dimension. In this respect, the treatment of perverse patients is difficult for the analyst, and requires a great deal of tolerance and tenacity. However, when the analyst creates a dissonance between what the patient expects in the analyst’s reaction and what in fact occurs, the perverse patient can be incited into further exploration of the unconscious. Our results indicate that the perverse patient is able to do analytic work: he is able to suspend the satisfaction he derives from his symptom and begin talking about it. Furthermore, the pervert is able to question his motives for thoughts, feelings and actions, the products of his unconscious, and the signifiers that make up his identity.

Component 4: Discussion

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Abstract

The discussant will speak to the value of collecting analytic cases as providing both a naturalistic portrait of what clinicians are doing in practice and as an avenue to explore differences and commonalities across clinicians and schools of psychoanalysis. Analysis of published cases, studied from a research perspective, is accessible to clinicians, who may be less interested in reading details of RCT or other more "rigorous" studies. They offer the practitioner a relatively rapid means of surveying what has been written about a particular clinical problem that they are facing and to learn from the experiences of colleagues. While this way of studying data does not possess probative value, it opens up opportunities for peer dialogue and reflection. Learning from the accumulated experience of analytic clinicians has been a haphazard process and may have held back the profession from evaluating various precepts or assumptions. Moreover, when the cases are interpreted by more rigorous qualitative and quantitative research methods, their value as a resource for teaching and continuing education becomes significant. As an illustration, the paper on cases of perversion will be discussed. Problems and advantages of this approach are highlighted.

Summary

Analytic clinicians learn from published cases. Curricula of training programs rely on assignment of important articles, as well as group study of continuous cases. These methods preserve the individual approach of psychoanalysis to each patient and distinguish it as a distinctive theory and method of treatment. Problems with psychoanalytic education and practice based on this traditional approach to accumulation of knowledge include 1) the selection of articles and cases to read, 2) limitations of information provided by the author (discussed by the presenters), and 3) theoretical biases of teachers or programs. In addition, unsuccessful cases are rarely published. We often say that students are trained in a certain unique kind of thinking, not a specific method of treatment, but, in fact, each school has its own conceptual style and range of preferred practices that are not always identified. Nevertheless, the archive of published cases by experienced analysts retains value as providing examples of peer-recognized clinical work, application and illustration of hypotheses, and discussion of practical questions over the history of the profession. In a way it is remarkable that the compilation of accumulated experiences of treatment for various problems and diagnoses over the history of psychoanalysis has been so limited. Perhaps psychoanalysis has proceeded, as Thomas Kuhn proposed for the natural sciences, by changes in peer assessment and beliefs, as opposed to a disproof of abandoned approaches. In any event, the lack of critical self-scrutiny, the evolving multiplicity of theories, and the narrow base of educational materials for students are impediments to progress of the discipline of psychoanalysis. These problems cannot be remedied by single case research, but students and practitioners can be sensitized to them by the examination of sets of published cases that can be compared and studied.

The single case archive developed by the presenters represents a significant step in making the record of published cases more accessible to researchers and clinicians. Through
their on-line search tool, cases can be selected by various criteria so that groups of ostensibly similar patients can be compared. In this way, students of psychoanalysis could learn more about hypothesized regularities in treatment process of different conditions. In addition to its teaching value as an educational tool, archival data may give rise to more specific research designs. By working up from problems framed by clinicians in published articles, investigators might pursue treatment questions through larger samples from analytic practitioners. As a first step, more widespread collection of consistent data from actual cases might be stimulated. From this exploratory process, prospective studies could arise to investigate specific hypotheses.

The study of treated cases of perversion carried out by the presenters is a good introduction to these possibilities, both their limitations and advantages. Of note is the limited number of cases described in sufficient detail for rating. Could the archive solicit submissions of additional cases, perhaps to be peer-reviewed for inclusion? This should be a relatively low-cost type of project. What kinds of data should be requested to screen for cases in the category of perversions? The criteria for this label were not explicit in the eleven cases, although defining the category seems important if it is to be taught clinically. In this example, the finding of common transference related issues may point toward confirmation of the psychoanalytic diagnosis, although, of course, other groups, like Borderline Personality, might demonstrate similar phenomena. The study also points towards items that should be specified in new case reports. Comparisons between clinicians from different major schools would also be feasible. Other metrics than the Lacanian model could also be explored, even for these eleven cases. Eventually, findings might be applied to a more rigorous empirical study of on-going single cases that meet specific criteria. Currently, we are only at the first step of using the Single Case Archive. The presenters are to be congratulated for providing it to us and I encourage them to continue to develop and expand this important resource.