creative solutions for recruiting a higher proportion of both male and female graduates into psychiatry.

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Internet peer review

Sir: I was interested to read Dr Mortimer's letter in this month's *Psychiatric Bulletin*. She puts the case for Internet peer review very strongly. Internet peer review is a very successful idea and has been used in the International Journal of Psychiatry, *Psychiatry On-Line*. We have been publishing entirely Internet peer reviewed papers and articles since 1994. Your readers can find us on the following URL:
http://www.priory.co.uk/journals/psych.htm

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Disulfiram implantation

Sir: We describe the results of disulfiram implantation over a five year period within clinical practice at an alcohol service at a district general hospital.

The pharmacological basis of usage of disulfiram lies in its action on alcohol dehydrogenase preventing breakdown of acetaldehyde in the metabolism of ethanol. Early uncontrolled studies of disulfiram implantation showed significant improvement in abstention and social functioning (Malcolm & Maddens, 1973; Whyte & O'Brien, 1974). More recent placebo-controlled studies have consistently shown no differences between placebo and active treatment groups with regard to a wide set of alcohol-related variables (Borg *et al*, 1985; Johnson & Morland, 1991).

We reviewed the case notes of all patients (n=12) treated with disulfiram implants at Princess Alexandra Hospital between 1989 and 1994. All patients were seen by one psychiatrist (OJD), and implantation under one surgeon (MWM). Patients were encouraged to take oral disulfiram for 8 to 12 weeks prior to implantation. They were given an explanation of the mode of action of disulfiram before the medication was prescribed and gave informed consent. The 'challenge' approach was not used. Implantation took place under local anaesthetic, placing 6 tablets of disulfiram 100 mg into each iliac fossa using a trochar and cannula via a sub-umbilical incision.

Baseline data showed that the number of previous alcohol-related admissions ranged from 0–20 with median value 3.5. The patients with implants were at the more severe end of alcohol dependence considering the length of drinking prior to implantation (range 5–32 years, median 19), brief lengths of abstinence (range 0–24 months, median 6), amount (range 50–560, median 155 units/week) and frequency (range 3–7 days per week, median 7) of consumption.

Comparison, prior to and post-implant, showed reduced consumption and increased abstinence within the post-implant group. The liver indices also showed improvement. Analysis using Wilcoxon signed ranks tests showed significant decrease in units being drunk per week ($P<0.02$) and in number of days spent drinking per week ($P<0.03$). The outcome, to date, of this sample revealed six patients abstinent, four still drinking with little change in consumption, one had medical complications and one dead of an accidental overdose.

This sample has apparently benefited from disulfiram implantation, with half the patients having a good outcome. There were no skin complications noted. The criteria for selection for implantation were not constant, as seven patients requested implantation and it had been offered to the remainder when compliance with oral Antabuse was difficult. There is little doubt that implantation has a powerful placebo effect which is extinguished if patients are aware of a chance of receiving placebo (Johnson & Morland, 1991). The question remains whether it is ethically appropriate to use minimal amounts of disulfiram within an inert carrier to achieve similar results, if so then this should be offered to those requesting this treatment.

BORG, S., HALLDIN, J., KYHLHORN, E., *et al* (1985) Results from a placebo controlled multicentre trial. In *Pharmacological Treatments in Alcoholism: Withdrawal and Aversion Therapy*, pp. 56–88. Uppsala, Sweden: National Board of Health and Welfare.

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Terminology

Sir: Can I invite you to withdraw your apology in relation to the word "dement". Although it is always more politically correct to preface a group of patients by the phrase "patients suffering from