CORRESPONDENCE

THE PRESIDENT'S LETTER

DEAR SIR,

Sir Martin Roth's recent circular letter informs us that psychiatry in the United Kingdom not only fails to thrive but is in danger of languishing for lack of interest on the part of newly graduated doctors. This news comes as no surprise to those who have witnessed, over the past two decades, the rapid erosion of the clinical tradition which has its base in the work of Bleuler, Freud and Meyer. It is this tradition which gives meaning to clinical experience and in so doing excites and stimulates interest in psychiatry. A fad for natural science methodology, an uncritical advocacy of biochemical theories of mental illness and a magical belief in the curative powers of chemotherapy were offered and accepted as a substitute. It is hardly surprising if today medical students and recently qualified graduates are taken aback when they are told that this constitutes the fundamentals of psychiatry. Their disenchantment grows as they discover how unpredictable and limited are the effects of the physical treatments and how little importance is afforded to the patient as a person.

The disillusionment with psychiatry which is so widespread in medical circles is the final expression of the lack of balance which has characterized British psychiatry over the last 50 years. Psychoanalysis was rejected and then allowed to split off from the main stream. This has led to the most serious consequences for the development of psychiatry. These consequences have not been confined to the lack of trained psychotherapists, important as this is, or to the sterility which is imposed on clinical data deprived of psychoanalytic concepts and explanation. Of greater importance is the fact that, denied the contribution made by the psychoanalytic discipline of conscientious clinical observation, the body of the doctor-patient relationship has been gradually exsanguinated. Today its value is called into question by sociologists, social workers and psychologists. No wonder Sir Martin fears that the clinical psychiatrist is losing confidence in himself and is in retreat.

The opportunities which opened up for British psychiatry between 1945 and 1955 have unfortunately been lost. Who can say whether the present tendencies can be halted and reversed? A radical rethinking is certainly essential if psychiatry is to prove as attractive to British medical students as it appears to be to those of many other countries.

THOMAS FREEMAN.

Holywell Hospital,
Antrim,
Northern Ireland.

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