Problems in the running of this unit were described in relation to medical treatment and organization and also from the point of view of the nursing staff. Mr. A., himself a patient in the unit, gave a most graphic account of his reactions. A prolonged and detailed discussion ensued.

At the end of the Meeting, the Chairman thanked the speakers for their most interesting papers.

SOUTH-WESTERN DIVISION

THE AUTUMN MEETING of the South-Western Division was held at the Royal Victoria Hospital, Netley, Southampton, on Thursday, 28 October, 1965, by kind invitation of the Officer Commanding, Colonel Desmond Murphy.

During the forenoon, members were shown round the Hospital. At lunch, members and guests were welcomed by Major-General W. B. F. Brennan, D.D.M.S., Southern Command. The Divisional Chairman, Dr. A. J. Galbraith, gave thanks in reply.

The Divisional Committee of Management reported on its meeting that morning. With reference to the proposed new Branches, which were to replace the Divisions, the Committee considered that it would be of benefit to the West Country Branch (South-Western and Wessex Regions) if the Oxford Region remained in it, instead of being aligned with the North-West Metropolitan Region. It was understood, however, that there was some divergence of opinion about this in the Oxford Region, and the Committee felt that a more definite opinion of the views of members in the Region should be sought by a postal ballot.

Arrangements were proceeding for the meeting of the Psychotherapy and Social Psychiatry Section in Bristol in April, 1966.

The Committee had agreed to put forward the following names for appointment to the Welsh Hospital Board, on which there was at present no psychiatric representation: Drs. J. P. Spillane, T. P. Riordan and G. M. King.

Professors Russell Davis and Rawnsley and Drs. Heaton-Ward and Lindsay Walker were due to retire and were not eligible for re-election to the Divisional Committee of Management. The Secretary was asked to approach Drs. Francis Pilkington, J. Lomas, P. Swinson, H. J. Crow, to ask if they would be willing to serve on the Committee, and Members were asked to forward any other nominations to the Secretary.

The following Candidates were elected to Ordinary Membership:

ARROYAVE-PORTELA, FERNANDO, L.M.S., Senior House Officer, Littlemore Hospital, Oxford.
Proposed by Drs. F. J. J. Letemendia, D. H. C. Surridge, K. L. K. Trick.

COOK, ANTHONY RAYMOND, M.R.C.S., L.R.C.P., D.P.M., Registrar, Morgannwg Hospital, Bridgend.
Proposed by Drs. J. M. Cuthill, H. V. R. Jones, M. W. Annear.

CROW, HENRY JAMES, *D.F.C.*, M.A., M.D., Clinical Director, Burden Neurological Institute, Bristol.
Proposed by Professor F. L. Golla, Drs. V. O. G. Smyth, W. A. Heaton-Ward.

HINCHLIFFE, MARY KATHERINE, M.B., B.S., D.C.H., D.P.M., D.Obst.R.C.O.G., Medical Officer, Glenside Hospital, Stapleton, Bristol.
Proposed by Drs. D. F. Early, A. H. Ogden, R. W. K. Reeves.

JONES, EVAN JOHN, M.B., B.Ch., Registrar, Knowle Hospital, Fareham, Hampshire.
Proposed by Drs. A. J. Galbraith, R. A. Sandison, S. McKeith.

KELLAND, CLIFFORD HENRY, M.B., B.S., Trainee Psychiatrist, Royal Victoria, Hospital, Netley.
Proposed by Drs. G. G. Wallis, N. Lis, A. W. Scott-Brown.

LIPSCOMB, COLIN FRANCIS, M.B., Ch.B., D.P.M., Registrar, St. James's Hospital, Portsmouth.
Proposed by Drs. E. G. W. Cross, P. C. Matthews, G. D. Knight.

ORR, JAMES HENRY, M.B., Ch.B., Medical Officer, H.M. Prison, Winchester.
Proposed by Drs. R. W. Simpson, W. L. Milligan, D. Duncan.

SCOTT, JOHN FREDERICK, B.A., M.B., B.Ch., D.P.M., Consultant Psychiatrist, St. Matthew's Hospital, Lichfield, and Walsall Group of Hospitals; 67 Orchard Avenue, Parkstone, Poole, Dorset.
Proposed by Drs. J. L. Clegg, M. R. Morton, E. T. Rolston.

SINGH, GURMEET, M.B., B.S., D.P.M., Registrar, St. John's Hospital, Stone, Aylesbury, Bucks.
Proposed by Drs. D. C. Watt, A. Elkes, A. Wadud.

The Chairman informed the Meeting that Dr. Mary Monro had been awarded the Divisional Prize for her Paper read at the Spring Meeting at Oxford in 1964.

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Acute Schizophrenia in the Services

Colonel Desmond Murphy, in introducing the speakers, said the papers would present experiences covering the remitting types of schizophrenic illness encountered in the Services.

Mr. Tom Brown, Principal Clinical Psychologist, discussed some of the psychological aspects of schizophrenia. One of the uniform primary symptoms was thought disorder, which could present itself in many ways. From the clinical point of view, this could be arbitrarily divided into two areas, the development aspect of abstract thinking as seen in the individual's ability to handle verbal concepts, and the function of conceptual thinking. He then described psychological tests which he had found useful and worth while in the examination of early schizophrenic states, and explained how they could help the clinician in diagnosis and prognosis.

Major R. J. Wawman's paper, **"Physiological and Psychological Functioning in the Remitting Schizophrenic"** first described the main features distinguishing "Reactive" Schizophrenia from "Process" Schizophrenia in the early stages of the illness. On the physiological side, autonomic balance and therefore sympathetic reactivity could be viewed as a peripheral indication of general C.N.S. arousal, which was itself considered to be largely a function of the reticular activating system. One would therefore expect that tests which appeared to reflect arousal and the activity of the reticular activating system would also reflect the trend towards low arousal in remitting schizophrenics. He mentioned Funkenstein's mecholyl test, and then proceeded to describe the techniques of the Sedation Threshold Test, and another measure of arousal, the Archimedes Spiral After-Effect, both of which he had extensively used himself. He then turned to the psychological aspect and considered among other matters the concept of over-inclusiveness in thought disorder and the use of Payne's Sorting Test. He found that schizophrenics with high sedation thresholds showed a higher tendency to over-inclusive thinking and were generally more disordered than those with low thresholds. He concluded that there was some evidence that the level of arousal and the extent of its disturbance from normality contributed to the quality and quantity of the schizophrenic thought disorder.

He also deduced that sedation threshold was closely related to autonomic arousal and that the spiral after-effect might measure arousal associated with perception. These processes were closely and positively related in normal and neurotic populations, whereas in schizophrenia this relationship was disturbed, and, significantly, the more disturbed it was the more sinister the illness.

The third paper, **"Acute Schizophreniform Reactions in Service Patients"**, was presented by Major G. W. Thompson. He had surveyed the medical records of over 500 patients suffering from schizophrenia or acute psychotic illnesses who had been admitted to Netley since the beginning of 1962. Particular attention was directed to isolate those cases with an acute onset, a florid transient psychotic illness with schizophrenic features occurring in soldiers of satisfactory and outward-going premorbid personality and responding rapidly to environmental or therapeutic measures. There emerged a group of 19 such cases which would appear to have an identity of their own and merited the description of "acute schizophreniform reaction". These selected 19 cases were analysed in detail. It appeared that the acute illness occurred in an apparently more mature group of servicemen who had adjusted to Service life. 17 patients were sociable, extraverted men; 5 had a previous history of psychiatric symptoms. There was no common pattern in their family or social backgrounds. Major Thompson then described the natural history and symptomatology of the illness before going on to discuss the disposal. Eight cases (42 per cent.) were able to return to duty in a restricted medical category. A short-term follow-up of the 19 cases showed that only 4 had broken down again and required hospital treatment, and only one of these had developed a confirmed schizophrenic process illness. Major Thompson hoped to repeat this follow-up in the future.

The final paper was given by Surgeon Commander G. G. Wallis and was entitled **"The Epidemiological and Long Term Aspects of Acute Schizophrenia"**. This involved a survey of 512 patients who were invalided from the Navy with the diagnosis of schizophrenia between 1947 and 1956, and whom Commander Wallis had followed up until mid-1961. Factors studied in detail included length of stay in hospital, duration of illness before admission, a comparison of time in hospital of patients given physical treatment with those who remitted spontaneously, the effects of stress as a precipitating factor, age, length of stay and the type of illness. From his follow-up findings, Commander Wallis concluded that the factors contributing towards a good prognosis were precipitating stress, spontaneous remission, quick remission, age under 20 years and a catatonic illness.

Many members took part in a full discussion which showed the interest the papers had aroused. The Meeting concluded with a vote of thanks by Dr.

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R. W. Armstrong, who commented on the excellence of the papers and added his thanks to General Brennan and Colonel Murphy for the warmth and excellence of their hospitality.

NORTHERN AND MIDLAND DIVISION

THE AUTUMN MEETING of the Division was held at The Retreat, York, on Thursday, 21 October, 1965, by kind invitation of the Hospital Management Committee.

The Divisional Committee of Management reported that enquiries had been made as to how Regional Advisers on Merit Awards kept themselves fully conversant with the work of individual consultants within Regions, but no further information could be obtained. It was pointed out that a Regional Adviser was not the only source of information available to the Merit Awards Committee, and it was decided not to take any further action in the matter.

It was decided that the Spring Meeting of the Division would be held at Cheadle Royal Hospital, Cheadle, Cheshire.

The following were elected to Ordinary Membership:

BROADHURST, ALAN DESMOND, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M., Medical Registrar, Papworth Hospital, Cambridge; 119 Humberstone Lane, Thurmaston, Leicester.
Proposed by Drs. D. H. Clark, O. E. P. Hodgson, B. Davy.

BROOKS, BERNARD GEORGE BOOTHROYD, B.Sc., M.B., B.S., M.R.C.S., L.R.C.P., Registrar in Psychiatry, Manchester University.
Proposed by Drs. J. F. Wilde, H. L. Freeman, J. Byard.

CHEYNE, ASUNCION FRANCISCA, Lic. in Medicine and Surgery (Madrid), D.P.M., 4 Eskdale Terrace, Jesmond, Newcastle-upon-Tyne, 2.
Proposed by Drs. L. C. Cook, F. J. Letemendia, B. W. Orchard.

DAWSON-BUTTERWORTH, KEITH, M.R.C.S., L.R.C.P., Registrar, Middlewood Hospital, Sheffield.
Proposed by Professor E. Stengel, Drs. N. L. Gittleson, I. G. Bronks.

DOYLE, MICHAEL JOSEPH, B.A., M.B., B.Ch., B.A.O., Senior Medical Officer, Harmston Hall Hospital, Lincoln.
Proposed by Drs. E. W. Shepherd, M. S. M. Rayner, J. S. Robson.

EGDELL, HENRY GEORGE, M.B., Ch.B., D.P.M., Registrar, St. Luke's Hospital, Middlesbrough.
Proposed by Drs. D. D. Webster, T. M. Cuthbert, G. M. Langham-Hobart.

GHANY, IQBAL MOHAMMED, M.B., Ch.B., Registrar, Hollymoor Hospital, Birmingham.
Proposed by Drs. J. C. N. Tibbits, H. P. Dam, V. S. Nehama.

KERR, GEORGE, M.B., Ch.B., D.P.M., Registrar, Cherry Knowle Hospital, Ryhope, Sunderland.
Proposed by Drs. A. Gillis, C. F. Lascelles, S. J. Frewin.

FIELDSEND, ALLAN BIRTWHISTLE, M.B., Ch.B., M.R.C.S., L.R.C.P., Clinical Assistant, De la Pole Hospital, Willerby, Hull.
Proposed by Drs. H. Ellett-Brown, J. A. R. Bickford, J. A. Ardis.

PARFITT, DAVID NEIL, B.Sc., M.D., M.R.C.P., D.P.M.; 1 Flordd Gynach, Ruthin, Denbigh.
Proposed by Drs. R. MacDonald, C. R. Harris, D. J. O'Connell.

PEBERDY, GEOFFREY ROBERT, M.D., M.R.C.S., D.P.M., Consultant Psychiatrist, Newcastle General Hospital, Newcastle-on-Tyne.
Proposed by Drs. K. Davison, T. J. Fahy, Betty Chester.

RICE, THOMAS, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.M., Senior Medical Officer, Cherry Knowle Hospital, Ryhope, Sunderland.
Proposed by Drs. C. F. Lascelles, M. Wright, A. Gillis.

RICHARDS, EVAN HUW, M.A., M.B., B.Chir., D.P.M., Senior Registrar, Midland Nerve Hospital, Birmingham.
Proposed by Drs. W. I. N. Kessel, A. W. Kushner, E. B. Ritson.

ROBSON, PIERS COWEN, M.B., Ch.B., D.P.M., Registrar, St. Nicholas Hospital, Gosforth, Newcastle-upon-Tyne.
Proposed by Drs. H. A. McClelland, T. A. Muckle, M. T. Haslam.

SHAH, KANU VRINDAVAN, M.B., B.S., M.R.C.P., Registrar, Saxondale Hospital, Radcliffe-on-Trent, Notts.
Proposed by Drs. A. D. M. Douglas, I. B. Pearson, Stella Conway.

STEPHEN, WILLIAM, M.B., Ch.B., Senior Medical Officer, H.M. Prison, Liverpool.
Proposed by Drs. B. Finkleman, H. V. White, C. M. Vaillant.

At the morning session, two papers were read, the first by Dr. F. G. Spear, Consultant Psychiatrist,

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