

## Correspondence

*Letters for publication in the Correspondence columns should be addressed to:*

The Editor 'British Journal of Psychiatry', Chandos House, 2 Queen Anne Street, London, W1M 9LE.

### THE PSYCHO-ANALYTIC MOVEMENT IN BRITAIN: A POSTHUMOUS ENDORSEMENT

DEAR SIR,

In January, 1971 (118, 61-8) you published an article of mine, 'A Contribution to the History of the Psycho-Analytic Movement in Britain'. It was rather disappointing that, in spite of a special appeal from the Editors, no one else familiar with these happenings made any comment on the historical background or described their own recollection of events. In these circumstances, I believe a personal letter written to me by my friend, the late Dr. Edward Glover, will be of interest. He wrote it shortly after the article had appeared (16.1.71), and asked me to publish it after his death:

'Dear Melitta,

An officious friend sent me a copy of your article in the *British Journal of Psychiatry*, regretting its publication and obviously hinting that I "should do something about it". To which I replied as follows:

"Dr. Schmideberg's article, in my view, contains more cold-stone truth than any article I have read in the past fifty years. (*Mutatis mutandis* on a few points that don't affect the major historical issue). I have not the slightest intention of acting as a stooge for the British Psycho-Analytical Society or the International Psycho-Analytic Association. If they have anything to say *per contra*, let them get on their own square feet and do so. Her exposé is very temperate, I think (We mellow, don't we?). But don't expect me to lick the boots of those who have played the shameful rôle of timid entrepreneurs."

Don't publish this gloss until I have departed this life. And Good Luck, you have more stingo than I ever pretended to have

Teddy'

In the meantime, there has been another comment from the well known U.S.A. analyst and psychiatrist, Dr. Karl Menninger, in the *Bulletin of the Menninger Clinic* for May 1972:

'An article appeared in the *British Journal of Psychiatry* for January 1971 which has been conspicuously ignored, as far as I know, in all

quarters. A long-time psychoanalyst, the daughter of one of the most famous analysts, announced her repudiation of psychoanalysis and her official separation from it since 1963. Melitta Schmideberg, daughter of Melanie Klein, first reviews her early contacts at age of 15 with psychiatry, her harming analysis, her Institute training, and her subsequent contact with many British, American and European analysts.

'I think this material will be of the utmost interest when the definitive history of the psychoanalytic movement is written. She is quite right in saying that "Today in the United States it requires courage to be critical of psychoanalysis, then it took courage to believe in it". Most astonishing is the frank description by Mrs. Schmideberg of her theoretical differences with her mother and the political consequences of this.'

MELITTA SCHMIDEBERG.

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### THE IMPACT OF THE ABORTION ACT

DEAR SIR,

While welcoming the paper by Priest (*Brit. J. Psychiat.*, September 1972, 121, 293-7) on the Abortion Act, I would hesitate to agree with his 'average psychiatrist' who, he says, will find abortion a treatment for depression that compares favourably with anti-depressants and ECT over the short-term period. Such a deduction is not supported by a small series which I studied at the Chelsea Hospital for Women in 1969-70, and which in view of the paucity of relevant information should be of some interest.

Women admitted for termination, in those cases where this procedure was recommended by a psychiatrist, were given appointments to see me at approximately six weeks after their operation. Of the first 23 patients 18 kept their appointments, and their affective state was assessed. The results were as follows:

Markedly depressed	.. ..	4
Mild though definite depression	.. ..	4
Mild hypomania	.. ..	1

Psychiatrically well, having been depressed when originally seen . . .	8
Psychiatrically well before and after, although at risk . . . . .	1

In 9 of these patients, therefore, affective disturbance was still present. It does not follow from these findings, of course, that the terminations were not justified; on the contrary, the initial careful psychiatric interviews had revealed that they were. What is indicated, in a significantly large proportion of cases, is that the operation, while resolving a traumatic predicament, is as likely as not to leave the woman still unwell after six weeks.

In eliciting the patient's views and feelings, care was taken to confirm her in the decision which she and her doctors had made to terminate the pregnancy; her opinion was invited, however, on that decision as she viewed the *fait accompli* in retrospect. Three of the nine unwell women and two of the nine well women expressed unequivocal moral misgivings. This suggests that doctors are not wasting their time when they sound out the moral attitudes of candidates for abortion, for a timely ventilation of scruples may help to avoid self-reproach in later life. Unfortunately, many women improvise their philosophy of abortion only when already in a state of confusion and distress.

PETER D. L. JOHN.

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#### SUICIDE IN BRIGHTON

DEAR SIR,

Drs. Jacobson and Jacobson state that the drop in suicide in Brighton could not be due to the Samaritans as there was no organization operating in that area during 1964-68 (*Journal*, October 1972, 121, p. 376). This is not quite true.

There was a Brighton branch with a Centre at St. Peter's Church, which disbanded during 1965. In the same year a service opened up in Eastbourne, 22 miles and one local telephone call away. The number of the Eastbourne branch was published in the Brighton Telephone Directory from that year, and Brighton clients built up steadily from only 2 in 1965 to 61 in 1968, after which an independent service developed in Hove. Befriending by Brighton volunteers of clients who rang Eastbourne was available throughout this period.

Furthermore, through the period of suicide decline in Brighton the original City of London branch of the Samaritans became increasingly well known nationally as a result of mass media publicity, and it has, since its earliest days, received calls from all

over the country, including Brighton to which the links by road and rail have always been strong.

The possibility cannot be ruled out, finally, that a national organization radiating an 'ethos' of suicide prevention may have an effect in a town which does not actually have a branch of its own.

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#### SEXUAL ASPHYXIA

DEAR SIR,

In his paper (*Journal*, October 1972, 121, 437-8) John Edmondson stresses the feelings of sexual guilt which result in such vicious attacks upon the self. Symptoms, however, usually and perhaps always contain a positive element which it is important not to overlook. In this case it is I think the healthy, albeit distorted, attempt of this boy to achieve the oblivion of an abandoned orgasmic experience.

PETER LOMAS.

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#### LACTATE-INDUCED ANXIETY: HYPOTHESIS AND EXPERIMENTAL MODEL

DEAR SIR,

In his letter (*Journal*, September 1972, 121, 338), Friedhoff writes: 'Grosz and Farmer (*Journal*, April 1972, 120, 415-8) have reported the results of an interesting study showing that anxiety symptoms can be precipitated by the production of metabolic alkalosis. Unfortunately, they present their results as a refutation of the previous conclusions of Pitts and McClure (*New Eng. J. Med.*, 1967, 27, 1329-36) that an anxiety state can be produced by elevating blood lactate concentrations . . . . These newer findings should be viewed simply as an extension and refinement of the hypothesis of Pitts and McClure.'

The reason for presenting our findings as a refutation of Pitts and McClure's conclusions is first, that the kind of study we did should have been carried out by Pitts and McClure as a necessary control experiment, and, secondly, that we do not believe that the results of our study impart any substantially new knowledge to the understanding of mechanisms underlying anxiety symptoms in general, or of anxiety neurosis in particular. In certain susceptible, anxiety-prone people almost any major electrolyte disturbance, or disturbance of acid-base balance of body fluids, whether respiratory or metabolic, seems