Certainty in Psychiatry, in my view a brilliant penetrating analysis of the philosophical problems which beset our discipline, is not thought worthy of criticism, but merely mentioned as one of the essays which "might put off . . . (interested young doctors) . . . for two hundred years". Having recommended the Bradshaw Lecture to many medical students and doctors, I have yet to meet one for whom this dire prophecy has come true.

It was disappointing to read this uninformative review. One hopes that on a future occasion Professor Stengel will use his very considerable intellectual gifts to provide a well-reasoned critique of Aubrey Lewis's work. I, for one, would welcome this.

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DEAR SIR,

I am a recent recruit to psychiatry, having just completed the D.P.M., and the reading of the literature that that involves.

I have read *Inquiries in Psychiatry* and *The State of Psychiatry* by Sir Aubrey Lewis, and find myself in profound disagreement with Professor Stengel's views of their likely effect on newcomers to psychiatry.

When mentioning the polish and restraint of Sir Aubrey's style, Professor Stengel made no mention of its lucidity, and it was this in particular I found encouraging. Such lucidity is comparatively rare in my experience of the psychiatric literature. Nor is it common to find papers critical of their own import, and there is little danger of any newcomer to psychiatry underestimating its achievements as a result of his reading.

To at least one recent recruit, Sir Aubrey's writings introduced a refreshing note of realism.

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KRAEPELIN'S NOSOLOGY

DEAR SIR,

I have no desire to bore your readers with Kraepelinian exegesis, but I feel obliged to reply to Dr. Hoenig's letter (*Journal*, January, 1968). The fact is that Kraepelin used the criterion of incurability to establish his concept of dementia praecox and later realized that some patients with this illness could recover. In the fifth edition of his textbook in 1896 (2) he isolated a group of illnesses which he called *Verblödungsprocesse* which can be translated as processes of mental deterioration. He wrote as follows:

> "The common feature of these clinical pictures, which we prefer to group together as processes of mental deterioration, is the rapid development of a peculiar kind of psychological enfeeblement. . . . In so far as these forms of illness can be seen at the present time I believe that I am entitled in the first instance to distinguish between three main groups of processes of mental deterioration; dementia praecox, catatonia and dementia paranoides."

In the sixth edition of his textbook in 1899 (1) the chapter on "Processes of Mental Deterioration" was replaced by a chapter on "Dementia Praecox".

Whatever Kraepelin may have said in the eighth edition of his textbook (3), there is little doubt, if one follows the development of his ideas, that he originally held that dementia praecox always led to a permanent personality defect.

Incidentally, Dr. Hoenig's reference to the eighth edition of Kraepelin's textbook is inaccurate. The passages he cites are from the third volume, not the second volume.

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