CORRESPONDENCE

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Smoking

As a medical student who has been researching global trends in smoking, it was enlightening for me to read Professor Ghodse's editorial in the January 2007 issue and Dr Symonds' correspondence in the July 2007 issue on smoking and mental health. I did not know that there was a relationship between smoking and people suffering from mental health problems and both pieces make excellent points.

In the UK and other higher-income countries, decreasing the number of patients with mental health problems who smoke is an admirable goal; however, it is unlikely this will be the priority around the world. The smoking epidemic will disproportionately affect low- and middle-income countries. For instance, mortality from tobacco-related causes is set to rise by 2020 to an estimated 10 million people (Murray & Lopez, 1996), of whom 7 million will be in low- and middle-income countries (Peto et al, 1994). In such countries, therefore, the issues will not pertain to mental health specifically but how to prevent a future public health catastrophe.

As mentioned in Dr Symonds' correspondence, political action has to be taken to prevent this from occurring, but whether the Word Health Organization initiative, the Framework Convention on Tobacco Control (FCTC), is up to the job is debatable. It remains to be seen whether the FCTC can overcome its lack of enforcement mechanisms, the sometimes contradictory priorities of ratifying states (Assunta & Chapman, 2006) and the sheer economic and political power of the tobacco multinationals.

Aoife R. Singh

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Murray, C. J. L. & Lopez, A. D. (1996) Quantifying the burden of disease and injury attributable to ten major risk factors. In *The Global Burden* of Disease: A Comprehensive Assessment of Mortality and Disability from Diseases, Injuries and Risk Factors in 1990, and Projected to 2020 (eds C. J. L. Murray & A. D. Lopez). Harvard University Press.

Peto, R., Lopez, A. D., Boreham, J., et al (1994) Mortality from Smoking in Developed Countries, 1950–2000. Indirect Estimates from National Vital Statistics. Oxford University Press.

Medical student bursaries

I believe that your medical undergraduate readers would be interested to know about medical student bursaries in psychiatry instituted by the Royal College of Psychiatrists.

Traditionally, only 4% of those leaving medical school choose psychiatry as a career, while 10% would be needed to fulfil the UK's requirements for consultant psychiatrists with indigenous medical workforce. The College is taking steps to attract high-calibre doctors to the specialty and to foster good attitudes towards psychiatry.

Last year, as part of this campaign, the College, prompted by the Psychiatric Trainees Committee and the Board of International Affairs, introduced bursaries for medical students to take up electives in psychiatry or to undertake research. The bursaries, open to undergraduate medical students enrolled on a full-time course of studies in medicine at a medical school in the UK or Ireland, are offered for three types of activities:

- O to undertake an elective in psychiatry (five bursaries a year)O to undertake a period of research on a psychiatry-related
 - topic (three bursaries a year)
- O to prepare a research presentation (three bursaries a year). In 2007, five bursaries were awarded in category 1 (£1200 each) and three in category 2 (£1200 each).

Applications are now open for 2008 and should be submitted to the Dean by 29 February 2008. For further information please contact Miss Dela Goka on dgoka@rcpsych. ac.uk. It is hoped that medical students across the UK will avail themselves of these opportunities to further promote their career interests in psychiatry.

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Apologies and clarification

Siral It was both heartening and relieving to read Saeed Farooq's letter in the October 2007 issue regarding the recommencement of the publication of *Journal of Pakistan Psychiatric Society* since 2005. I extend my apologies to the editor for giving factually incorrect information and any inconvenience caused to readers.

I would just like to point out that the statement in my original letter was actually referenced from an article published in May 2006 in the *Journal of Pakistan Medical Association*. The reference was also quoted at the end of the article. Nevertheless, I should have made more effort to corroborated the information.

I would like to extend my congratulations to the journal and wish that it continues to encourage young researchers in the field of psychiatry in Pakistan.

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