Consent and confidentiality

DEAR SIR

I write to express my concern that the "Request for ideas for feature films" made by Jim Lee, on behalf of his film company was published in the Psychiatric Bulletin, (October 1989, 13, 576).

I am not at all sure that Mr Lee does "fully realise the difficulty in discussing confidential cases".

One of the most fundamental principles of medical ethics is that all which passes between the patient and his doctor in the course of his professional relationship is secret. Indeed the medical profession may well be privy to some fascinating case histories but in order for any doctor to come forward with even the briefest outline of any such case he must first obtain the patient's consent to do so.

However there is more to consent than getting a patient's signature on a consent form and the doctor is required to provide sufficient details and information about what is proposed to enable the patient to form a proper decision (Palmer, 1988).

I can envisage irreparable damage to the doctor-patient relationship resulting from even requesting such consent. I would also challenge any medical practitioner who believes he can adequately predict what a film company might have in store for his patient, in order to enable valid consent.

Is there any place for such an advertisement in a professional medical journal?

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Reference


Psychiatric Bulletin (1990), 14, 95-96

Psychiatry and the media

Tall story

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"How easy is it to drive a woman mad?" asked the adverts for Gaslight, echoing the first question director Teddy Kiendl put to me in October when rehearsals at the Albany Empire were getting under way. His was no easy task, resurrecting Patrick Hamilton's 'Victorian' melodrama and turning it into a psychological thriller acceptable to the modern palate. Already creaking when it was first performed in 1938, it could crumble in 1989. So he was looking to freshen it with a new dramatic insight - OK, ingredient - real psychiatry.

The plot presents a young woman falling into despair or perhaps madness. The question is: is she falling or is she being pushed by her irascible husband? He has the kind of murky past which in this genre comes in a package deal with dark good looks and silver tongue. And, believing his wife may uncover his true history, he sets out to undermine her sanity.

For each of Teddy Kiendl's careful enquiries on induced madness, I came up with a definite maybe. Gaslight had given its title to a psychiatric syndrome - a claim only Othello could rival - but it was one of those whose boundaries had shifted until no case was typical. Then there was folie à deux, a name which the director liked so much he pronounced it repeatedly and with a Gallic cadence I envied (I later discovered that Giscard d'Estaing was a relative). Folie à deux was attractive because of the ambiguous production Teddy was planning. The two protagonists seemed to have reached a simultaneous mental brink. Why not scrap the simple good-bad divide and for a time keep the audience guessing who is at fault and who is suffering? With this in mind,