Martin M. Katz: Multivantaged vs. Conventional Assessment Method

Collated Document by Olaf Fjetland

This collated document includes Martin M. Katz's essay, “Multivantaged vs Conventional Assessment Method,” posted on May 22, 2014, and the exchanges that followed the posting of this essay.

Two participants exchanged a total of four postings: two each by Martin M. Katz and Donald F. Klein. The last entry in this exchange was made on February 23, 2017.

Martin Katz passed away on January 12, 2017, prior to the posting of Donald Klein’s response to his reply and the project was terminated.

This collated document is now open to all INHN members for final comment.

Martin Katz May 22, 2014 essay
Donald Klein Aug 18, 2016 comment
Martin Katz November 10, 2016 reply to Klein’s comment
Donald Klein February 23, 2017 response to Martin M. Katz’s reply

Olaf Fjetland: Collated document (June 29, 2017)

Martin M. Katz: Multivantaged vs. Conventional Assessment Method

The Multivantaged Assessment Method (MVAM) of clinical evaluation was adopted to describe an approach to the measurement of the diverse patterns of psychopathology displayed in the various forms of mental disorder and to measure changes in the patterns before and after treatment. The approach assumes that most
disorders are comprised of dimensions, components of disturbed affect, behavior and cognition, which interact to define their structure. It is further assumed that no one vehicle of measurement whether the observations of the experts or the subject’s report of the experience is capable of fully or accurately describing the complex nature or the critical facets of the disorder. Because of the many ways that the disorder can be expressed it requires more than one “vantage” on its expression to achieve accurate measurement. To achieve a more “objective” picture of the behavior, the multivantaged assessment method (MVAM) involves combining such perspectives to achieve a consensual estimate of the type and severity of the behavior or emotion, at issue. In the case of serious emotional disorders such as “depression,” a collection of valid clinical methods are recommended exemplifying the multivantaged approach, to measure the facets and severity of the disorder and to assess the impact of various interventions on the disorder. This is called the “Multivantaged Assessment Method”. The currently established method for clinical trials of antidepressants relies on a sole method of evaluation, the Hamilton Depression Scale, which measures change in overall severity of the disorder, but which provides no further validated information on the specific clinical actions of the experimental drug. The MVAM was designed to extend and enhance the conventional assessment by providing, in addition to a measure of overall severity, a profile of the clinical and psychological actions of the trial treatment.

**Further Elaboration of MVAM**

Accurate measurement of the various facets of psychopathology cannot be accomplished through any one vehicle of measurement. It requires combining the observational ratings, the report of the subject, and the subject’s performance on cognitive and psychomotor tasks. The term “multivantaged” takes on important meaning particularly where observation of behavior and physical expression is concerned since it is known that the perspectives of observers of emotionally charged incidents can vary widely. The author of the term refers in his book (Katz 2013) to the “Rashomon” effect, best demonstrated in a classic Japanese film, showing how the emotional aspects seriously influence the perceptions of different observers, but in different ways. To achieve a more “objective” picture of the behavior, the MVAM involves combining such perspectives to achieve a consensual estimate of the type and severity of the behavior or emotion, at issue. In the case of serious emotional disorders such as “depression”, a
collection of valid psychological methods are recommended exemplifying the MVAM, to measure the facets and severity of the disorder and to assess the impact of various interventions on the disorder. These methods include the Schedule for Affective Disorders and Schizophrenia-Change version (SADS-C), the Hamilton Depression Rating Scale, the Symptom Checklist (SCL-90), NIMH Mood Scale, Video Interview Behavior Evaluation scales (VIBES), and selected psychomotor tests. This is called the “Multivantaged Assessment Method”.

Descriptions of the MVAM, the rationales for the derivation of the methods, and evidence for their validity are presented in the following references:


May 22, 2014

**Donald F. Klein’s comment**

These few paragraphs by Katz on Multivantaged vs. Conventional Assessment Method (MVAM) has three references that supposedly establish its validity vs. conventional systems. The first two, dated 1984 and 2004, are not available online. The third, is Katz's book (Depression and Drugs) which is commented on in the INHN Book section. The Book expounds on MVAM, but no methodological comparative basis for MVAM vs. conventional systems is found. Unique advantages are claimed but not substantiated.

An attempt to find methodological discussions of MVAM in the literature failed.
The term "Multivantaged" has not achieved general usage or understanding.

August 18, 2016

**Martin Katz’s reply to Donald F. Klein’s comment**

The established method in clinical trials of antidepressants for describing the severity of the depressive disorder and for measuring change effected by a treatment drug, is the Hamilton Rating Scale. The “Multivantaged Assessment Method” (MVAM) was created to provide a more detailed analysis of the structure of the depressive disorder and a more complete, more sensitive profile of the changes effected by treatment agents. Although the MVAM has not been taken up by many investigators, as Klein notes, its validity has been well established and described in several publications (Katz et al, 1984, 2004, Katz 2013). As a composite of several already established methods, the overall MVAM, combines these validated methods, e.g., SCL-90 (Derogatis et al 1984), the NIMH Mood scale (Raskin et al 19 ), SADS (Endicott and Spitzer 1978) to generate the profile. When Klein comments that the MVAM’s validity has not been established, it signals that he has not grasped the concept underlying the “multivantaged” method, has not read the relevant literature. On the point that it has not been compared with an established method, a direct comparison with the Hamilton method in a clinical trial is clearly presented in the book (Katz 2013). Klein apparently, declined to read that section. In sum, I welcome Klein’s attention to the new method, but find that his comments on its validity have little foundation when viewed against the clear positive evidence from several sources, so far developed on the MVAM.

References


Endicott J, Spitzer RK. A diagnostic interview: the schedule for affective disorders and schizophrenia. Arch Gen Psychiatry 1978; 35: 837-844.


November 10, 2016

**Donald F. Klein’s response to Martin M. Katz’s reply**

Katz states: “...a direct comparison with the Hamilton method in a clinical trial is clearly presented in the book (Katz, 2013). Klein apparently, declined to read that section.”

Ordinary referencing about a specific point is not to a whole book. However, I went through the book diligently and can't find that point. Maybe I'm going blind. Giving Katz benefit of the doubt, maybe I missed it. I would like a page citation before saying it's not there. This prompted an unanswered editorial inquiry.

Perhaps Katz has declined to read my specific criticisms or more likely has read them, can’t answer directly, so must resort to generalities. With regard to the multivantaged behavioral method, Katz only cites three non-Katz works, all prior to 1979. Thirty-seven years seems sufficient to demonstrate whether other psychopharmacologists have found it useful. With regard to Katz’ assertions about neurotransmitter effects, their lack of relevant effects in normal subjects seems critical. Like other specific criticisms, it goes unremarked. Unfortunately, this has been a pattern that defeats discussion.