conclude national enquiry of clinic practice in this
area and contract to set up some general guidelines as
to future practice.

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Carbamazepine in alcohol withdrawal

SIR: The article by Glue & Nutt (Journal, October
1990, 157, 481-490) on overexcitement and disinhibi-
tion was both interesting and informative. It did
however omit a discussion of carbamazepine in the
treatment section.

Carbamazepine has been shown in a controlled
trial (Malcom et al, 1989) to be of equal efficacy to
oxazepam in reducing the symptoms of alcohol with-
drawal. The authors postulated that this was due to
its ‘antikindling’ effects, although its action on pre-
synaptic adenosine receptors may also be important
(Durcan & Morgan, 1990). In addition, with an
increasing emphasis on out-patient detoxification
programmes (Collins et al, 1990), carbamazepine has
the advantage of a low potential for abuse or
dependency.

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structural programme for out-patient alcohol detoxification.
British Journal of Psychiatry, 156, 871-874.

adenosine and adenosinergic systems in psychiatric disorders.
Psychological Medicine, 20, 475-486.

double-blind trial comparing carbamazepine to oxazepam in
the treatment of alcohol withdrawal. American Journal of Psychiatry,
146, 617-621.

Culture as a confounding variable?

SIR: In their study of thought disorder in schizop-
ephrenics, manic-depressives and major depressives,
Cutting & Murphy (Journal, September 1990, 157,
355-358) were careful to compare their groups for
IQ, age, sex and attentional factors. The study
involved a judgement of the subjects’ answers to mul-
tiple choice questions regarding social knowledge
about their culture and general knowledge about the
state of the world. It is a shame that the care taken to
examine psychological differences is not matched by
an equal care to examine social differences between
the groups.

The important influence of culture in psychiatry is
increasingly recognised and debated (see Leff, 1990;
Littlewood, 1990). No mention is made in Drs
Cutting & Murphy’s study of the cultural back-
ground of the groups. This will surely have consider-
able influence on their judgement of a subject’s
knowledge of his or her own culture! If this question
naire is to be of general use its validity across
different cultures should be tested.

The difficulty in deciding which are social factors is
demonstrated by the post hoc change of category of
one question. From the ‘non-social’ category the
answer to the question, ‘What is the age of the oldest
person in Britain?’ will surely be influenced by the
social experience of the respondent. If they come
from a Nepalese culture this will be of a less elderly
population than a respondent from another culture.
The influences of culture must not be overlooked.

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new cross-cultural psychiatry. British Journal of Psychiatry, 156,
306-327.

Buspirone in detoxification

SIR: I wish to comment on Ashton et al’s study

The practice of prescribing additional drugs to aid
detoxification in drug-dependent individuals is a
controversial issue. The addition of one anxiolytic
agent (buspirone) to aid withdrawal from another
anxiolytic agent (diazepam) appears contradictory,
especially when buspirone’s data sheet specifically