

**Steroid-Induced Euphoria**

**Sir:** Watts (*Journal*, July 1988, 153, 131) writes of his personal feeling of euphoria after receiving steroids. The British National Formulary agrees that euphoria is frequently observed after steroids, but warns: "A serious paranoid state or depression with risk of suicide may be induced, particularly in patients with a history of mental disorder." It would thus be difficult to justify to an ethical committee a trial of steroids in depressed patients.

However, how does one drug cause euphoria in some individuals, but dysphoria or even paranoia in susceptible others? The answer may lie in the GABA-benzodiazepine receptor complex. Alphaxalone and other steroid-based anaesthetics are thought to exert anaesthetic action by potentiation of GABA (Harrison & Simmonds, 1954). Potentiation of GABA in animal research has been shown to influence monoamine systems resulting in e.g. decreased 5HT release (Schlicker *et al*, 1984), decreased dopamine release, but increased noradrenaline turnover (Scatton *et al*, 1982). It can thus be postulated that steroids exert their psychotropic effects by modulation of monoamine systems, via the GABA-benzodiazepine receptor complex. Whether steroids induce no change, euphoria, depression, or paranoia will presumably depend on the balance of noradrenaline, serotonin, and dopamine in that individual. The rapid onset of euphoria noted by Dr Watts

would be consistent with rapid increased noradrenaline turnover, i.e. there is no need to wait 2 weeks for up-regulation of receptors.

If other anaesthetics (e.g. barbiturates) also exert their action via GABA receptors, as is now believed (Keane & Biziere, 1987), this theory may provide a model for post-operative psychosis. Stated simply, prolonged potentiation of GABA receptors by anaesthetic agents at operation may induce changes in monoamines, particularly dopamine, to induce psychosis in susceptible individuals.

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**A HUNDRED YEARS AGO****Qualifications of Asylum Superintendents**

*To the Editors of The Lancet*

Sirs,—The circumstances connected with the recent appointment of a medical superintendent to the Sussex County Lunatic Asylum at Hayward's Heath call, in my opinion, for some comment. They have excited among junior asylum men a feeling of surprise allied to consternation, and afford subject for most serious consideration to every assistant medical officer in the kingdom.

In the advertisement announcing the vacancy it was stated that the superintendent must be "a Doctor of Medicine of a University in the United Kingdom and a Fellow, Member, or Licentiate of the College of Physicians of London, Edinburgh, or Dublin". (The italics are my own.) This restriction at once had the

effect of shutting out nine-tenths of the assistant medical officers in England; among them men of long lunacy experience, many of whom possessed the necessary British degree, but lacked a diploma from a College of Physicians. While others again, who had taken up one of the licences, and had in addition graduated MB, CM were told on inquiry that they were ineligible, not having an MD degree. Of course, scores of "doubly qualified" men were excluded. Attention was called to the unfairness of the restrictions by your correspondent "MD, MCh, MRCS, LSA," in your issue of Jan. 7th. But the worst is to come.

The appointment has now been made. The successful candidate has, I am informed, never held a resident post in any asylum, his sole knowledge of the care and cure of the insane having been derived from occasionally acting as a substitute for one of the Lord