

e-interview

Soumitra Pathare

Soumitra Pathare is a consultant psychiatrist at Ruby Hall Clinic, Pune, India. He trained at Seth GS Medical College and King Edward Memorial Hospital, Mumbai and Guy's and St Thomas' Medical School. His special interests include mental health policy and legislation and service development.

If you were not a psychiatrist, what would you do?

Fly a Tiger Moth, run a restaurant on a beach... the possibilities are endless! In all probability though I would have just wasted my life doing little. I am not terribly good at anything except listening, so fate has been kind enough to guide me towards psychiatry.

Do you feel stigmatised by your profession?

I never feel stigmatised, except when I am on a flight and the person in the next seat insists on knowing my profession, and once told proceeds to ignore my existence for the rest of the flight.

What are your interests outside of work?

It depends how you define work. I have never regarded psychiatry as work... apart from the work of what we call activities of daily living, I live to enjoy psychiatry, books, music and good food.

Who was your most influential trainer, and why?

Professor Dinshaw Doongaji at King Edward Memorial Hospital, Mumbai, India. He has been a role model for a generation of psychiatry trainees in Mumbai. His emphasis on detailed clinical observation, the intellectual rigour that he insisted on when making a diagnosis and formulating treatment plans, and his willingness to be guestioned by trainees in the spirit of scientific enquiry have left an indelible mark. I sometimes feel it unfair that one man should be endowed with such intelligence and analytical ability. He is nearly 77 now, continues with his clinical practice and is as hungry for knowledge as ever. He is a demanding teacher and is still hopeful of making a decent clinician of me yet!

What job gave you the most useful training experience?

I worked for ProfessorTom Craig in the Rehabilitation Unit at StThomas' in 1992, looking after people who had been resettled in the community as part of the closure of Tooting Bec Asylum in South London. He taught me the art of practising clinical psychiatry and gave me the opportunity to develop my research skills. I was



very affected by his humanism, his warmth and his ability to get the best out of people. I owe him a huge debt for taking a personal interest in developing my skills and my career. I regret I have not repaid him by living up to his expectations.

Which book/text has influenced you most?

The Bhagwad Gita — it changed my life. The clinical book which has really influenced me has been Richard Warner's Recovery from Schizophrenia: Psychiatry and Political Economy

What part of your work gives you the most satisfaction?

Helping people overcome disabilities, and tinkering with systems of service delivery to improve their efficiency.

What do you least enjoy?

The pressure and sheer volume of clinical work and responsibility that one has in a country like India. I have still not adjusted to being on call 24 hours a day, 7 days per week. One is inundated with patients who may have travelled long distances (anywhere up to 200 miles which might take 5–6 hours of travel each way) to see a psychiatrist . . . this leaves me exhausted with little time to do the things I would really enjoy doing and builds up a lot of anger and frustration. Many of my ex-colleagues in the UK would be horrified with the kind of resource constraints that one has in a country such as India.

What is the most promising opportunity facing the profession?

There appears to be a greater willingness in society to accept the need to address mental health issues.

What is the greatest threat?

Mental health professionals' ability (or rather the lack of it) to engage with civil society. All too often, our communities find

our language unintelligible. This reduces our ability to influence the debate about important social policies affecting people with mental disorders.

What is the most important advice you could offer to a new trainee?

Read your books and listen to your patients . . . and when you are done with that, party hard!

What single change to mental health legislation would you like to see?

Mental health legislation needs to take a human rights approach. Protecting the rights of vulnerable people needs to be the centrepiece of mental health legislation.

How should the role of the Royal College of Psychiatrists change?

I am not really qualified to comment on that . . . although I am a member of the College, being thousands of miles away in India the College has little relevance to my professional work. The College has a UK view, and many would say rightly so, however I feel that the College can provide international leadership. To do this the College will need to take a more active interest in international affairs. There may be times when the College will find that the global perspective is at odds with the needs and perspective of its UK members. For example, 'brain drain' from low- and middleincome countries to the UK is a matter of great concern to those of us who live and practise in those countries. The College could and should highlight the damage caused to already disadvantaged communities by the covert and overt encouragement to doctors to move to the UK by NHS and UK government policies.

What is the future for psychotherapy in psychiatry training and practice?

Above all, psychotherapy is the art of listening – to ourselves and to others. Psychiatry cannot be practised without listening . . . so yes, psychotherapy is and will remain a cornerstone of psychiatric training and practice.

What single area of psychiatric research should be given priority?

We have very effective interventions for many mental health problems. We need to develop models to make these effective interventions which are accessible to the vast majority of people, especially those living in low- and middle-income countries.

Dominic Fannon

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