Psychiatrists has highlighted grave difficulties and lack of resources in the psychiatric service. There is also a problem of attitude. In recent years the profession has become too complacent about the degree of public 'dangerousness' presented by some categories of patient – particularly patients with behavioural disturbances and severe psychosis who so often default after discharge and cease to receive appropriate care, control or treatment. This complacency has contributed to what yet another enquiry into psychiatric homicide (Mishcon *et al*, 1995) has dubbed "a scaling down of the perceived level of risk".

Noble, P. & Rodger, A. (1989) Violence by psychiatric in-patients. *British Journal of Psychiatry*, **155**, 384–390.

Mishcon, J., Dick, D., Welsh, N., et al (1995) *The Grey Report. Report of the Independent Inquiry Team into the Care and Treatment of Kenneth Gray.* London: East London and The City Health Authority.

Wessely, S. (1997) The epidemiology of crime, violence and schizophrenia. *British Journal of Psychiatry*, **170** (suppl. 32), 8–11.

P. Noble 20 The Priors, East Heath Road, Hampstead, London NW3 1BS

Anorexia and the overvalued idea

Sir: Given the media interest in compulsory treatment of patients with anorexia nervosa and the confusion expressed about the competence of such patients, I was very interested in the paper by Jones & Watson (1997). However, I was very disappointed to find that the criteria for defining anorexia nervosa were not made explicit. The criterion that was given (being "at least 10% below their ideal weight") does not fulfil the criteria of either of the two main systems of diagnostic classification (ICD–10 and DSM–IV). This suggests that the patients studied by Jones & Watson either did not have anorexia nervosa as usually defined, or had been successfully treated. The conclusions we can draw from this work must, therefore, be guarded.

Jones, E. & Watson, J. P. (1997) Delusion, the overvalued idea and religious beliefs: a comparative analysis of their characteristics. *British Journal of Psychiatry*, **170**, 381–386.

J. Treasure Maudsley Hospital, Denmark Hill, London SE5 8AZ

One hundred years ago

Royal Lunatic Asylum, Montrose

In his report Dr. Howden complains that many of the patients were admitted in a dying condition, and expresses the hope that the new Form of Certificate of Emergency issued by the General Board of Lunacy (Scotland), in which a medical man is required to certify that the patient is in a sufficiently good state of health to be removed to the asylum, will prove a check to the practice of sending patients in a dying condition. With regard to the allegation sometimes put forward that asylum attendants are liable to become insane, Dr. Howden's experience leads him to believe that this is an entirely erroneous impression. He has met with cases, however, outside asylums where the association of the sane with the insane seems to have had a prejudicial effect on the former. He gives several instances where this has occurred. The death-rate amongst the male patients was higher than usual, but was due to the causes already stated. The wards are somewhat overcrowded, but the resulting evils are diminished as far as possible by careful attention to ventilation and sanitation, and by giving the patients abundant exercise in the open air. Since the publication of this report Dr. Howden has retired from the active management of the asylum. He has had a long, useful and distinguished career, and during his tenure of office the Montrose Asylum has occupied a leading position amongst the institutions for the care and treatment of the insane in Scotland.

REFERENCE

Lancet, 3 July 1897, 29.

Researched by Henry Rollin, Emeritus Consultant Psychiatrist, Horton Hospital, Epsom, Surrey

Corrigendum

Cheng, A. T. A., Mann, A. H. & Chan, K. A., *BJP*, 170, 441–446. The final line of 'Limitations' (p. 445) was omitted. The third limitation should read, 'Owing to the limited sample size, the relationships between suicide and categories of personality disorder other than EUPD have not been thoroughly examined'.

https://doi.org/10.1192/S0007125000259679 Published online by Cambridge University Press