

## Interview with Maria Kopp, MD PhD

*Dear Dr. Kopp, with our next ICBM coming up in Budapest, I consider this interview with you perfectly timed in order to give us all a more detailed insight into behavioral medicine and your personal work in Hungary. I am, therefore, most grateful that you agreed to respond to my questions!*

**Q1:** Could you provide us with some information about your educational and scientific background? Where do you come from scientifically and how did you get into the field of behavioral medicine?

**A1.** In 1968 I graduated with "summa cum laude" at the Semmelweis Medical University in Budapest, Hungary. Back then, I was interested in stress research and the effects of oxytocin and vasopressin on the cardiovascular system. After medical school, I was invited to organize the first Clinical Epidemiological Work Group in Hungary. This was a great challenge. I accepted it on the condition to include the psychological and sociological factors in clinical epidemiological studies. From 1970-1973 I was the head of this group of the National Inst. of Occupational Health. We organized surveys among coal miners. My late husband, Árpád Skrabski, was an informatics engineer, one of the first leaders of large computer centers in Hungary. We decided to work together. There was an official cooperation between our institutes and we spent many nights working in Árpád's computer center with the best computing possibilities at the time. This was the beginning of our common epidemiological studies. In 1973 I was appointed to be the head of the Department of Clinical Epidemiology at the

Semmelweis Medical University, and we worked hand in hand with the Institute of Psychiatry of this excellent university.

During these years I also completed my clinical psychology studies. In 1977 I received my Clinical Psychologist's Diploma at Eötvös Lóránd University, Budapest, and in 1982 my qualification in clinical psychology. In 1982 I finished my Ph.D. in Medical Sciences<sup>(1-6)</sup>.



*Prof. Maria Kopp*

We organized our first so-called Hungarostudy survey in 1983 with about 6000 people who were representative of the adult Hungarian population<sup>(7)</sup>. During my work in the Dept. of Psychiatry, Semmelweis Medical University (1982 – 1993) as head of the Psychophysiology Laboratory and organizer of the Behavioral Medicine Outpatient Clinic, I contacted the Oxford group on cognitive behavioral treatment of panic disorder (Paul Salkovskis and David Clark) and I introduced this therapy in our department, second in the world<sup>(8)</sup>. In 1993 I founded the Institute of Behavioral Sciences at the Semmelweis Medical University. In 1994 I was elected as the first president of the newly founded János Selye Hungarian Behavioral Medicine.

**Q2.** Ever since, your research has emphasized social factors, such as stress and social status, in health. Which of your results do you consider the most important for future research – but also for the public?

The paper which best summarizes the interdisciplinary model of my research might be “Where psychology meets physiology: Chronic stress and premature mortality - The Central-Eastern European health paradox”<sup>(9)</sup>. In this review, chronic stress is proposed as an integrating theory that can be applied to the suddenly changing patterns of premature mortality rates in transforming societies.

I am convinced that our results on social capital, hierarchy position, family relations, meaning in life and health would be fundamental in modern, consumer society and became more and more accepted by the public as well<sup>(10-13)</sup>.

**Q3.** Which of your activities, which piece of your career, are you most proud of?

**A3.** It’s the foundation of the Institute of Behavioral Sciences at the Semmelweis Medical University in 1993, and after that at the other three medical universities in Hungary. There are several elective courses of the Institute, for example behavioral medicine, which is very popular among medical students or gender medicine. We published a paper about this process with one of my most talented former PhD student, Bettina Piko<sup>(14)</sup>.

Until now 19 PhD students have finished their PhD studies in behavioral medicine under my supervision, and they have published excellent and innovative papers in this field in international journals<sup>(some examples: 15-18)</sup>.

**Q4.** As an international Society and an international readership of this newsletter, we are of course very interested in the specifics of Behavioral Medicine in Hungary. How has Behavioral Medicine been situated in Hungarian research and society in the past - and where do you see the future scope of our discipline in your country?

**A4.** In the twentieth century, Hungarian born scientists (Franz Alexander, János Selye) significantly contributed to the development of psychosomatic medicine, which is the basis of behavioural medicine as well. Sandor Ferenczi was a close associate of Freud, whose concepts, therefore, had a great impact on his views. He was the founder of the first Department of Psychoanalysis in the world in 1919 at our university which became the famous ‘Budapest School’.

Later on, in the early 50s, during the communist rule, for some years there was no psychology education at the Hungarian universities, because even mentioning the psyche was regarded ideologically incorrect. Therefore, after the change of the political system, the most important step in the development of medical education in Hungary was the establishment of departments of behavioural sciences. It was the natural consequence of my earlier activities that I wanted to include behavioral sciences and behavioral medicine into the curriculum of medical and other health professionals and the student leaders supported this process in a substantial way.

Other very important achievements are the development of the behavioral medicine outpatient clinic and several preventive and health promoting activities.

In the last two years we have been working intensively for a European Review of Social Determinants of Health and the Health Divide in the WHO European Region. I am the leader of the working group on Gender and health. Among the social determinants the ways of coping with changing gender roles seem to be of central importance in behavioural medicine. Thus, I initiated the so-called Demographic Roundtable on recommendations to help intergenerational cooperation and young people to combine family and professional life in a healthy way.

Recently, I have become the work package leader of Depression, Suicide, E-Mental Health project within the EU Joint Action on Mental Health and Well-being. This topic is especially important in our country, where suicide rates are among the highest and e-health is an important new possibility to reach at risk young people.

**Q5.** Your career and scientific focus have been intertwined with the political changes in your country. How would you evaluate has this influenced your ideas, your career, and your interpretation of findings?

**A5.** This is a very interesting question. Originally I wanted to study humanities. Since I completed the secondary school in the only Catholic girls' school in Budapest, it was impossible for me to apply to study humanities with such a background. Despite scoring high on the university-entrance exams, I was not accepted to the medical school for three years. Later on, in the last year of my medical studies, I got an invitation for a conference on "Personality in medicine" from France, offering me to pay all of my expenses, but my passport was withdrawn, maybe because this topic

was regarded politically unacceptable. Until 1983 I couldn't travel to Western countries. However, the Dept. of Psychiatry had a very good library, where we could read the international journals, and from the distance we could trace the most important directions of science.

I have been very much interested in mind-body interactions ever since I was a child, be-



*Mónika Tóth, Márta Varga, Maria Kopp, Ágnes Zana, Piroska Balog, András Székely, Barna Konkoly Thege (from left to right)*

cause my father, Dr. Jenő Kopp, founder and first director of the National Picture Gallery, was fired in 1949, and we had to leave Budapest to live on a farm. During these years my father got glaucoma, and later on he became blind, got depressed, and died of a myocardial infarction.

In the early 90s, the enthusiastic years after the change from the dictatorial system, we started to rebuild the civic society. The new rector at our university, Professor Miklós Réthelyi, supported our plans to change the medical curriculum in the direction of behavioral sciences. In Hungary there is much interest in the results of our national representative studies (1983, 1988, 1995, 2002, and a follow-up study in 2006) and I do hope that our results influenced the attitudes of people, at least in Hungary.

**Q6.** Which topics do you consider most relevant in our field, and where do you see our activities going in the next 10 years?

**A6.** The connections between epidemiology and epigenetics point out a most promising field and might explain the physiological and even genetic changes as results of psychological interventions. The other important field would be to understand the health consequences of the consumer society and to analyze the evidence based positive psychological and behavioral aspects of mental and physical health.

**Q7.** Based on this, is there any advice that you would give to young scientists and practitioners in our field?

**A7.** The main strength of our field is interdisciplinarity. My advice is to try to understand the human health and existence in the broadest possible sense.

**Q8.** On a more personal note, do you have personal heroes – in and perhaps outside our field? Who are or were they?

**A8.** Professor Pál Juhász was my professor at the Department of Psychiatry. He was a very open minded, excellent person, both as director and research leader.

**Q9.** And finally, for all of us who are excited about coming to Budapest for the upcoming ICBM: are there places that you like most and that you would recommend to us?

**A9.** For several years we lived in the castle district with our two children, and for me this is one of the nicest places in the world. The congress will be in the Hotel Hilton situated in the

castle district near Mathias Church, with unique view to the Danube and the Parliament. In the castle district you can also find the old royal palace which hosts the National Gallery as well with medieval historic exhibition and the excellent picture gallery. On the other side of the Danube, in the Pest side, is the Heroes' Square, another impressive place with the Museum of Fine Arts. The panorama of the two sides of the city from the bridges on the Danube always fills me with wonder and amazement. Budapest, famous for its healing hot springs since medieval times, has many health spas and baths that are worthwhile discovering during your stay here. A warm welcome to you! Hungarian hospitality is well known, and I do hope that all of you yourselves will experience it and that you will enjoy your stay.

*Thank you very much for this interview!  
Beate Ditzen, ISBM Newsletter Editor*

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