(*c*) *Research and Clinical*

Owing to the illness of the Secretary, who is Chairman of the Research and Clinical Section, and the absence of the Vice-Chairman, Dr. Shenkin, the election of Office-Bearers had unfortunately to be postponed.

Dr. Elizabeth Robertson presented at the Meeting a very interesting Demonstration on cases of Organic Diseases of the Central Nervous System.

(*d*) *The Mental Deficiency and Child Psychiatry Sub-Committees* did not meet on this occasion.

Members who were present at this Meeting will wish to record their grateful appreciation of the kind hospitality and excellent co-operation received from the Board of Management, and the Physician Superintendent of the Royal Hospital, Edinburgh.

IRISH DIVISION

THE AUTUMN QUARTERLY AND CLINICAL MEETING of the Irish Division was held at the Royal College of Physicians, Kildare Street, Dublin, by kind permission of the President and Fellows, on Wednesday, 16 November, 1955.

The Chairman, Dr. Eustace, kindly invited the Division to hold the Spring Meeting at Hampstead, Glasnevin, the date to be arranged with the Secretary nearer the time.

Dr. Dolphin spoke of a visit to Ireland by Dr. Jellinek of the World Health Organization. He wished to have a survey of the alcohol drinking habits of this country carried out and asked for the co-operation of psychiatrists in doing so. A questionnaire will be sent to the Mental Hospital Superintendents and Dr. Dolphin asked for their co-operation in carrying out the instructions accompanying the questionnaire.

The Meeting then proceeded to the Clinical Session and Dr. John Stack read a paper entitled **"Current Trends in Child Psychiatry"**. The speaker first gave a brief history of the development and growth of the Child Psychiatry system, since the founding of the first Child Guidance Clinic in the United States in 1896. The method of making referrals to an Out-Patient Clinic was next dealt with, and other methods of treatment such as In-Patient treatment, treatment in a Residential Centre or in the Nursery School setting, were discussed.

The speaker next dealt with the classification of emotional illnesses in childhood. the aetiology of habit disorders and of childhood psychosis. Many so-called mentally defective children were, in reality, suffering from juvenile schizophrenia. Two types of schizophrenia, namely, the Autistic and the Symbiotic, were discussed. The importance of the early childhood experiences, especially during the first three years of life was emphasized; insecurity during this time might set up a vicious circle of symptoms when each further stage of the psycho-sexual development of the child becomes more difficult to come through unscathed. The speaker concluded his talk by outlining the various treatment techniques in Child Psychiatry.

Mr. John McKenna, Ph.D., read a paper on **"Current Trends in Child Psychology"** Present-day frames of reference and their genesis in philosophic thinking were briefly touched upon, and the speaker went on to cover some developments in clinical psychology, which was defined as a form of applied psychology investigating the behaviour characteristics of an individual by methods of measurement, analysis, and observation, and which on a basis of an integration of these facts secured from the physical examination and social histories suggested means of adjusting the individual.

Initially intelligence was thought to be an unvarying personality trait; now it was regarded more as a fluctuating function, an interaction of many forces and structural conditions. Illustrations were given of how both intelligence tests and projective techniques could be used as tools of diagnosis. Some basic causes of diminished capacity to function and their diagnosis in the growing child were then

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covered; among these causes were (1) Organic defects, (2) Improper conditioning, (3) Disturbances of Object Relations, (4) Emotional reactions.

The papers produced an interesting discussion in which the following Members took part: Drs. Dunne, Dolphin, Glass, Cassin, Moran, Ramsay, McGrath and Eustace. Dr. Stack and Mr. McKenna replied.

CONCERNING THE INTERNATIONAL CONFERENCE ON THE USE OF CHLORPROMAZINE AND NEUROPLEGIC DRUGS IN PSYCHIATRIC THERAPY

On the suggestion of Prof. Jean Delay, an international meeting of 400 psychiatrists from 21 nations was held recently in Paris, the purpose of which was to study and discuss the therapeutic action of so-called neuroleptic medications in psychiatric therapy.

It is, however, beyond the scope of this article to give even a brief summary of the 150 reports read during the three days that the conference lasted.

Furthermore only the main aspects of the subject were discussed, the aim being to give a broad outline of the present use of neuroplegic drugs in psychiatry.

The introductory session was devoted to a general study of their possible pharmacological application in the treatment of mental disease, a number of eminent psychiatrists taking part in the discussion.

Profs. Delay (president), W. Mayer Gross (Great Britain), W. Overholser (U.S.A.), F. J. Reuse (Belgium), Barahona-Fernandez (Portugal), M. Bleuler (Switzerland), H. C. Rumke (Holland), H. Delgado (Peru), H. Hoff (Austria), stressed the progress in chemotherapy and its almost unlimited potential value in mental pathology. Most speakers, however, insisted that these remarkable developments did not obviate the necessity for careful assessment of each individual patient: clinical examination, diagnosis, psychotherapy and social readaptation remain essential.

Methods of administration, dosages and duration of therapy, combined therapy

At this meeting, the use of chlorpromazine and its possible modes of administration were discussed. Several authors contributed to this discussion: H. Ey uses all of them, Mlle Deschamps recommended drug cocktails without refrigeration ; Schneider (Lausanne) stressed the value of prolonged therapy whereas Sigwald applied ambulatory treatment.

The report of H. C. Denber (New York) also deserves mention, the author described the treatment of several cases of schizophrenia and psychoneuroses by means of mescaline and chlorpromazine combined, the latter to counteract and prevent the effects of the former.

Achaintre suggested the alternate administration of shock therapy and chlorpromazine in the management of chronic psychiatric disorders.

Other authors commented on the value of chlorpromazine and ergotherapy combined (Sivadon), or chlorpromazine and psychotherapy (Held).

The use of chlorpromazine in sleep treatment was also discussed, several speakers drew attention to the failure and danger of such a procedure qualified as somnoplegic by Berard (Buenos-Ayres). P. Deniker (Paris) attempted to differentiate between the indications for sleep treatment and simple neuroleptic therapy, a less hazardous method of treatment.

Baruk (Paris) recalling his experiments on laboratory animals suggested the use of small doses of chlorpromazine, Bloch (Brussels) on the other hand stressed the potential value of large dosage.

Indications, contra-indications and therapeutic results

It is unfortunately impossible to comment in detail on the reports read on the following:

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