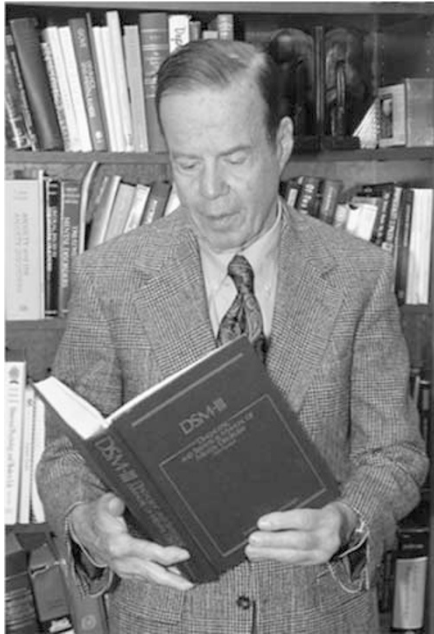


In Memoriam

Robert Spitzer: A Psychiatrist for the Ages

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Dr Robert Leopold Spitzer, the psychiatrist who transformed the science and practice of psychiatry by leading the development of DSM-III, died from complications of heart disease on 25 December 2015 in Seattle, WA, where he had moved with his wife and long-time collaborator Janet Williams (a co-developer of DSM-III) in August 2015. He was 83 years old.

Robert Spitzer received a bachelor's degree in psychology from Cornell University in 1953 and a medical degree from New York University School of Medicine in 1957. He completed his psychiatric residency at New York State Psychiatric Institute and the Columbia University Department of Psychiatry in 1961 and graduated from Columbia's Center for Psychoanalytic Training and Research in 1966. Dr Spitzer was a vital member of the faculty of the Columbia University Department of Psychiatry and New York State Psychiatric Institute for almost half a century until he retired in 2003.

Early in his career, Robert Spitzer was thrust into what was to become a heroic role that may have saved psychiatry as a medical specialty. Psychiatry was under siege by critics and in a crisis of credibility in the mid-1970s when he was appointed to oversee the revision of the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*. Prior to that appointment, Spitzer's career had focused on the measurement of psychopathology and the development of survey instruments and structured interviews, culminating in 1978 with the development of the Research Diagnostic Criteria and its companion interview,

the Schedule for Affective Disorders and Schizophrenia (SADS). Other contributions included developing the Structured Clinical Interview for DSM (SCID), which has become the most widely used structured diagnostic instrument for research, and the Patient Health Questionnaire (PRIME-MD) that is now widely used in primary-care medicine for screening and diagnosis of depression and for monitoring response to treatment.

However, the seminal achievement of Spitzer's career was the establishment of a psychiatric diagnostic system that was empirically based on uniform standards. His exceptional intellectual, organizational, editorial, and political skills were put to test in the production of the DSM-III, which required the development of operationalized diagnostic criteria for every mental disorder in the face of opposition by the then prevailing psychoanalytic community as well as the growing anti-psychiatry movement. Among its key attributes were its specification of symptoms and good diagnostic reliability, which resulted in its consistency across the mental health-care community and widespread acceptance by researchers and clinicians in the USA and internationally. Among the new diagnoses championed by Dr Spitzer as part of the DSM-III process was post-traumatic stress disorder, which was added in the context of increased recognition of the psychological wounds of combat exposure among soldiers returning from the Vietnam War.

Perhaps Spitzer's most famous achievement was the removal of the diagnosis of homosexuality as a mental disorder. In the early 1970s after meeting with gay-rights advocates, he examined the evidence for homosexuality as a pathologic condition. The issue was extremely contentious, but, in 1973, ultimately he concluded that there was no evidence to support same-sexual orientation as a pathologic condition. Consequently, he engineered a deal by which the diagnosis was replaced by 'sexual orientation disturbance,' to describe people whose sexual orientation, gay or straight, caused them emotional distress, making it clear that sexual orientation in and of itself was not the grounds for a diagnosis of a mental disorder. This paved the way for the eventual societal acceptance of homosexuality as a normal variation in sexual attraction.

Above all, Spitzer was a seeker of the truth who was fiercely determined and intellectually rigorous. He was a unique person who admirably served the field of psychiatry and will sorely be missed.

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