Report of Meeting of Sub-Sections

The Forensic Psychiatry Sub-Section met in the forenoon and had a stimulating, dramatic and humorous address by Dr. T. D. Inch on the Problem of the Criminal Psychopath.

The Papers and Discussions Sub-Section also met and discussed their future programme and it was suggested that the question of tranquillizing drugs should be discussed at an early meeting, possibly at the next.

It was suggested that the next meeting of the Division be held on Friday, 21 June, at Stratheden Mental Hospital, Cupar, Fife, by kind invitation of Dr. David Ross and his Board of Management.

Professor T. Ferguson Rodger gave an interesting account of some of his experiences during a recent American visit. It was a stimulating and interesting talk and it was warmly appreciated by all those present.

All those attending the meeting at Woodilee will wish to record their appreciation of the hospitality and excellent arrangement made by Dr. W. A. Cramond, his Staff and Board of Management, for the Spring Meeting of the Scottish Division.

IRISH DIVISION

THE SPRING QUARTERLY MEETING of the Irish Division was held at Mullingar Mental Hospital, by kind invitation of Dr. John FitzGerald, on Tuesday, 23 April, 1957.

Twenty-eight Members and 7 visitors were present.

The Members were entertained most hospitably to lunch by Dr. John FitzGerald.

The Minutes of the previous Meeting were read, approved and signed.

The Summer Meeting was fixed for Thursday, 25 July, 1957, at the Royal College of Physicians, Kildare Street, Dublin.

The following were unanimously elected Ordinary Members of the Association:

O'KELLY, DENIS JOSEPH LANE, L.R.C.P. & S.I., L.M., Medical Superintendent, St. Patrick's Hospital, Waterford.
Proposed by Drs. J. P. Hill, Mary Sullivan and P. J. Cassin.

WALSH, KEVIN FRANCIS, M.B., B.Ch., B.A.O., D.P.M., Assistant Medical Officer, Mental Hospital, Mullingar.
Proposed by Drs. J. FitzGerald, J. N. P. Moore and Mary Sullivan.

A letter and Memorandum from An Bord Altranais was read and discussed by Dr. Dolphin and Dr. Foley. It was proposed by Dr. Moore and seconded by Dr. O'Higgins that a Sub-Committee be formed to study the correspondence and send back recommendations.

The following Sub-Committee was formed: Dr. FitzGerald, Dr. Glass, Dr. Moore, Dr. Mulligan and Dr. M. Sullivan, to report back at the July Meeting.

Dr. Murphy's question on farms was discussed by Drs. Moran, Glass, Cassin and Foley. Dr. Moran thought that patients should live the life of the people around them, but that the farms should not be run on patient labour alone. Drs. Glass and Cassin agreed.

Dr. McLaughlin said that farm bailiffs should be employed. Dr. Dolphin thought that Board members tended to be more interested in farm than in patients. Dr. FitzGerald said that the farm should be ancillary to the hospital.

Dr. N. B. O'Higgins read a Paper entitled **"Musings—Pertinent and Impertinent".**

He began by pointing out the great improvements which had been brought about in public mental hospitals during the last twenty years by the State and by Local Authorities, both in administration and legislation. About £4,000,000 had been disbursed by local and central authorities towards new buildings and improvements.

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He also referred to the Mental Treatment Act, 1945, which although derided because of trivial defects, was a social revolution; further amendments to the Act were now in preparation.

He mentioned the great improvements in the training of the nursing staff and thought it was a mistake to introduce general trained nurses into public mental hospitals just when efforts to train nursing staffs in mental hospitals were beginning to be rewarded. He spoke of the medical superintendent's duty to concern himself with staff training and thought that the senior staff were too much inclined to concentrate on purely professional duties.

The problem of aged persons was causing some concern but he did not consider that separate institutions were advisable, but suggested that the burden could be eased and partly solved if Old Age Pensions were at least doubled and that at least one-third be paid by the Local Authorities, to and through the central authorities, the State. Such a pension though costly would be far less costly to the local or to the central authorities than the establishment and running of further Homes, Geriatric Units or Almshouses.

A discussion was opened by Dr. J. FitzGerald and Drs. McLaughlin, Glass, Dolphin, Foley, Moran and Cassin spoke. Dr. O'Higgins replied.

Dr. K. F. Walsh then read a Paper entitled **"Observations on the Use of Pacatal in Mental Hospitals".**

In all 38 patients were treated, of a wide variety of types, but all were exhibiting agitation and tenseness from a mild restlessness to active destructiveness and impulsive behaviour. Their ages varied from 20 to 76. Almost all had had some previous physical treatment and 9 had had courses of chlorpromazine. Dosage varied from 75 mg. daily to 400 mg., and the treatment was given between January, 1957 and April, 1957. Duration of treatment varied from 6 days to 102 days, the average being 64 days. The total amount of Pacatal injected varied from 0·975 grammes to 26·475 grammes in a single course. The following results were shown: 53·3 per cent. of acute cases showed improvement; 39·1 per cent. of chronic cases showed improvement; of these 31·6 per cent. were male patients and 57·9 per cent. were females, showing that Pacatal produces better results in the female patient.

37·4 per cent. of the series showed some side effects, such as dryness of tongue (4), difficulty of vision (3), weakness (4), constipation (1), syncope (1), and tachycardia (1).

A number of these patients received chlorpromazine hydrochloride before, during or after their course of Pacatal therapy. Of 7 patients who had failed to react to chlorpromazine hydrochloride before receiving Pacatal, 1 improved on the latter drug. Another patient who had responded well with chlorpromazine therapy showed a deterioration in his condition when changed to Pacatal and again improved when the former was resumed.

In conclusion Dr. Walsh said that chlorpromazine hydrochloride in his opinion produces better results than Pacatal, but of course carries its own particular dangers.

He considered that perhaps Pacatal might best be used in the following circumstances:

1. Where liver damage is suspected.
2. Where chlorpromazine side-effects appear.
3. Where chlorpromazine therapy has failed.
4. In "manic" cases of simple symptomatology and of recent origin.
5. In combination with chlorpromazine therapy, and it may be that its greatest success will be found in this field.

A discussion was opened by Dr. J. FitzGerald, and Drs. Meehan, McCarthy, Moore, Ryan, Hill, McGrath and Shea, spoke.

Dr. K. F. Walsh replied, and the meeting then adjourned.

The members were entertained to tea by Mrs. FitzGerald.

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