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TEACHING AND CONSULTATION

DEAR SIR,

I wonder if it is not opportune, with so many changes imminent, for us to reconsider the use we make of our colleagues at home and abroad for teaching and consultation. No one who visits the U.S.A. can fail to be impressed by the enthusiasm given to postgraduate education. Funds seem readily available, and eminent psychiatrists, psychologists, sociologists and so on travel willingly across the U.S.A. to spend a day or a week at psychiatric hospitals, clinics and university centres in order to share their special knowledge and enthusiasms.

In Britain we tend to invite colleagues, generally at their own expense, to give papers and attend conferences. Little emphasis is given to consultation in the sense of having an expert sit in and advise on a treatment programme. Despite the tightness of our little island we remain more isolated from one another's work than is wise. Surely we must stop crying poverty and instead face our responsibilities? If we invite people we should find moneys to reward them for the time and energy they give in travelling, speaking and advising us. After all, it may do more good for our patients and our own morale and cost a great deal less than a century of formal conferences and a sea of White and Green Papers.

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PSYCHIATRIC EDUCATION

DEAR SIR,

In their article on psychiatric education (*Journal*, November, 1968, p. 1414), Professor Carstairs and his colleagues state that it is their impression that Guy's Hospital and Dundee are the only schools that have child psychiatry beds in the teaching hospital. This is not correct. In Birmingham, for example, we have had 8 beds for child psychiatric patients in the Children's Hospital (one of the Birmingham

Teaching Hospitals) for three years now. These are under the care of a consultant child psychiatrist who is also a part-time lecturer in child psychiatry in the University Department. In addition to this we also have a full-time lecturer in child psychiatry and mental subnormality who takes part in the teaching programme, together with his part-time colleagues.

As I regard the teaching of child psychiatry as an important development in the undergraduate curriculum, I thought that, for the record, I should write and give you this information.

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DEAR SIR,

The interesting paper (*Journal*, November, 1968, p. 1414) entitled: "Survey of Undergraduate Psychiatric Teaching in the United Kingdom", by G. M. Carstairs *et al.*, contained details of the teaching of the behavioural sciences in the pre-clinical years in various medical schools in this country.

We should like to point out that no mention was made of the course in psychology at Liverpool University Medical School, although this began in Autumn, 1961, and is still in operation. This is a 90-hour course given in the third year, details of which were reported to the British Association in August, 1966, and published in the *British J. med. Educ.*, 1968, 2, 41-44.

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DEAR SIR,

I shall be grateful if you will permit me to comment on the surveys of undergraduate teaching and postgraduate training in psychiatry contained in your issue of November, 1968. I should like in particular to fill out the information given about the teaching programmes at this Medical School and in the Newcastle region.

I am concerned to do so, not because the information provided is in any way incorrect, but because the picture given of provision at this School and in this region is incomplete and inadequate.

1. Undergraduate Teaching

Only seven of the special teaching sessions organized for small groups of students under the direction of a tutor appear to have qualified for mention under the heading of "Seminars". It may be held that the