# THE SCRIBE'S COLUMN

No one who had had to do with him, no one, that is, with one exception to be stated hereafter, was in any doubt that the hero of this Gilbertian medico-legal farce was suffering from schizophrenia.

He had been convicted at a Magistrates' Court in June 1976, of stealing two bottles of milk. Because of the nature of the offence, almost pathognomonic in itself, and his behaviour in Court, he was remanded in custody for a medical, that is, a psychiatric report. The prison medical officer, well qualified and psychiatrically experienced, diagnosed schizophrenia and considered that a Hospital Order (Section 60, M.H.A. 1959) was the appropriate disposal. Your scribe was summoned to give his opinion, as the offence had been committed in the catchment area of his hospital, and he completed the second Section 60 form without a moment's hesitation. And in due course a Hospital Order was made.

Only after the offender had arrived at the hospital was it made known that he had appealed against sentence. For technical reasons the appeal could not be heard until September, about three months after it had been lodged, time enough in all conscience to confirm or otherwise the diagnosis.

The offender was aged 26, an Irishman whose Kerry accent you could cut with a shillelagh. He was well educated, and had there been the necessary funds he could have proceeded to the university, but the only job available to him locally had been that of a farm labourer, which understandably he found not to his taste. Eventually he made tracks for England, where for a time he worked as a clerk, but he gave up and his life pattern thereafter became more and more erratic: he became, in effect, a vagrant, sleeping rough or in dosshouses and drinking to excess when funds allowed.

Whilst in hospital he was presented at a case conference. There was an unusual unanimity amongst all those present: no alternative differential diagnosis was offered. Great emphasis was laid on the social history, on the offence itself and the clinical symptoms of increasing apathy, inertia and a general paranoid attitude. If left to his own devices, he would just sit; friendly overtures by staff or patients were rebuffed, and attempts to goad him into activity were angrily resented. He was in an open ward, and at any time, had he so wished, he could have walked out. He did not; he just continued to sit.

Came the day of the appeal, to be heard in the Crown Court. The Law in all her majesty was on display. Besides the Judge and counsel, and the court officials, there were also present the solicitors for both sides, probation officers, social workers, nurses and police officers, not to mention the three doctors who were involved. The imagination boggles at the overall cost of mounting the show: but justice must be done and must be seen to be done.

Of the doctors, the first to be called and cross examined was the one from the remand prison. He refused to budge from his original diagnosis. Ezra was then called and did likewise, emphasizing, furthermore, that he had had ample time to observe the offender, hereafter known as the appellant, for a period of months. Last to take the stand was a consultant psychiatrist for the defence, who had seen the appellant twice for relatively brief periods. He asserted his belief that the appellant was not suffering from schizophrenia. On what did he base his assertions, the Judge asked. On the appellant's ability to explain the meaning of simple proverbs. Could he give an example? Yes: 'A stitch in time saves nine.' The Judge seemed most impressed by this display of professional expertise. He himself then addressed the appellant who, flanked by two nurses, sat throughout the proceedings impassively staring at his finger nails. Could he hear all that was going on in Court, and if he did was he able to understand? The appellant nodded in response to both questions, so proving beyond possible doubt that he was completely sane.

The Court was adjourned whilst the Judge retired to consider his verdict. He returned. The usual courtly courtesies were exchanged. The Judge summed up. It was for the prosecution to prove, he said, that the appellant was suffering from schizophrenia. In his opinion it had failed so to do. The verdict, therefore, was that the appellant was not suffering from schizophrenia. In the circumstances the Hospital Order would be rescinded. The appellant was given instead a nominal one-day sentence, which meant that he was free to go.

Of course he did not go. There was nowhere in fact for him to go. The Court social workers had made no contingency plans, so certain had they been of the outcome. To resolve an embarrassing social crisis, it was agreed, 'as a temporary expedient', to re-admit him to hospital as an Informal patient. He is still there, and wild horses (about the only method not so far tried) would fail to remove him.

EZRA THE SCRIBE



https://doi.org/10.1192/S0007125077300549 Published online by Cambridge University Press