

NATIONAL GROUP OF NEUROLOGY, PSYCHIATRY AND NEUROSURGERY: PRESIDENT'S REPORT*

B. CROWHURST ARCHER, M.D., *President*

I should like first to express our thanks to Dr. S. Berman, of Cape Town, who attended the Congress of the World Federation of Neurologists in Brussels last year as the official delegate of this Group, and will represent us again at the next international meeting in Rome. It is now open to the neurologists of our Association to join the World Federation if they wish. Dr. H. Moross, too, has just returned from representing us at 3 international conferences. Your Committee has also been in close touch throughout the year with the World Health Organization, the World Federation for Mental Health, and the American Psychiatric Association.

Important work is being carried on by the International League against Epilepsy. The Executive Committee has acted on your behalf until a sub-group of the League has been formed within our Association. In the meantime you are asked to join the League individually and to send your subscriptions direct to the Secretary-General, Haarlem, Netherlands.

Administrative Psychiatry

In view of the importance of administrative psychiatry it was decided to invite the following persons now holding administrative appointments outside the mental hospitals, who had previously practised psychiatry, to become honorary members of the Group: Dr. A. P. Bignault (Assistant Editor, South African Medical Journal), Dr. J. H. Cairns (Dept. of Hospital Services, Cape), Dr. G. de V. de la Bat (Med. Supt., Kimberley Hospital), Dr. H. J. Hugo (Director of Hospital Services, Transvaal), Dr. J. H. McLean (Med. Supt., Provincial Hospital, Port Elizabeth), Dr. H. Rompel (Vereening Hospital, Transvaal), Dr. J. G. Steyn (Med. Supt., Frere Hospital, East London), Dr. A. H. Tonkin (Secretary, Medical Association of South Africa), Dr. D. A. van Binnendyk (Dept. of Public Health, Saskatchewan).

Mental Hospital Service

Every effort has been made to encourage the medical officers of the Mental Hospital Service to join the Group, but only relatively few replies have been received to our letters. It should be appreciated that there is nothing in the By-Laws of the Medical Association requiring that members of this Group must be on the specialist register. By-Law 21 states: 'Specialist Groups of Members having a distinctive professional interest may petition to Council for recognition . . . I therefore appeal to all physicians of the Mental Hospital Service present to try and persuade their colleagues that we are here to help them and that they should join the Group and make it fully representative.'

Memoranda

During the year a number of memoranda have been submitted to the Executive Committee for their consideration and comment.

1. *The need for a Commission of Enquiry into present mental health facilities and future needs of this country.* The Committee agreed that as the findings of the last Commission of Enquiry had been published as long ago as 1937 and that little had been done to implement its recommendations, there was now a real danger, if they were implemented in their present form, that the old *uneconomic* policy of custodial care and 'bigger and better hospitals' would become further entrenched. The Committee felt that this old report failed to take into account the effect of modern physical methods of treatment and the success of early-treatment centres as a practical means of reducing the present universal overcrowding in mental hospitals. The Committee therefore decided that this matter should be made the subject of a paper to be read at our Scientific Meeting in order to obtain the opinions of the Members of the Group.

2. *Salary scales and conditions of service in the Mental Hospital Service.* On enquiry the Committee found that this question was

being investigated by the Department on account of the lack of suitable applicants for vacant appointments in the Mental Hospital Service. The matter was therefore considered to be *sub judice* but the Committee was prepared to reconsider the question after the findings of the Department had been made known.

3. *Better integration of Psychiatry into the general medical curriculum.* The Committee agreed that teaching in psychiatry should be on a par with that in other specialities and thus make for an all-round medical education. This implied not merely the spreading of the teaching over a longer period of the undergraduate course but also the integration of psychiatry with general medicine and a closer association of the teacher of psychiatry with teachers of the other several subjects. The Committee invited Dr. L. A. Hurst to read a paper on this subject but unfortunately, at the last minute, he had to decline on account of pressure of work. It is hoped that he will present this paper at the Medical Congress at East London next year.

4. *Diagnostic standards.* Some members of the Group have complained that their psychiatric diagnoses given on medical certificates, particularly when they are required by Government departments, have not been accepted. Investigation showed that there were misunderstandings on both sides about what was really required and the matter was referred to the Commissioner for Mental Hygiene for his advice. His recommendations were most helpful and a short memorandum on the subject will be circulated to the Group as soon as possible.

5. *Medical-aid scheme for doctors and their families.* On enquiry the Committee learnt that a pilot scheme was being worked out in the Transvaal. It was therefore decided to await developments, but in the meantime the Committee invited Dr. Alice Cox to read a paper on 'Neurosis in Doctors' Wives' which will provide an opportunity for a full discussion during our scientific proceedings.

6. *Correspondence.* In addition to these major issues a large volume of correspondence has been handled by the Hon. Secretary ranging from the intricacies of contract practice to problems relating to the admission to the specialist register.

College of Physicians, Surgeons and Gynaecologists

The first Faculty to be formed within the College of Physicians, Surgeons and Gynaecologists of South Africa was the Faculty of Neurology and Psychiatry.

The syllabuses of the Fellowship in Medicine with either Neurology or Psychiatry as a special subject, and the Diploma in Psychiatric Medicine, have been accepted by the Examination and Credentials Committee, passed by the Council of the College and submitted to the S.A. Medical and Dental Council for approval.

I am pleased to report that I have received an offer from a donor, who wishes to remain anonymous, of a capital sum of £10,000 in trust for the establishment of an overseas travelling fellowship in Psychiatry to be awarded at the discretion of the College every other year and valued at £500. I have also received a promise of a legacy of a further £10,000 for the College to establish bursaries to be awarded to selected outstanding graduates who wish to specialize in psychiatry but who otherwise might not be able to do so.

Medical Directory

Those of us who had to organize the Medical Congress last year in Durban experienced considerable difficulties on account of the lack of a comprehensive medical directory. I am glad to say that with our assistance and encouragement it is anticipated that the first medical directory in South Africa will be published early in the New Year.

Dr. Crowhurst Archer concluded with thanks to Dr. R. W. S. Cheetham (Hon. Secretary), Dr. M. Ginsberg (Vice-President) and Miss Myra Ovenstone (Committee Secretary).

* Delivered at the annual general meeting of the Group, Durban, September 1958.