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Synopses of Papers Awaiting Publication

Codification and Automation of Psychiatric Data: the CAPRICE System. By M. VALENTINE.

In the United States of America many centres are now running complex automated data processing systems in the psychiatric field; in Britain, such developments have been much more restricted.

Some problems can be met by combining a handwritten narrative type of record of the diagnostic interview, together with a codified section which is located at the right-hand side of each page. It is put together as a folder in A4 paper size and is kept in the patient's file as the doctor's record of the initial psychiatric examination; the folders are taken out for computer batch-processing at whatever intervals are convenient.

Since the interview record holds observations on the patient's clinical state, these can be abstracted to give scores on scales of depression, anxiety or other clinical entities. These scores (the scales are not yet standardized) can either be obtained by scanning through the record, or evaluated automatically while they are being batch-processed. A programme is available for the extraction of data on a number of clinical, personal, family and social factors which may be relevant to illness, and the effects of treatment can also be evaluated.

The system is adaptable and lends itself to extensions; some of these are in use (e.g. comparison with the results of the computerized version of the Minnesota Multiphasic Personality Inventory) and others are projected (e.g. the incorporation of a social function scale). As this is a Codified Automated Psychiatric Record Indicating Clinical Evaluation, it is given the acronym CAPRICE.

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Antenatal Identification of Women Liable to Have Problems in Managing Their Infants. By EVA A. FROMMER and GILLIAN O'SHEA.

A group of British-born married primigravidae who had been separated temporarily or permanently from one or both parents before the age of 11 were matched for age and social class by a group of controls who denied such separations.

Interviews were carried out at three-monthly intervals during the first year of the baby's life, and the mother's mental and physical health, marital problems and management of the baby were explored.

Statistically significant differences were found between the two groups in many respects. Some of the findings are reported in detail.

It is suggested that a question about the mother's childhood should be incorporated in ante-natal case schedules. This should help to pinpoint women who need special support from their family doctor and health visitor.

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The Importance of Childhood Experience in Relation to Problems of Marriage and Family-Building. By EVA A. FROMMER and GILLIAN O'SHEA.

An investigation into the childhood experiences of two groups of mothers is described. One group (probands) had previously acknowledged separations from parents, the other (controls) had denied them. However, it was found that many of the control group had also experienced childhood separations from their parents.

There were significantly more marital and infant problems among the 'separated' women than among those not separated.

Implications for mental health and further research are briefly discussed.

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Longitudinal Studies of Diurnal Variations in Depression: A Sample of 643 Patient Days. By F. STALLONE, G. J. HUBA, W. G. LAWLOR, and R. R. FIEVE.

The diurnal patterns of depressive symptoms were studied longitudinally in ten depressed patients in hospital for a total of 643 days. The findings show that diurnal fluctuations are not stable but change from day to day. In most cases the changes are random. The predominant kind of diurnal pattern—whether

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