Introduction

Overview of the Virtual Reality and Mental Health Symposium

January 31, 1998 San Diego, California

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THE ARTICLES IN THIS ISSUE are from the Men-📘 tal Health Symposium held as part of the Medicine Meets Virtual Reality 6 conference in San Diego, California, January 28–31, 1998. The Mental Health Symposium became an integral part of the annual conference beginning in 1996. Since that time, we have seen exciting developments begin to occur: 1) most presenters now have data from studies showing that virtual reality (VR) is useful in the diagnosis, assessment, and treatment of several mental health disorders; 2) funding is being received by several researchers to further develop their ideas and technologies for mental health; and 3) as technology has become more advanced, it has also become more affordable and accessible to a larger number of practitioners.

Although still in its infancy when compared to the use of VR in medicine and surgery, the area of VR and mental health has begun to develop an identity and presence of its own. From clinical psychology to neuropsychology to work with inpatient psychiatric populations, it is now being realized that VR is more than an interesting new tool. It is also a tool which provides for more cost effective treatment of patients in many areas.

Anxiety disorders affect an estimated 23 million Americans. Three articles in this issue address the use of VR to treat patients with anxiety disorders. Wiederhold, et al. present a

report on the use of VR to treat fear of flying. Bullinger, et al. discuss VR's use in treating claustrophobia, and Huang, et al. report on a system to treat acrophobia. Four articles address cognitive and neuropsychological topics. Rizzo, et al. show how VR can be used to study and assess mental rotation skills. McComas, et al. explores the teaching of spatial learning skills to children in a VR environment. Pugnetti, et al. demonstrate a VR environment for probing executive functions and incidental memory, while Steffin illustrates how VR may be used for patients with spinal cord injury and multiple sclerosis.

The importance of patients' quality of life issues is highlighted in two articles. Ohsuga, *et al.* describe a VR system designed for use with bedridden patients and the elderly. Rogers applies VR in the creation and exploration of one's own personal myths.

The topic of eating disorders, a growing problem internationally, is presented by Riva. He investigates how VR may be used to treat patients' body image disturbances. Hoffman describes VR's use in perception, memory and cognition, and clinical psychology. Burt & IsHak give an overview of computer applications in the area of psychiatry, and Al Cooper educates us on the internet and its impact on sexuality today.

As we look forward to the 1999 Medicine

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Meets Virtual Reality 7 conference that will be held January 20–23, 1999 in San Francisco, we have already begun to receive exciting information on new disorders being treated with VR therapy. Efficacy and effectiveness of this therapy are important milestones that are now being addressed as VR continues to find new applications in the diagnosis, assessment, and

treatment of mental health disorders. Individuals interested in attending or presenting at the conference are invited to visit the conference website:http:\\www.amainc.com/MMVR/M MVR.html for further information.

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1. 1998. General Reviews of Virtual Reality and Neuropsychology. *CyberPsychology & Behavior* 1:4, 413-425. [Citation] [Full Text PDF] [Full Text PDF with Links]