On what basis does Nasser bracket Szasz with Cooper and Laing? Szasz has always written from the position of right-wing libertarianism whereas Cooper and Laing were on the left wing of politics. Even linking Cooper and Laing in this way is suspect if we take Mullan’s (1995) record of conversations with Laing as accurate. Here Laing’s promiscuous interest in liberal thinkers contrasts with his portrayal of Cooper as a committee communist activist in exile.

Is there shared thinking between the three? One footnote apart, Szasz makes no mention of Laing or anti-psychiatry until Insanity: The Idea And Its Consequences (1987). Here he castigates Laing for claiming to be a doctor of non-illnesses. Laing appears to confirm Szasz’s antagonism when reporting one encounter to Mullan (op. cit.). Prior to the Mullan publication Laing and Cooper only mention Szasz in three footnotes.

Arguably Szasz, Cooper, and Laing can be grouped as critics of orthodox psychiatry but can hardly be characterised as sharing any kind of platform.

These comments may be dismissed as debating points, but my main interest is in important questions implicit in Nasser’s letter: Is critique of our work always to be experienced paranoically, as the barbarian at the gates? If self-critique by psychiatrists is to be routinely savaged should we dismiss out of hand the considered views of fellow professionals from other disciplines? Should we make the reflex assumption that representatives of MIND are engaged in a relentless moral crusade against all our profession stands for?


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Leave and detained patients

Sir:

“Many still believe, incorrectly, that a detained patient may go on leave without the completion of Section 17 leave formalities if they are only going out of the hospital grounds for a short while or if they are escorted by staff.”

“Section 17 applies to the shortest period of absence . . . .”

These quotations from the 6th Biennial Report of the Mental Health Act Commission (MHAC) are perfectly clear – as long as we know what “hospital grounds” are. The term “hospital” is finally, unhelpfully, defined in Section 145, of the 149 Sections, in the 1983 Mental Health Act; grounds are not. “What is a hospital?” asks MHAC Practice Note 3, 1994. The question may