

Working with the Advisory Service provides a unique opportunity to those concerned to develop their own skills and to learn from others, to learn from the very stimulating multidisciplinary situation in which they find themselves, and to contribute both to local and national policy making. For the first time the Department of Health, Regional Boards and Management Committees have all had the same picture presented of hospital functioning and have had to consider the solution to the same problem areas in Group after Group. Even those hospitals which have found visits by the Advisory Service somewhat traumatic would agree that positive benefit also follows from the concentration of interest and the additional resources which they obtain. At a national level these considerable additional resources, greater than in any previous decade, have been directed towards psychiatric and geriatric services. Similarly, at Board and Management Committee level, additional resources—both physical and manpower—are directed to the same end. From the point of view of the hospital visited, however, many staff consider that the opportunity to discuss their service, its policies, and the alternatives practised elsewhere, has

been the most valuable and stimulating part of the exercise.

The written report is a confidential one from the Director to the Secretary of State, and copies are sent to the Department of Health and to the Regional Board and hospitals concerned. The follow-up on the report is the responsibility of the Department of Health. Committees and Boards are now expected to take action on items of advice which are in their sphere of responsibility and for which they have resources, and the Department monitors action on many—though not all—items. The total volume of work is very considerable when it is realized that, excluding re-visits, over 750 hospitals and units with some 170,000 beds have been visited, representing about 40 per cent of the total beds in the Health Service.

The future of the Advisory Service is dependent on a number of factors, but among these must be included the benefits to patient care which follow, and the willingness of hospital staffs to join in this method of self-assessment. As has been suggested in other fields, the hospital service is likely to get the advisory service it deserves.

## CORRESPONDENCE

### SUPERINTENDENTS AND CLINICAL PSYCHIATRISTS

DEAR SIR,

There was one word in Dr. Freeman's article (April, p. 9) that intrigued me. This was 'anti-therapeutic' applied to the 'situation' (namely the continued existence of medical superintendents in mental hospitals). I am sure that Dr. Freeman is not in the habit of using pejorative epithets irresponsibly; and I take it that he is not referring to events of thirty or more years ago when a few superintendents were over-cautious about the use of the new physical treatments. (Insulin therapy was forbidden to us at Cane Hill by order of the lay Chief Officer of the L.C.C., a ban which I ignored at the earliest opportunity with the hearty support of my medical superintendent. And, of course, at the present time there are consultants who deny their patients the benefit of treatments approved of by the majority of their colleagues.) So I conclude that some serious research

has been carried out showing that therapeutic results at hospitals that have retained medical superintendents, such as Moorhaven or St. Luke's, Middlesbrough, have been inferior to those obtained elsewhere. Could Dr. Freeman give us the reference to this work?

I was amused by Dr. Howells' enthusiastic mention (May, p. 6) of the late Dr. Somerville Hastings. He was notoriously a strident advocate of bureaucratic control in medicine, and his name was for long anathema to those of the profession who were most concerned about clinical freedom.

And about this word 'clinical'. Everyone must have noticed that in recent years it has come to mean, both in journalism and in literature, something like: cold, impersonal, over-objective, unfeeling, heartless. Since these are the very opposite of the qualities that we claim to possess, why should any of us want to call himself a 'clinical' psychiatrist?

ALEXANDER WALK.

## FORTHCOMING EVENTS

### *International Congress of the World Federation for Mental Health*

The theme of the Congress is to be 'Cultures in Collision', 8–12 October 1973, Sydney, Australia.

Further information and application forms: Congress Office, 9 Langley Street, East Sydney, N.S.W., Australia 2010.

*World Psychiatric Association*

A Symposium on Psychopharmacology will be held at Wroclaw, Poland, from 5–6 October 1973. Information: Prof. Adam Bukowczyk, Wroclaw, Poland, Kraszewskiego 25.

*International Behaviour Modification Workshop*

This year's workshop will be held at University College, Bangor, North Wales, from 5–9 August 1973. Further information and enrolment forms: International Workshop on Behaviour Modification, Department of Extramural Studies, University College of North Wales, Bangor, Caernarvonshire.

*Fifth Summer School on Alcoholism*

1–7 September 1973, Brighton College of Education, Falmer, Sussex. Information: The Summer School on Alcoholism, The Maudsley Hospital, Denmark Hill, London, SE5 8AZ.

*Eighth Conference of the Association for the Psychiatric Study of Adolescents*

The theme of the Conference, which will take place from 6–8 July 1973, will be 'The Challenge of Adolescence in Contemporary Psychiatry'. Pro-

gramme and Application Forms: Mr. G. H. James, A.P.S.A. Conference Organizer, Dudley Road Hospital, Birmingham, B18 7QH.

*Centre for Post-graduate Psychiatry, Birmingham*

The following open meetings will be held at the Charles Burns Clinic, Queensbridge Road, Moseley, Birmingham 13, at 4 p.m.

13 July: 'Depression in childhood', Dr. J. E. Varley.

28 September: 'Battered baby syndrome', Dr. Selwyn Smith.

19 October: 'Psychiatric disorders in early adolescence—a follow-up study', Dr. Philip Graham.

*University of Oxford and Oxford Regional Committee for Post-graduate Medical Education and Training*

A course in Neuroanatomy and Neurophysiology in preparation for the M.R.C.P., M.R.C.Psych., and D.P.M. examinations will be held in the University Department of Human Anatomy from 9–19 September 1973. Enquiries to the Director of Post-graduate Medical Education and Training, Old Radcliffe Observatory, The Medical School, 43 Woodstock Road, Oxford.