Medical Superintendent in Bloomfield Hospital in 1813 during his undergraduate medical education at Edinburgh University and held that position for two years. He then completed his studies at Trinity College Dublin. It was then that he founded Hampstead, a house near the grounds of the legendary castle where Sir Richard Steele, the essayist resided. The Eustace family to this day, five generations later, still carry on the hospital practice which has grown extensively since the year it was funded in 1825. At no time later did any family member work in Bloomfield, nor was it part of Hampstead Hospital.

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Suicide and abortion

Sir – Fahy and Kelleher, in recent letters debated whether it was possible, in individual cases, to predict whether a woman denied an abortion is at higher risk for suicide. After a US Supreme Court decision in 1973 (Roe v Wade), abortion was legalised in the the US. This permits us to examine the changes in the suicide rate from the 10 year period prior to Roe v Wade (1963-1972) to the 10 year period after the decision (1974-1983).

The suicide rate of men in the US increased significantly from the first period to the second period (from 16.3S to 18.91 per 100,000 per year, t18 = 10.82, two-tailed p<0.001), whereas the suicide rate for men did not change significantly (6.18 and 6.13, t18 = 0.23). Looking at the suicide rate for women by age (see Table 1), the suicide rate for those aged 15-24 increased from 1963-1972 to 1974-1983, that for women 25-34 did not change while that for women aged 35 and older decreased. Looking at the simple regression coefficients of suicide rate on year, for women aged 15 to 65, the suicide rate was increasing from 1963 to 1972. In contrast, the suicide rate for women of all ages from 1974 to 1983 was decreasing, with the greater speeds of decrease found for women aged 45-55 and 35-45. Thus, prior to Roe v Wade, the female suicide was rising in the US, whereas after Roe v Wade the female suicide rate was declining.

Of course, many other social factors may have affected the suicide rates of men and women in America during the period studied (1963-1983), but the data are consistent with the hypothesis that liberalising the abortion laws was associated with a decrease in the suicide rates of women, and in particular women aged 35-54.

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References

1. Fahy TJ, Kelleher MJ. The prediction of suicide and the law on abortion. Ir J Psychol Med 1995; 12: 39-40.

Clozapine for the treatment of levodopa and dyskinesia in Parkinson's disease

Sir – We were interested in the correspondence concerning clozapine for the treatment of levodopa-induced psychosis and dyskinesia in Parkinson's disease^{1,2} and would like to add the following two points.

Firstly, there is concern over the use of clozapine because of the (albeit relatively rare) potentially fatal side effect of agranulocytosis. One of the other newer antipsychotic agents, risperidone, has been reported in the literature for the treatment of hallucinations in levodopa treated Parkinson's disease patients³ and, in Lewy body disease.⁴

Secondly, we were concerned that Jalenques and Coudert² recommended that electroconvulsive therapy should be consid-

ered in the management of levodopa psychosis in Parkinson's disease. We are unsure on what this recommendation is based. There is literature suggesting that Parkinson's disease itself may benefit from electroconvulsive therapy, although a carefully designed definitive trial is required to answer this question. The only report of electroconvulsive therapy to treat psychosis in Parkinson's disease, of which we are aware, takes the form of a brief clinical report, and we feel that further work should be undertaken before electroconvulsive therapy should be recommended for the treatment of levodopa psychosis.

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References

1. Hughes TA, Mindham RHS, Ross HF. Clozapine for the treatment of levodopa-induced psychosis and dyskinesia in Parkinson's disease. Ir J Psychol Med 1995 12:39. 2. Jalenques I, Coudert A-J. Clozapine for the treatment of levodopa - induced psychosis and dyskinesia in Parkinson's disease. Irish Journal of Psychological Medicine. 19953. Alessandra M, Bonifeti V, Giustini P. Risperidone for hallucinations in levodopa-treated Parkinson's disease patients. Lancet 1994 343. 1370 - 1371

 Lee H, Cooney JM, Lawlor BA. The use of risperidone, an atypical neuroleptic, in Lewy body disease. International Journal of Geriatric Psychiatry. 1994 9: 415-417.

 Madeley P, Biggins CA, Boyd JL, Midham RHS, Spokes EGS. Cell implantation in Parkinson's disease. British Medical Journal 1990 301:556.

6. Hurwitz TA, Calne DB, Waterman K. Treatment of dopaminomimetic psychosis in Parkinson's disease with electroconvulsive therapy. Can J Neurol Sci 1988 Feb; 15(1):32-4

Calcium carbimide and gluten intolerance

Sir – Calcium carbimide acts by interference in the metabolic oxidation of alcohol. Its use is indicated as an adjunct in the treatment of Alcohol Dependence Syndrome. If taken with alcohol, the patient experiences severe headache, nausea, facial flushing and general malaise. We report the case of a female patient with a diagnosis of Alcohol Dependence Syndrome, in which the use of calcium carbimide in treatment was rendered ineffective by the coexistence of gluten intolerance.

Case report: AB is a 31 year old separated mother of two with a chronic history of Alcohol Dependence Syndrome. She was commenced on calcium carbimide medication under a regime of daily supervision by her community psychiatric nurse. However, she presented in a state of alcoholic intoxication on several occasions whilst she was known to be compliant with her medication. It transpired that KD also had a diagnosis of Coeliac disease which she had not previously revealed and was noncompliant with her gluten free diet.

Coeliac disease is characterised by an abnormal mucosa in the small intestine, induced by a component of the gluten protein of wheat. The disorder manifests itself by symptoms of malabsorption and the treatment is a gluten free diet. Our patient had been non-compliant with her diet for several years. The reason calcium carbimide did not cause an adverse effect when alcohol was ingested was possibly because the medication was malabsorbed in association with gluten intolerance.

This case underlines the need for a medical history in all patients prior to prescribing calcium carbimide medication.

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References

- Data Sheet. Lederele Laboratories North Road, Finglas, Dublin 11.
- 2. Silverstone T, Turner P. Drug Treatment in Psychiatry. London: Routledge & Kegan Paul, 1978.
- 3. Macleod J. Davidson's Principles and Practice of Medicine (14th ed).