

NEWS AND VIEWS

Psychiatry is Quite Respectable

THE heuristic problem of treating mental illnesses which are not associated with any organic defect is reason enough for the lack of a unifying theory in psychiatry and for the fact that psychiatric practice consists of a miscellaneous assortment of *ad hoc* techniques. The techniques fall into two groups—the physical methods of treatment and the various forms of psychotherapy, including psychoanalysis. In a recent broadcast (*Listener*, August 29, 1968) Professor Henry Miller argued that psychoanalysis is a subjective and uncontrolled method which should be laughed out of court, while a psychoanalyst held that physical techniques attack the symptoms and not the cause of mental disease. When the practitioners of psychiatry are so divided among themselves, the outsider may be forgiven for thinking that both Professor Miller and his opponent are right in what they say. Faith in the rational basis of psychiatry has not been strengthened by the comparison of psychiatric practice in Britain and America carried out by Cooper and Alexander (*British Journal of Psychiatry*, **113**, 625; 1967). Some 700 matched psychiatrists in Britain and New York were asked to state their preferred methods of treatment for various types of mental illness. The replies reveal an alarming difference in practice between the two countries. To treat severe obsessional reactions, for example, 35 per cent of the British and one per cent of American psychiatrists said they would use pre-frontal leucotomy. For endogenous depression, 84 per cent of British psychiatrists prefer electroplexy, 13 per cent anti-depressant drugs and one per cent psychotherapy; among their New York colleagues, the respective treatments are favoured by 44, 37 and 16 per cent. Only in the treatment of acute schizophrenia do psychiatrists on both sides of the Atlantic seem to agree that tranquillizing drugs are the best therapy—a unanimity which supports Professor Miller's assertion that the better treatments now available are due not to medical or psychiatric workers but "almost entirely to the pharmacological chemists of the Swiss and American drug houses".

The different practices advocated by British and New York psychiatrists are alarming to patients, whatever the reasons. That there are not only differences of theory but also differences of the social structure of medicine in the two countries may be one reason why the British psychiatrists tended to prefer physical techniques and the American those of psychotherapy. American patients have a financial inducement to prefer psychotherapy to prolonged physical treatment in a hospital, while in Britain the bias is the other way. Physical treatment may be free, but psychotherapy comes out of taxed income. But there are also marked differences of social attitudes towards psychiatry in Britain and the United States. For all the brave

protestations of recent years, there is still a hankering in Britain after the ancient view that mental disturbance is not so much a form of disease as a manifestation of the work of evil spirits.

Nobody should therefore be surprised that it is still respectable in Britain for distinguished men, doctors among them, to deny the intellectual foundations on which a great deal of psychotherapy is based. These are also the circumstances in which it was possible, just a few weeks ago, for a magistrate to accept a promise—fortunately not yet kept—to undergo leucotomy as reason why the penalties for larceny should be mitigated. It is nevertheless a growing scandal that the National Health Service has done so little to encourage change, and so much to foster the inanition in psychiatric treatment. The problem is not merely that there is an issue of principles to be decided; there are also patients to be cured.

ARCHAEOLOGY

Pottery in Highgate

from our Archaeology Correspondent

DURING the second half of the first century AD, a Roman pottery industry which almost certainly supplied London with simple domestic ware flourished in what is now Highgate Wood, a park owned by the Corporation of London. The site was discovered in 1963 by Mr A. Brown, who noticed several fragments of Roman pottery scattered on the floor of the wood, and in 1966 he and Mr H. Sheldon dug a trial trench which confirmed their suspicions. During the past two summers it has been excavated by volunteers under the direction of Mr Brown and Mr Sheldon. So far, two large and three small kilns have been excavated and traces of several others have been discovered. There is also a large rubbish heap of rejects, and claypits some distance away have been found, filled with broken pots. More than 2.5 tons of potsherds and baked clay have been recovered so far, together with a few bronze brooches, some glass and some fragments of imported Samian and colour coated wares. The only coin found has been dated at about 45 BC but does not help with dating the pottery.

From comparisons with pots found at other sites in London and the south-east, it seems certain that the pottery was in use between about AD 50 at the earliest and AD 150 at the latest. This estimate is supported by the fragments of Samian ware imported into Britain between about AD 54 and 138. The earliest Samian fragments were on the dump, but second century fragments have been found in trenches away from the kilns, which suggests that the kilns may have been used only in the last third of the first century.

The pots were almost certainly made from local clay. Pots made from Highgate clay in a simulated Roman kiln have the same texture and grey colour