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## reflection

### Mayer-Gross, Slater and Roth's *Clinical Psychiatry*

Alan Lee

How can one revisit such a monumental psychiatric text in fewer than 500 words? There is no scope for the critical epic that it truly deserves. When I was a psychiatric trainee, fresh out of Newcastle Medical School, it had seemed that there was no other psychiatry textbook in the world. The elegant undergraduate lectures from our Professor Sir Martin Roth had promised a credible scientific discipline of psychiatry that would enable new recruits to hold up their heads alongside those of the big beasts in other branches of medicine. And this UK blockbuster with its stellar co-authorship, firm foundations in empirical research, and an integrated scientific model of mental illness, reinforced the ideal, pointing the way towards an ever-brighter future of rational understanding, diagnosis and therapy. Here was a book you could carry with pride into the grandest of all grand rounds, and that would also sustain you on the grimmest of grim backwards.

But such dinosaurian claims to dominance found challenge in unexpected quarters. An early example for me was when the impressive statistical underpinning of the endogenous/neurotic distinction which Roth, in Newcastle, had offered as definitive evidence of two types of depression, met its match in Kendell's demonstration of a continuum, a Maudsley idea which seemed to have equal scientific credence. And there were many similar debates, in many domains, often revealing differing Aristotelian and Platonic prejudices.

The Titans were clashing, and in the ensuing twilight, the stage was preparing itself for an army of competing models of scientific truth, for the claims of the anti-psychiatrists, for the pluralism of social psychiatry and psychodynamics, for multidisciplinary teamwork and latterly for the much maligned understandings of postmodernism.

But the notion of a definitive, authoritative account of our discipline remained attractive and comforting for many. I remember slipping the book into my briefcase as a classic reference for a grand round at the Hammersmith Royal Postgraduate Hospital. It was a sword and shield against enquiries from the best critical minds of the medical establishment. My final epiphany came with the realisation that esteemed medical colleagues were not seeking an evidence-based treatise on receptor changes in depression, but were rather looking to a young psychiatrist to help them understand why their patient might be feeling so painfully guilty. So the much thumbed but stately volume of *Clinical Psychiatry* now sits quietly on its bookshelf. It feels dated and often seems irrelevant, not so much because the science has been superseded, but because like a prehistoric skeleton it belongs to a different age, one when the best psychiatrists appeared like giants, illnesses were illnesses, and science commanded the widest respect.

It is rarely opened, but when one does read it again one cannot but be moved by the sheer scope of its ambition, the beauty of its scientific prose, and the utter commitment of its authors that psychiatry should one day become an integrated and authoritative scientific discipline. Above all, the belief shines through the years that psychiatric patients should always be accorded all of the respect and dignity that their devastating illnesses so deserve.

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