## Correspondence

## Advertising in psychopharmacology

Sir: A glossy, beautifully produced pamphlet entitled *Highlights, Managing Depression with the Whole Patient in Mind,* arrived with my usual collection of postal freebles. It reports on a conference on this topic, the audience including 350 UK psychiatrists, sponsored by Lundbeck, the Danish CNS pharmaceutical company. The views of individual participants were invited on "the management of depression and the likely role of a new SSRI, Cipramil (citalopram) in the treatment of the condition".

This pamphlet raises important questions in relation to advertising.

Each of the 13 pages quotes an authority on depression, medical or non-medical. Eight of the 13 are from the UK, six of these professors; the remainder are from other European countries. Cipramil is mentioned by six contributors and prescribing information for the preparation is given at the back of the pamphlet.

Like many non-generalists I try to keep up with developments in psychopharmacology and am helped by advertising material. However, I expect this material to be orientated around the results of published research together with references so that the reader is in a position to judge the comparative effectiveness and unwanted effects, in the present example, between different SSRIs.

I appreciate it is difficult for those attending sponsored meetings to know how their views are to be represented. However, this example strongly suggests that participants should insist that an outline should be given to speakers as to how the papers are to be reported, especially in material aimed at a wide distribution.

SIDNEY CROWN London W1N

## Driving, insurance and SSRIs

Sir: Since the serotonin-specific reuptake inhibitor drugs (SSRIs) have less potential for interfering with driving ability than tricyclic drugs (TCAs) (Kerr & Hindmarsh, 1995), it might be expected that a patient on an SSRI would represent a lesser risk for motor vehicle insurance and pay a reduced amount.

I contacted five insurance companies on four separate occasions, requesting quotes which differed only in medical details. In the first, no medical problem was mentioned; in the second, a recent history of depressive illness with no treatment; in the third, treatment with amitriptyline; and in the fourth, treatment with fluoxetine.

All four companies were happy to give a quote under the initial criteria, though at very different cost. For the second quote each company wanted to know whether the driver had any restriction placed on their driving by the Driving and Vehicle Licensing Agency. Only one would insure a restricted driver.

Two companies would not insure an unrestricted driver with a history of mental illness whether treated or not. An approximately 15% increase in quote was given by a further two companies for an unrestricted depressed driver and presence or nature of treatment made no difference. Only one company made no change in quote for a depressed driver provided their licence was not restricted. No company made a reduced quote for patients on fluoxetine rather than amitriptyline.

This brief survey suggests that insurance companies do not feel that drugs with less potential for causing cognitive impairment reduce the risk of accidents, or are unaware of any differences. This is in spite of evidence for reduced accidents from the Medical Commission on Accident Prevention (Taylor, 1995).

This is unfortunate as, while by prescribing SSRI drugs we aid our patients' abilities, we do not save them money.

- EDWARDS, J. G. (1995) Depression, antidepressants and accidents. Brttish Medical Journal, **311**, 887–888.
- KERR, J. & HINDMARSH, I. (1995) Antidepressants and RTAs. Psychiatry in Practice, July/August, 6–8.
- TAYLOR, J. F. (ed.) (1995) Medical Aspects of Fitness to Drive. London: The Medical Commission on Accident Prevention.

Richard C. Barnes Rehabilitation & Special Care Directorate, Rathbone Hospital, Mill Lane, Liverpool L13 4AW

## Missing, possibly moribund, 'IQ'

Sir: I should be grateful if older psychiatrists and psychologists who remember 'IQ' would search their premises to try and ascertain his whereabouts. He was a valued colleague in the past and helped greatly in understanding intellectual functioning. His guidance was invaluable in legal issues and in such concepts as mental impairment.