

error, because he does not agree with me, of overstating his case and understating mine. What I wrote was: 'It can therefore be held that the objectives and aims and the methods of enquiry of those who study mechanism and those who study meaning are not antithetical, but rather they are complementary'.

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PREPARATION OF THE TRAINEE IN PSYCHIATRY IN MANAGEMENT

DEAR SIR,

It is surprising that the Memorandum on Educational Programmes for Trainees in Psychiatry (*Journal*, June 1971, pp. 693-5), excellent as it is, makes little reference to the administrative and managerial role which the trainee in psychiatry is being prepared to fulfil.

The specialist, to be successful, must be more than a highly paid technician. In the day to day treatment of his patients in hospital, the consultant is dependent on nurses, occupational therapists, social workers, psychologists and other members of the staff, whose functions have to be co-ordinated and whose attitudes may have to be modified if effective therapy is to be realized.

In few centres are optimal facilities and conditions obtainable. Hospitals are short of staff, and the demands for services nearly always exceed the resources. Hence the consultant needs to evolve strategies to utilize what is available to the fullest extent and to determine priorities. No specialist can work in isolation, and a willingness and ability to co-operate with colleagues, professional and lay, on a flexible basis is essential.

In the psychiatric hospital all influences which impinge on the patient have therapeutic or non-therapeutic effects. If the consultant is to be finally responsible and accountable for his patients' treatments he must know how to play an effective part in the overall administration and management of the hospital as an institution, the *raison d'être* of which is treatment of the patient.

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SMALL HANDWRITING IN SOME PATIENTS WITH ANOREXIA NERVOSA

DEAR SIR,

The syndrome of anorexia nervosa was defined by Gull in 1868. It occurs predominantly in adolescent girls and young women and is characterized by weight loss, food refusal and amenorrhoea. Russell (1970) has discussed the identity of this syndrome as an illness with its own peculiar psychopathology, and others such as Bruch (1966), Selvini (1965), and Crisp (1967) have drawn attention to characteristic psychological disturbances in these patients. Bruch stresses in particular that they frequently have a distorted body image, believing themselves to be obese when in fact they are emaciated.

We have observed peculiarities in the handwriting of patients suffering from anorexia nervosa. The handwriting in some cases is extremely small and neat. This is demonstrated in examples (a), (b) and (d) in Fig. 1. In each instance the handwriting is that of a girl with anorexia nervosa during the phase of her emaciation. Example (d) is of particular interest, as a specimen of the patient's writing before the onset of her illness is available (c), and the change which has occurred is well demonstrated. All the examples of handwriting are reproduced at their natural size.

It is suggested that in some patients with anorexia nervosa the handwriting is extremely small. This observation is perhaps of interest in view of what is known of the characteristic psychopathology of the condition.

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