

hospitalization and availability of alternative community care and support systems. Six months later, i.e. on the anniversary of their admission, these patients were traced and interviewed, the emphasis this time being on their clinical state and the factors affecting their final outcome. Patients who attained long-stay status numbered 101, representing 5 per cent of the admission cohort and 62 per cent of those who remained in hospital continuously for six months.

The findings concerning determinants of retention for six months reaffirmed the findings of previous studies. Thus, being female, elderly, widowed or single, out of active employment and receiving a diagnosis of organic illness were associated with more likelihood of retention for six months. Further retention for another six months, however, was independent of both sex and diagnosis, and the effect of marital status was reversed, single patients being significantly less likely to be retained than those ever married. The effect of age and employment status, on the other hand, was maintained in the same direction. Interestingly, the patients' clinical state at six months failed to discriminate between those who became long-stay and those who were discharged. Of all the behavioural and symptom severity measures used, only socially embarrassing

behaviour scores were found to be significantly related to outcome. Participation in ward activities, contact with the outside world, visits by relatives and involvement of the social worker and the clinical psychologist were all associated with discharge. Occupational and industrial therapy were not related to outcome. Doctors' ratings of employability, availability of accommodation and type of care required were among the best predictors of 'long-stay', as was the consultant's prediction of final outcome.

With regard to clinical state and social and occupational functioning at 12 months, only a few variables differentiated long-stay from discharged patients, suggesting that the latter, after six continuous months in hospital, fared no better than those who became long-stay.

The findings appear to suggest that attaining long-stay status may be determined during the first six months and that any effort to prevent institutionalism should be made during these crucial early months in hospital. There is evidence that rehabilitative effort is most effective when directed towards increased activities on the wards, social work involvement and increasing the level of contact with the outside world. There is no evidence that work-oriented occupational and industrial therapy improves the chances of discharge.

CHILTERN & THAMES VALLEY DIVISION

The College has published a paper on 'The Responsibility of Consultants in Psychiatry within the NHS' (*The Bulletin*, September 1977). It is felt that this is a vital issue that should be discussed at a local level. In order to facilitate this, the next Divisional Meeting will take place at Northwick Park Hospital on *Thursday 16 February 1978* and the speakers will include *Dr A. A. Baker*, Consultant Psychiatrist (latterly Director of the National Health Service's Hospital Advisory Service), *Dr G. B. Simon*, Director of Lea Castle Hospital, and *Mr Charles Butcher* from Messrs Hempsons, Solicitors to the Medical Defence Union.

It is hoped that as many Members as possible will be able to attend this meeting in view of the importance of the subject, hence this early notice. Full details will be circulated at a later date.

DIANA M. DICKENS,
Hon. Secretary

PSYCHOTHERAPY SECTION

The following are further details of the next three of the Open Meetings of the Psychotherapy Section announced in the October issue:

Monday, 14 November, in conjunction with the Quarterly Meeting in York

Dr Tom Main: 'Psychiatric defences against close encounters with patients', University of York, at 4.30 pm.

Wednesday, 14 December

Dr Isaac Marks: 'Coping and self regulatory forms of treatment', Botany Lecture Theatre, University College, Gower Street, London WC1, at 8.15 pm.

Wednesday, 11 January 1978

Dr John Steiner: 'Borderline States', Botany Lecture Theatre, University College, Gower Street, London WC1, at 8.15 pm.