

# obituary



## George Wallace Fenton

Formerly Emeritus Professor,  
Department of Psychiatry,  
University of Dundee

George Fenton was born in Londonderry on 30 July 1931 and brought up in Londonderry and Ballymena in County Antrim. He was educated at the Ballymena Academy, where he excelled. George had hoped to become a historian, an interest that he maintained throughout his life, but his mother was very keen that he and his younger brother, Stanley, should go into medicine. Both the boys joined the medical faculty at Queen's University, Belfast, and did extremely well. George obtained undergraduate prizes in bacteriology and pharmacology, and even at that young age demonstrated the intelligence, drive and determination that were to take him to the top of his profession. He qualified in 1954, and showed an early interest in neurology and psychiatry, studying in Belfast and London. He obtained his DPM in 1957, his MRCP from Edinburgh in 1960, with neurology as his special subject, and his MRCP from London in 1963. He continued his academic training at the Institute of Psychiatry and the Middlesex Hospital Medical School, where he came under the influence of Professor Sir Dennis Hill, and developed an interest in the, then, young science of electroencephalography. In 1967 he was appointed Consultant Psychiatrist to Dennis Hill's Professorial Unit at the Maudsley Hospital, and Senior Lecturer in the Department of Psychiatry at the Institute of Psychiatry.

The following year he was appointed a consultant clinical neurophysiologist to the Maudsley Hospital, and Honorary Consultant Neurophysiologist in Research at the EEG Department at Broadmoor Special Hospital. He remained a clinician in this department for more than 30 years, until his death, and it was this contact that awakened George's interest in

forensic psychiatry, and stimulated him to write a number of key papers on the relationship between violence, mental illness and neurophysiology.

In 1969 he became consultant neuro-psychiatrist in charge of the Epilepsy Unit at the Maudsley Hospital. He obtained a grant from the Department of Health to start Windsor House, a non-medical hostel for patients with epilepsy, then an innovation. His interest in neurophysiology continued and together with Maurice Driver he was involved in expanding the neurophysiology department into a modern powerful force. This was a very creative time in George's career. He wrote a number of papers on epilepsy and psychiatry that still provide the gold standard for young trainees. His academic and research interests were broad, ranging from the neurophysiology of sleep, through violent behaviour and the law, to the psychiatric morbidity of epilepsy and its treatment, and evoked potential studies in mental illness.

As George's academic stature continued to grow, it was no surprise when in 1975 he was offered the Chair of Mental Health at Queen's University Belfast and he was able to return to his beloved Northern Ireland. Professionally, his time in Ireland was quite outstanding. Among his achievements were the re-organisation of the training course for psychiatric registrars and also the establishment of a very close relationship with his psychiatric colleagues in the Irish Republic.

George's early experience of the religious conflict in Northern Ireland had made him reject all organised religion and it saddened him that he could see no easy answer to the sectarian violence and division. After a few years he realised that he was not entirely happy in Northern Ireland, at least partly because of the view that some of his colleagues held of the province: friends and colleagues from other parts of the UK were reluctant to come and take part in courses because of the dangers they perceived, and professionally he was becoming increasingly isolated. He now looked towards the mainland for a chair and in 1983 accepted the Chair of Psychiatry at the University of Dundee, and the post of consultant psychiatrist to the Tayside Health Board. Here he again built up a strong academic psychiatric unit with excellent teaching and research programmes, and obtained well over £350 000 in research grants. His interests included dementia, learning disability in epilepsy, schizophrenia, neurosurgery for psychiatric disorder, Alzheimer's disease, cognitive-behavioural therapy, addiction and primary care psychopharmacology. During his life

he published well over 300 major academic papers.

George was heavily involved in undergraduate and postgraduate education. His programme for medical students was particularly innovative and far-sighted and incorporated one of George's main concerns, that in order for medical students to become humane doctors, they should be taught to understand and deal with their patients' emotional distress.

George was one of the Founder MRCPsych in 1971. He was made FRCP, Edinburgh, in 1974 and FRCPsych in 1976. In 1992 he was made FRCP. He served on a number of committees of the Royal College of Psychiatrists, and was a Membership Examiner (1981–1986), a member of the Examinations Sub-Committee (1985–1991), a member of the Fellowship Sub-Committee (1985–1991), a member of the Court of Electors (1985–1991), a member of the Advisory Committee for Medical Establishments (1990–1994) and a member of Council (1993–1997). He served as Deputy Regional Adviser, Northern Ireland region, and was Adviser to and a member of Northern Ireland Council for Postgraduate Medical Education from 1978–1983. From 1987–1992 he was the College Regional Adviser for the Eastern region of Scotland, Chairman of the Distinction Awards Committee from 1991 to 1992 and Senior Regional Adviser from 1993 to 1996. He was a member of the Regional Postgraduate Medical Committee (1987–1992) and he was Chairman of the Scottish Division of the Royal College of Psychiatrists. In 1990 he became President of the Psychiatric Section of the Royal Society of Medicine in London, and was a member of Council from 1987 to 1992.

Outside medicine his interests were wide and varied. In his youth he was a keen member of the Boy Scout movement and gained the King's Scout award. At University he was a rowing blue, and his interest in rowing, and later in sailing, continued for the rest of his life. He had many sporting interests, though perhaps his greatest passion was cricket. He was at heart a committed socialist, who took a great interest in politics both at home and abroad. A renowned and sought after speaker at international meetings, he rarely missed an opportunity to travel. George was an avid reader, and extremely well-read. His appreciation of music was diverse, and he enjoyed Scottish pipe bands, Gaelic vocal and instrumental performances, classical music and opera; he also greatly admired the talent and virtuosity of his diva, Cleo Laine.

Throughout George's successful academic career he remained at heart a



clinician. His main characteristics were his humanity, his warmth and his care for the students, patients and staff with whom he came in contact. He believed in the need for people from all walks of life to reach their potential and was very

generous with his time in giving them advice and constant encouragement. He was a wonderful friend, who always had time to listen. He was invariably kind, courteous and gentle, and it was these qualities that endeared him to all who met

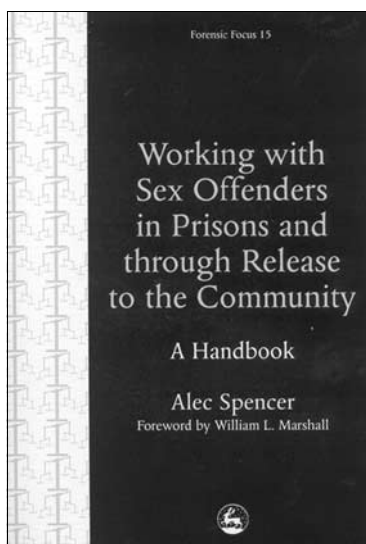
him. He leaves a widow, Nini, a son, Mark, by an earlier marriage to Sylvia Hepton, a stepson Bruce and a stepdaughter Emma and his brother Stanley.

Peter Fenwick

## reviews

### Working with Sex Offenders in Prisons and through Release to the Community: A Handbook

By Alec Spencer. London & Philadelphia: Jessica Kingsley Publishers. 1999. 252 pp. £17.95 (pb). ISBN: 1-85302-767-7



Let me first come clean. I remain to be convinced that the sex offender treatment industry as currently organised can justify its existence. I accept the need to do something to reduce the risk of re-offending. Nevertheless, sex offenders are a group *par excellence* where long-term follow-up is necessary because the risk of recidivism remains for many years. Alec Spencer reinforced my prejudices to a degree by describing a sophisticated treatment programme in Peterhead Prison, Scotland, with a maintenance programme to continue this work throughout the sentence, and then what? How will any gains be maintained in the community? To be fair, in the two chapters on 'bridging the gap' the author does tackle these issues, but the effort put into the Sex Offenders Treatment Programme (STOP in Scotland, but SOTP in England and Wales) cannot be supported on the evidence available. It would be surprising if their own treatment

programmes in a locked institution could have a significant impact without similar (rather than the current patchy provision) systems in the community for prison programmes to plug into.

Nevertheless, although I did not think I would like the book, I was won over. I liked the style and I liked the layout, with a summary of key points after each section. The section on offenders (particularly female offenders) was informative. At times there was an uneasy shift of focus from Peterhead Prison to a national perspective, which was not always convincing. The author also slips from evidence to opinion rather too easily, sometimes restating opinions as though they are facts. I was mistaken in thinking that this book would only interest those engaged in this work. There are excellent sections on child visiting, the victim's perspective and on pornography in prison, which will be of interest to staff of all disciplines based in secure forensic in-patient units. These services have struggled with these issues (and Ashworth Hospital comes to mind here) and I agree with all that the author says on these topics. Why cannot secure hospital units also be pornography free zones?

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### Letters From the Clinic. Letter Writing in Clinical Practice for Mental Health Professionals

By Derek Steinberg. London & Philadelphia: Routledge. 2000. 130 pp. £15.99 pb. ISBN: 0-415-20504-2

We all send, read and receive acres of letters about our patients and clinical work, indeed writing and reading letters could even be said to take up the majority of the time of senior psychiatrists. Yet it's amazing how little discussion about the process of letter writing exists, and how impoverished the literature is on improving clinical practice through the

more deliberate use of letters. The primary point of this unique book is the power of words, and the value of choosing thoughtfully what we say in our letters.

There was a tradition in the professional unit at the Maudsley Hospital where a group of registrars would be required to read each other the letters they had written that week, not, as would firmly be pointed out, for the purposes of mutual congratulation. The issues for discussion included the internal logic of letters, their ability not just to inform, but to persuade and convince the receiver to collaborate in a shared therapeutic perspective of the problem.

This book suggests a reappraisal of the use of letters in clinical practice and argues their potential power has been underestimated to improve relationships between professionals and service users. Indeed, given how closely letters are tied in the popular imagination with the deepening of relationships, and how emotionally powerful it is to receive a letter from a friend or relative, it is odd psychiatrists of all professionals have neglected their potential.

A particularly intriguing suggestion from the book is the use of the letter to the patient to summarise and clarify what had happened in a just ended session with the therapist as an aide to heightening the therapeutic impact of the clinical encounter.

