The College

The Fourteenth Annual Meeting, 1985

The Fourteenth Annual Meeting was held in London from 9 to 11 July 1985 under the Presidency of Dr T. H. Bewley.

SCIENTIFIC MEETINGS

The Scientific Meetings were held at the Imperial College of Science and Technology, London.

BUSINESS MEETING

The Business Meeting was held on 10 July 1985 and was chaired by Dr T. H. Bewley.

Annual Report of Council and the Registrar's Supplementary Report

The Annual Report of Council has been circulated with the papers for this meeting and this is a supplementary statement to tell members briefly of some of the things that have happened in the College since the Annual Report went to press.

Council met on 21 June and approved, with minor amendments, the Report of the Working Party on the Mental Health Act entitled 'Consent to Psychiatric Treatment for Informal Patients'. Many members of the College have written to me over the past eighteen months expressing concern over this complicated issue and I am sure they will find these guidelines useful; they give straightforward, practical and sensible advice. They will be published in the *Bulletin* in the Autumn (*Bulletin*, November 1985, 9, 228–230) and will be available from the Secretary in August.

Council also approved the Report of the Interdisciplinary Working Party on Confidentiality. This Working Party was set up seven years ago under the Chairmanship of Professor Linford Rees and consisted of representatives not only from the College but also from organizations such as the British Association of Social Workers, the Law Society, the Royal College of Nursing, the Institute of Health Service Administrators and the National Schizophrenia Fellowship. Council agreed that this Report was a useful contribution to the continuing debate on confidentiality and, whilst it cannot be viewed as a document reflecting College policy, it is a very useful discussion document.

The Public Policy Committee is to convene a Working Party on Confidentiality and they will be considering the issue of access to case notes, particularly patients' access to their own case notes. I would be very interested to receive letters from members with their views on this matter.

As I mentioned in earlier reports, the College presented both written and oral evidence to the Social Services' Committee's Inquiry into Community Care. When the report was published last March, the College was pleased to see that many of its long held views on community care were reflected in the Report. We have responded formally to the Social Services' Committee and are preparing more detailed comments on the specific recommendations concerning community nursing and mental handicap services. The College is also preparing written evidence to the Social Services' Committee's Inquiry into the Prison Medical Service. I hope very much that we will also be invited to present oral evidence to this Committee.

The Mental Health Act Commission is currently preparing its draft Code of Practice. It is anticipated that the College will be formally asked to comment on this in the Autumn. The President has written to the Secretary of State asking if the College could be given a longer period for the preparation of its comments than is normally the case. Council has convened a Special Committee, chaired by the President, to collate the College's response. Representatives from Sections and Groups will be invited to participate. The Draft Code will be circulated to the Divisions and relevant College Committees for comment.

The following venues have been agreed for future College meetings in 1985/6—Autumn Quarterly Meeting: Friends House, London; Winter Quarterly Meeting: Royal Society, London; Spring Quarterly Meeting: University of Manchester Institute of Science and Technology; Annual Meeting: University of Southampton.

I would like to announce the following election results: Dr. G. Berrios has been elected as Librarian; Professor R. Mindham has been elected on to Council; and Professors T. Arie, I. Brockington, J. Gunn, G. Fenton and Dr. E. Johnstone have been elected on to the Court of Electors. Other election results were as follows: Professor I. Kolvin (Chairman, Child and Adolescent Psychiatry Specialist Section); Dr J. Harris (Secretary, Child and Adolescent Psychiatry Specialist Section); Dr J. Wattis (Secretary, Section for the Psychiatry of Old Age); and Dr R. Philpott (Secretary, North-West Division).

You will probably have noticed that the July edition of the *Bulletin* [page 147] carried a notice about the procedure for application to the two new categories of membership, namely New Affiliates and New Associates. Applications to the Court of Electors must reach the College by 30 September and should be sponsored by two Members or Fellows of the College, which means that Sections and Divisions can of course sponsor appropriate people if they so wish.

Finally, Dr Henry Rollin retires today after 10 years of service as Honorary Librarian and I am sure that you would like me to express our gratitude to him on your behalf. R. G. PRIEST

First Upjohn Lecture on Mental Health Care Delivery The First Upjohn Lecture on Mental Health Care Delivery, 'The Community Care of the Acutely Mentally III', was given by Dr John Hoult, Regional Adviser, Mental Health, Northern Metropolitan Region, New South Wales, Australia. The Vote of Thanks was given by Dr J. L. T. Birley.

Election and introduction of Honorary Fellows

The following were unanimously welcomed to the Honor-

252

ary Fellowship. Professor D. X. Freedman was elected to the Honorary Fellowship in 1984, but was presented at this meeting. Professor Leon Eisenberg was unable to attend and will be presented at a future meeting.

Professor Peter Berner (introduced by Dr S. Montgomery)

Professor Peter Berner must be known to most psychiatrists in the world because of his activities as Secretary General of the World Psychiatric Association from 1978 to 1983, and probably needs little introduction to many people here. It is both an honour and a very great pleasure for me to be given the opportunity to share my respect for his many achievements.

He has a very distinguished career as a clinician and as a scientist. He had the advantage of having had his complete medical and psychiatric training in Vienna, graduating in 1951 and becoming a Professor and Head of the University Psychiatric Clinic in 1971. In this he has developed in a unique way the tradition of excellence of psychiatry in Vienna. During this time he had become well known for his painstaking research into classification of psychiatric illness and an authority on paranoid states. He has contributed widely to scientific literature with over 200 papers and books.

For most people that would probably be enough, but Professor Berner is a man of much wider vision. He very early on was concerned for the mentally ill and disadvantaged on a world stage. In 1960 he became adviser to the United Nations Health Commission for refugees and worked for them for seven years in Europe and in Africa.

He is the most courteous of men, generous and kind to those who work for him and with him. It is these qualities and his wider understanding which led him to be chosen as Secretary General of the World Psychiatric Association over a difficult period in the history of world psychiatry. The problems of keeping a disparate organization together and working in a positive direction could only be faced by a man of great patience and diplomatic skill. During the time he was Secretary General a major achievement of WPA was to focus world attention on the abuse of psychiatry in many countries, particularly in the USSR.

He continues to advise on these far-reaching issues and is currently scientific co-ordinator of the European Psychiatric Association. He has of course in his long and distinguished career received many honours. I am delighted that the College have decided to add to these by making him an Honorary Fellow.

Dr Donald Broadbent (introduced by Dr J. L. T. Birley)

'If we approach a depressed patient and ask him what he is thinking about, he is likely to report that he is remembering some episode of failure in the past, or contemplating the hostile expression of a passer-by. Yet the patient may be sitting at his ease on a sunny day, with many more pleasant sights and memories which he is ignoring; and he himself may bitterly regret his inability to select these other and more congenial topics. This example is an extreme instance of a problem which arises in all cognition. Behind the structure of any activity, even in normal people, there lies the question of the selective functions which have launched this process rather than one of the others that might have been.'

This opening paragraph of one of Dr Broadbent's many stimulating papers contains for us an important and heartening message: here is a brilliant and distinguished psychologist who is working in a field which is of crucial interest to psychiatrists.

Dr Broadbent was Director of the Applied Psychology Research Unit in Cambridge from 1958 when 'Perception and Communication' was published to 1974 when he moved with his wife to Oxford to work in the Experimental Psychology Department. He was elected Fellow of the Royal Society in 1968 and awarded the CBE in 1974. He has been a President of the British Psychological Society and given many distinguished named lectures at home and abroad, for instance, the William James Lecture at Harvard.

However, for us, it is Dr Broadbent's field of interest, a very broad field, which is so relevant; for he has been concerned with what can be called 'central processes' of cognition, perception, attention, memory and communication. He is an empirical psychologist who uses theory as it should be used: as an intellectual scaffolding to be built up and discarded if necessary, rather than as a cage which can become a shrine for the faithful. For instance, a recent article of his is sub-titled 'A Simplistic Model for Memory'. The abstract contains the sentence, 'The approach is not particularly original but rather represents the common elements or presuppositions in a number of modern theories'. May the time soon come when psychiatric articles display the same degree of sophistication and modesty.

It is in fact in these very qualities: stimulating, innovative but not bludgeoning which has made his contributions so important not only by what he has written but through his personal contact with people. Many have told me of the help and encouragement which he has given to their work. 'A catalyst', 'a bridge builder', 'a man of encyclopaedic knowledge who listens and gives good advice'—these are some of the comments I have received. His interest in clinical problems stems not only from his contact with psychiatrists but from his own work on job satisfaction and mental health and ill-health at work—something which he calls 'ergonomics' but which is closely linked with many of our own concerns, particularly rehabilitation, and again linked with his own interest in attention.

'In many ways the central problems of psychology are those of interpreting human action after the departure of the little man in the head.' Psychiatrists have certainly put all sorts of little men in the heads of their patients, and not only men but rats and black boxes. It is immensely encouraging for us that someone like Dr Broadbent is working at these 'central problems' and I am delighted and honoured to introduce him to you as an Honorary Fellow.

Professor D. X. Freedman (introduced by Professor R. G. Priest)

I first met Dr Freedman when I was spending 12 months at the University of Chicago 19 years ago. He took up the Chair in psychiatry when I was there. It was a memorable experience. He had a range of abilities which even by present-day standards of psychiatry would be astonishing, but which then was unique. A qualified psychoanalyst and skilled psychotherapist, he was equally at home handling psychotropic drugs or working in the biochemical research laboratory.

Dr Freedman is now Professor of Psychiatry in the University of California at Los Angeles, where he went in 1983 after 17 years in Chicago. He is one of the best known Fellows of the American Psychiatric Association, and was President in 1981–2. Born in the Mid-West, he graduated at Harvard in Social Relations, then went to Yale to do medicine. After his psychiatric residency he worked at the National Institute of Mental Health. A mere 13 years after qualifying he returned to Yale as a Professor of Psychiatry.

Dr Freedman is a graduate of the Western New England Institute for Psychoanalysis. When I was in Chicago the rumour circulated that he had practised psychoanalysis in his car while commuting from New York to New Haven. Eventually I plucked up enough courage to ask him if this were true. He looked mystified at first and then smiled with relief as he realized the origin of this story. In fact he used to supervise his resident while driving. Those of you who criticize the stringency of the academic discipline in British psychiatric training should experience the American system. It is not just the overt actions of residents that come under scrutiny, it is also the trainees's motivation and even the counter-transference that he experiences towards his patients. Small wonder that it is likened to a personal analysis.

A distinguished member of many national and international bodies, Dr Freedman still finds time to carry out original research and is one of the foremost authorities on neurotransmitters, amine metabolism, hallucinogenic drugs and substance abuse. He is Editor of the series of Year Books of psychiatry and applied mental health. You are perhaps aware of the fact that he is also Editor of one of the most prestigious textbooks of psychiatry. In addition, if you do not know already, when you submit your articles to the Archives of General Psychiatry you will find that he is the Chief Editor of this journal (and he has been since 1970).

Out of his many honours and positions, I would like to mention that not only has he received the Honorary Fellowship of the American Association of Psychoanalytic Physicians, but he has been Chairman of the Clinical Psychopharmacology Research Committee of NIMH and President of the American College of Neuropsychopharmacology.

Dan Freedman is excellent company, since he is one of those rarities—a non-abrasive academic. Although a man of high stature, he is ready to laugh himself at his own shortcomings. The main one is that horror of American orthodox society, the lack of middle name. Definitely, in his case, X represents the unknown.

President, ladies and gentlemen, Dr Freedman's shortcomings are few, his talents are many. I am honoured to be able to present him to you as Honorary Fellow of this College.

Dr M. M. Glatt (introduced by Professor Griffith Edwards) Max Glatt has won an international reputation for his work on dependence problems. If today in any corner of our own country an alcoholic is receiving adequate and active treatment within the NHS rather than lingering in disdained neglect on some back ward, credit for that humane development lies very largely with the perseverance and courage of a psychiatrist who came to this country as a refugee in 1939. It is the intensely personal nature of the achievement which today deserves recognition. The extent of the changes that have been brought about in the alcoholism field over 30 years needs to be emphasized. Let's remember that when Max started his work there were virtually no specialized NHS services for alcoholics, the textbooks invited us to equate alcoholism with psychopathy and recommended prolonged incarceration as the treatment of choice, while professional attitudes were, in general, miserably and damagingly pessimistic. The official stance was that Britain did not have a drinking problemalcoholism was terribly un-English. As for the changes, Max would be the first to admit that we have as yet reached few winning posts. But where previously there was no purposive NHS policy, there are now no less than 30 specialized alcoholism treatment units which are doing much work for training and development of community services, as well as for direct patient care.

How did these changes come about? In 1951, Max set up at Warlingham the prototype Alcoholism Unit in the UK. From these beginnings were born a treatment movement. Within two or three years Max had established the Warlingham Unit as a centre to which visitors came from this country and overseas to see in action an alternative to pessimism. In 1962 the Ministry of Health published its memorandum on 'The Hospital Treatment of Alcoholism' and there can be no doubt at all that Warlingham provided the inspiration for changed official attitudes.

Max Glatt's achievements first won recognition on account of the Unit at Warlingham.and his work at St Bernard's, but he went on over the years to extend his influence in many directions. In the 1960s he was one of the first psychiatrists to take an interest in the treatment of drug addiction. His contributions to the literature have been many and diverse. As Editor of the *British Journal of Addiction* he turned a parish magazine into an international scientific publication. He has won scientific prizes in Germany and America.

But no cataloguing of fame and glory should distract us from the central and personal achievement. Max has contributed to the advance of post-war British psychiatry in a previously rather shamefully neglected sector. He has done so with his research office a corner of a table, his research grants absolute zero and his research cohort his routine, unselected and heavy case load. His resources have been his energy, his ability to listen to his patients, his compassion, and his humour.

Asked to explain why he had dedicated his life to these problems, he had this to say: 'If I see a soccer match I always want the underdog to win \ldots Here were people who suffered and deserved help and none of us doing anything for them.'

He has given that deserved help and enabled many an underdog to win. To his surprise he may now even be forced to concede that he has put the movement to help people with alcohol or drug problems on the winning side. We honour ourselves by claiming him as a British psychiatrist.

Dr (Archibald) Denis Leigh (introduced by Dr H. R. Rollin)

Some talk of Aubrey Lewis; of Mayer-Gross, Slater and Roth; of Denis Hill, Curran and Guttman; Mapother, Meyer and Mott. These are names writ large in the Pantheon of British psychiatry, names beyond compare. And yet, I venture to suggest, there is one other name that does compare, that of Denis Leigh.

Denis hails from Lancashire, and in spite of decades of exposure to the gentrification of the south, he retains more than a vestigial remnant of a northern accent, as well as a forthrightness which, for those unaccustomed to the manners of the north, can be mistaken for brusqueness. He has had a brilliant career, both as an undergraduate and graduate. The honours that have been showered on him read like the credits that roll endlessly off the screen before or after, or before and after, a Hollywood movie spectacular. To catch just a glimpse of some of them ...

In 1932 he went up on a scholarship to Manchester University where he graduated MB, ChB with first class honours having, *en passant*, swept the board of prizes in subjects as disparate as anatomy, physiology, medicine, and midwifery. Since graduation he has collected a fistful of academic honours including the MD, MRCP and FRCP, and he was, of course, elected a Foundation Fellow of this College in 1971.

Denis served with distinction in the RAMC during the Second World War achieving the rank of Lt Colonel and was, *inter alia*, Adviser in Neurology to the Eastern Army, India. After demobilization he continued his association with the Army and was appointed Honorary Consultant, this time in psychiatry, to the British Army, a post he held from 1969 to 1980.

Denis' training and expertise in both neurology and psychiatry would have fitted him to specialize in either. He chose psychiatry; and, as we all know, became Consultant Physician to the Bethlem Royal and Maudsley Hospitals in 1949, a position he filled with great distinction until that bald sexton, Time, decreed that he should retire in 1980. His services to these great hospitals have been duly acknowledged by his appointment as Emeritus Consultant.

The recognition he has achieved in his own country has been more than matched by the honours which have been hung round his neck like garlands by academic institutions in countries as numerous and far flung as Germany, Italy, Brazil, Argentina, Poland, America, Sweden, Colombia, the USSR, Czechoslovakia and Hong Kong. He is, in effect, a one-man academic League of Nations. And it is in the context of internationalism that mention must be made of perhaps the most important, and yet, the most difficult and onerous job he has ever undertaken, that as Secretary-General of the World Psychiatric Association from 1966 to 1978. There were times during his tenure of office when political turbulence troubled the waters and Denis himself became the target of criticism, if not abuse. In characteristic fashion, however, he held firm and succeeded admirably in weathering the storm.

Denis Leigh's contribution to the literature has been considerable. In addition to a host of books, chapters in books, and papers, he was in his time the Editor-in-Chief and founder of the Journal of Psychosomatic Research as well as serving on the editorial board of other learned journals. He is a medical historian of distinction as witness his intriguing book, The Historical Development of British Psychiatry. His love of scholarship is manifest in his bibliolatry: his personal collection of antiquarian books on psychiatry is the envy of all private collectors. We too benefited from his expertise in this field when he served for a time as Honorary Librarian to the College.

Denis Leigh has deserved and has been accorded more glittering prizes then almost anyone I can think of, but to all who know him, as I have been honoured to know him for many years, he remains a plain, blunt man. Mr President, it is my privilege and pleasure to present him to you as a most worthy recipient of the Honorary Fellowship of this College.

Election of President

Notice to Fellows and Members

Fellows and Members are reminded of their rights under the Bye-laws and Regulations, as follows:

Bye-law XI

The President shall be elected annually from amongst the Fellows in accordance with the procedure prescribed by the Regulations.

Regulation XI

- (1) As soon as may be practicable after the first day of January in any year the Council shall hold a nomination meeting and shall . . . nominate not less than one candidate and not more than three candidates . . .
- (2) Between the first day of January in any year and the date which is four clear weeks after the nomination meeting of the Council, written nominations, accompanied in each case by the nominees' written consent to stand for election, may be lodged with the Registrar, provided that each such nomination is supported in writing by not less than twelve Members of the College who are not members of the Council.
- (3) An election by ballot shall be held in accordance with the provisions of the Regulations.

The nominating meeting of the Council will be held on 14 January 1986 and the last date for receiving nominations under (2) above will therefore be 11 February 1986.