by the controversies about the differences observed when conventional or active placebos are used. (An active placebo is a treatment having some of the effects of the active treatment, but not the main therapeutical effect: e.g. the benzodiazepine lorazepam, causing sleepiness and dizziness, was used as active placebo in a study on the effects of morphine and gabapentin on neuropathic pain). At the opposite end, favourable placebo responses in cancer patients have never been confirmed by rigorous assessments, while nocebo responses are unfortunately not unusual, as already mentioned.

Some of the more apparently bizarre varieties of the placebo response come from the field of sport and doping, to the point that such a response can be shown without using an active drug treatment: for example, in training sessions, by secretly and progressively reducing a weight to be lifted on an extended leg after inactive treatments, so as to make the subject believe that his muscular force is progressively boosted, and then checking that the weight-lifting capacity has been really increased by tests with heavier and heavier loads. Placebo and nocebo effects on sexual performances are also quite remarkable, in agreement with the important positive and negative roles of psychological factors such as expectancies, performance anxiety, etc. It goes without saying that the popular “blue pill” and its blue fake have been used in quite a few of these studies.

Additional thorny problems are encountered in the attempts to assess placebo and nocebo responses when blinding procedures cannot be used, or are unsatisfactory, as is the case in several areas ranging from acupuncture to the hundreds of different types of psychotherapies. Incidentally, the brief chapter on psychotherapies is relatively weak compared to all others. This is due not only to the fact that the methods so far evolved to bypass the aforementioned difficulty are still far from being satisfactory, but also to the author’s wise avoidance to get in the hot discussion about the assessment of outcomes - a topic which cannot be covered in a few words.

Recent studies have started throwing light on the mechanisms of various types of placebo and nocebo responses, the most obvious examples being again in the area of pain modulation. For example, the placebo effect mimicking pain-killing by morphine has been shown to be due, at least to a considerable extent, to the release of endogenous opioids, being reduced or blocked by naloxone and potentiated by proglumide, a cholecystokinin (CCK) antagonist (CCK is an endorphin antagonist). By contrast, the placebo response mimicking the effects of a non-opiate analgesic, the NSAID ketorolac, is blocked by the cannabinoid antagonist rimonabant. This points to a substantial role of endocannabinoids in the modulation of pain and related responses, which could help explaining the favourable effects of cannabis derivatives in neurological and other conditions. The progress in this area is fascinating, as shown by other types of data obtained with imaging, genetic and immunological methods which support the specificity of different placebo and nocebo responses, but cannot be summarized here.

Last, but not least, the two final chapters. One is devoted to a clear analysis of the exponential growth of ethical problems (and conflicts between various interested and responsible parties) in parallel to the increase in the sophistication of the experimental and non-experimental uses of placebos. The other one is devoted to some startling examples of placebo effects in daily life, ranging from value assessments concerning commercial products to political opinions.

In 127 pages, including bibliography, one could not expect more. But, this reviewer hopes that an updated edition of this precious work can include a discussion of the relations between placebo and nocebo responses and the so-called Attribution processes; that is, the highly variable and complex relations between what people think about what makes them healthy or ill, about what accelerates or delays the healing of their ailments, and what really goes on as assessed by objective methods.

Giorgio Bignami
già Istituto Superiore di Sanità, Rome, Italy
welin.bignami@mclink.net

Even relevant scientific articles are rarely cited after a decade from the original publication. Editorials experience an even shorter duration. Reviews of books do not normally survive the fate of the book they refer to. Thus, it can be considered a surprise to see a review (1) that is reprinted twenty-five years after the original publication, still keeping its interest and freshness. It has been published in the issue no. 3/2012 of the Italian quarterly Journal Psicoterapia e Scienze Umane (“Psychotherapy, Humanities, and Social Sciences”).

The reason might be that the review, reflecting on the role of the Journal Psicoterapia e Scienze Umane two decades after the first publication in 1967, offers the reader a great deal of information that still is of interest today. Contextualizing the origin of the Journal in the Italian intellectual life of the 1960s-80s, the review primarily reflects on the interaction between psychotherapy and human sciences and explains how the Journal was “rooted in a praxis that applies the theoretical corpus of psychoanalysis to education and therapy, keeping the milieu of humanities and social sciences as reference points for verifying the role and outcomes.
of the therapeutic activity and stressing the need for interdisciplinary work” (1).

The Journal was founded in 1967 by Pier Francesco Galli. The environment was that of the Milan Group for the Advancement of Psychotherapy, a group of eminent psychoanalysts and psychotherapists, who from the 1960s had been strongly engaged in education activities, publication of books and participation to debates. The topics at the core of the review fully maintain their interest today. Among others, the interdisciplinary approach (specifically, the need to define common grounds where “our technical solitude meets the technical solitudes of other specialists”); the way to organize education (and continuing education) of psychotherapists; the coexistence between theoretical issues and therapeutic practice; the attention to the more general cultural and to political issues.

Together with original articles, debates, presentation of clinical cases and book reviews, the Journal includes a section, “Traces”, devoted to reproducing papers that continue to stimulate a reflection even years after their first publication. The scope of this section is entirely consistent with the interdisciplinary attitude of the Journal. For instance, in the same issue where the review is published, a discussion on the role of intellectuals, and of the intellectual capital, takes place. The intense experience of Armando Marchi, who worked in the sector of human resources as a team leader of the Barilla Lab for Knowledge and Innovation, witnesses the need to pay attention to the complexities and wholeness of individuals as opposed to the over-simplified attitude of organizations that are mainly focused on (or obsessed with) performance measurement (2).

Another example of the interdisciplinary approach of the Journal is provided, in the same issue, by the article by Piero Porcelli, the most prominent Italian researcher on psychosomatics, analyzing current developments in psychosomatics and centered on the notion of the relative weight of biological and psychological factors (3). In the meantime, the accompanying article by Pietro Pascarelli discusses, from the perspective of medical anthropology, the limitations of the biomedical paradigm of this discipline, with its enduring mind-body dichotomy (4).

A sample of the most important papers can be found at the Journal website (www.psicoterapiae.scienzeumane.it). Even though it would be impossible to mention all the topics covered during the years, it is fair to say that they dealt with both relevant and controversial issues: from the impressive increase in the use of antidepressants in the population, to the new classification of mental disorders, to the need for a verification of the outcome of psychotherapies and in the same time for a sensible application of Evidence Based Medicine.

The present Editors, Pier Francesco Galli, Marianna Bolko and Paolo Migone, should be praised for their ability to guarantee the independence of Psicoterapia e Scienze Umane. The Journal does not accept advertisements and does not rely on funding from associations/institutions. In an era of crisis of the entire editorial sector, the fact that a Journal only depends on subscriptions of individuals (and libraries) is a reason for optimism and suggests that, in the end, quality pays off.

References

Giuseppe Traversa
Istituto Superiore di Sanità, Rome, Italy
giuseppe.traversa@iss.it

In a recent and influencing book about contemporary biopolitics, titled The Politics of Life Itself, the English sociologist Nikolas Rose writes about the “biologization” of human being, that is the centrality of biology in explaining human nature. Within this strategy, according to Rose neuroscience plays a key role, and it may be inscribed into a paradoxical outcome of the western culture. In fact, while from the twentieth century the man of western democracies has interpreted himself as a subject with a psychological centre expressing his identity as subject of rights and duties, from the half of the Century he started to explain himself and his relationships and to act on himself as being shaped by his biology. As a consequence what Rose calls “somaticization” is increasingly influencing our way to think ourselves and particularly our mental life, that is our thoughts, wishes, emotions and behavior. Somaticization means that our desires, moods and suffering are not included in the psychological space anymore, but located in the body as such, more specifically in a particular organ, the brain, explained according to the neuroscientific paradigms. Thus, according to Rose, we have become “neurochemical selves”.

There is no doubt that neuroscience offers new poten-