titles of their books? On the other hand, we know many service users who feel stigmatised by terms such as ‘schizophrenia’, ‘borderline personality’ and ‘treatment resistant’.

Poole & Higgo seem particularly incensed by our positive engagement with certain strains of postmodernist thought. Our position is that one can argue for certain ideas, values and ways of life without resorting to the assumption that one has found the ‘truth’ or that one somehow has gained access to ‘objectivity’ that transcends a particular paradigm. We deny that this amounts to some sort of ‘anything goes’ philosophy. ‘Truth’ and ‘facts’ are indeed important, but they have very often been used by the powerful to silence the voices of the weak. The history of the 20th century is littered with disasters wrought by those who argued that they had science, facts and truth on their side.

Poole & Higgo go on to dismiss the role of the Critical Psychiatry Network. For some reason, they accuse the group of ‘self-righteous separation’. This is in spite of the fact that many individuals in the Network are active members of the Royal College of Psychiatrists and have participated positively in College meetings, including hosting a day-long seminar on critical psychiatry at the annual general meeting in 2005, as well as recent joint events with the philosophy, spirituality and transcultural special interest groups. Our editorial was written in response to a request from the Psychiatrist Bulletin editor and one of the authors (P.B.) gave one of the ‘prestigious lectures’ organised by the president, Dinesh Bhugra, last year.

The critical psychiatry network is made up of ‘ordinary mental health professionals’ who care deeply about their profession and who are committed to establishing connections with the service user movement in all its diversity. Individuals in the Network are also working to free our academic discourse from its toxic entanglement with Big Pharma. We assert that critical thinking: the ability to think outside the assumptions of one’s profession, to reflect critically upon its history and its practices, is not a threat to psychiatry, rather it is a tool through which the profession can begin to establish positive relationships with the developing user movement.


Use of on-site testing for illicit drugs in forensic settings

The paper by Ghali highlights the importance of training staff on the use of on-site urine testing kits. Although they are widely used in forensic settings where testing for illicit drugs forms an integral part of the overall management of patients, staff receive very little training on the interpretation of test results. There are four possible interpretations: true positive, false positive, true negative and false negative. A true positive test indicates that the person has used the drug, while a false negative test indicates absence of drugs in the sample. On the other hand, a false positive result can occur from the incorrect identification of the presence of substances, failure to acknowledge the chemical similarity of a prescribed medication with the drug of interest, and passive drug exposure. A false negative result may occur when the test’s cut-off level is set above the limit of detection of the drug or due to sample adulteration. A rigid interpretation of test results may have several undesirable consequences.

2. Dinesh Bhugra, last year.
3. Pat Bracken Consultant Psychiatrist and Clinical Director, West Cork Mental Health Service, Bantry, Co Cork, Ireland, email: Pat.Bracken@hse.ie.
4. Thomas Phil Professor, Institute of Philosophy, Diversity and Mental Health, University of Central Lancashire.

Review needs re-view

It is rather disappointing to see that the reviewer has not got the book’s author’s name correct. I agree that some books may be too long to be completely read for the purpose of a review, but I suppose every book’s author would want their name to be read in full and spelt correctly when a review is published. Being a good friend of the book’s author for a long time now, I can confidently say that Sree Prathap Mohana Murthy is a single name.