time has been given to discussing fundamental clinical issues.

Melitta Schmideberg.

199 Gloucester Place, N.W.1. 20 January, 1965.

PSYCHIATRIC OUT-PATIENTS IN PLYMOUTH

DEAR SIR,

I refer to the paper by Kessel et al. (Brit. 7. Psychiat., (January, 1965), 10-17) in which the psychiatric out-patient service in the Plymouth area is analysed. They state that only "193 patients were referred by other hospital doctors" and on this evidence they conclude that "General physicians and surgeons do not refer most of the psychiatric patients they recognize". A statement of this kind is not, in my view, justified by the analysis undertaken. As far as I can gather, the out-patient clinics studied were staffed by psychiatrists who were based on a large mental hospital situated some 13 miles away. If, however, a similar investigation were undertaken at an out-patient clinic of a comprehensive psychiatric unit which is an integral part of a general group of hospitals (Silverman, 1961, 1962, 1963), I have little doubt that the percentage of referrals from other hospital departments would be found to be appreciably higher. Although I have not got figures readily available I can say that the percentage of referrals from other departments in this Group is higher than that implied in the Plymouth analysis.

References

SILVERMAN, M. (1961). Brit. med. J., ii, 698. — (1962). Ibid., i, 1478. — (1963). Lancet, ii, 587.

MAURICE SILVERMAN.

Queen's Park Hospital, Blackburn. 14 January, 1965.

DEAR SIR,

In discussing out-patient services we wrote: "Only 193 patients were referred by other hospital doctors. Priest (1) considered that 16 per cent. of the patients referred to his general medical out-patient clinic were suffering from psycho-neurosis and from nothing else. General physicians and surgeons do not refer most of the psychiatric patients they recognize." We could have made the argument plainer by adding that very many more than six times 193 patients were seen at medical and surgical clinics in Plymouth during the year under review and that we accepted Priest's findings as generally valid. The conclusion we drew seems to us to be very reasonable. Dr. Silverman does not find it justified. Perhaps this is because he suppressed half our argument by omitting the second sentence quoted above. Unless he has some reason to believe that Priest made a gross over-estimate (there is considerable evidence (2) to show that this is not so) he can readily investigate the matter for himself by obtaining the number of patients seen at all general out-patient clinics in his area and determining the numbers referred from such clinics to psychiatric out-patient care. We shall be exceedingly surprised if he comes to a different conclusion from ours.

Dr. Silverman says that "the percentage referrals from other departments" is higher in Blackburn. Because his figures are not readily available, a statement of this kind is not, in our view, profitable to discuss. We searched in vain the article (3) and letters (4, 5) cited as references; each of these is concerned with in-patient services. It is not clear whether "the percentage of referrals" mentioned by Dr. Silverman means the percentage of recognized cases that are referred, which is what we were discussing, or, considering all psychiatric referrals, the percentage that come from other hospital departments. This is a very different matter; in our series, as we reported, 15 per cent. of referrals come from other hospital doctors.

Nor do we know what Dr. Silverman means by "implied" in the last sentence of his letter. We did not imply: we investigated, we found and we reported. It could well be that, as Dr. Silverman implies, "a comprehensive department of psychological medicine in a general hospital" (3) has something to offer to general physicians and surgeons and their patients more than the traditional, wellorganized service provided by our colleagues, the senior psychiatrists in Plymouth. However, evidence would carry more conviction than mere assertion.

There is a small error in our paper. The percentages in Table II were based not on 1,258 but on 1,596 new patients.

NEIL KESSEL.

CHRISTINE HASSALL.

2 George Square, Edinburgh 8. 17 February, 1965.

References

1. PRIEST, W. M. (1962). Lancet, ii, 1043-1045.

- 2. For instance see—Shepherd, M., DAVIES, B. M., and CULPAN, R. H. (1960). Acta psych. et neur. Scand., 35, 518; MACLAY, I. (1965). Brit. J. Psychiat. 111, 34.
- 3. SILVERMAN, M. (1961). Brit. med. J., ii, 698.

4. — (1962). Ibid., i, 1478.

5. ---- (1963). Lancet, ii, 587.