

The Dean reported on the College Diploma and said that Professor Scott would be bringing options to a meeting of the Court of Electors in the Autumn.

The piloting of a College Log Book owned by trainees was underway, and the Education Committee was presently reviewing its remit in the light of changes to Postgraduate education.

He also reported on progress with the monitoring of the recommendations of the earlier Rawnsley Report on Training and the Provision of Services for Ethnic Minorities.

### Editor's Report

The Editor, Professor Greg Wilkinson, reported that there were currently about 4000 paid subscriptions to the *British Journal of Psychiatry (BJP)*, 3000 of which were from overseas. There were plans to expand on an international level although there was a degree of competition with other journals of a similar type being published abroad. He said it was important that only the highest quality of work was published. The targets set for response time had now been achieved: a decision would

normally be given within three months to individuals submitting papers, and papers would be published on average six months after acceptance. In the future, it was planned to promote the journals and books on the internet, and to develop an electronic publishing programme.

The Editor thanked Dr Kerr for his continuing excellent work for the *Psychiatric Bulletin*, the *Journal of Trends of Psychiatric Practice*.

Professor Wilkinson congratulated Professor Sims, the Editor of *Advances in Psychiatric Treatment*, the *Journal of Continuing Professional Development (APT)* on the success of *APT* with over 1000 subscriptions. There were plans to expand the size of this journal from four articles to six per issue.

Book publications had been very successful this year, especially the *College Seminars* series. A textbook of general adult psychiatry is planned for publication next year with Professor Wilkinson and Dr G. Stein as editors.

Professor Wilkinson concluded by emphasising that the *BJP* will continue to reflect the work of psychiatric specialities.

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## Election and introduction of Honorary Fellows

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The following were unanimously welcomed to the Honorary Fellowship

### Professor Chester M. Pierce (introduced by Dr Thomas Bewley)

Professor Chester Pierce is an American born in 1927. He is a member of a family of high achievers, his brother being a member of President Reagan's Cabinet for eight years. His father, at the age of twelve, was sent by himself to New York from the Southern States to earn his living. This he did initially on the staff of the Plaza Hotel, and then, for the rest of his life, at the Glen Cove Country Club. By moving his family, with difficulty, to a white area with good public schooling, he ensured that they benefited from an excellent education, which led to Chet Pierce becoming a student at Harvard. After graduation Professor Pierce considered training as a surgeon, but

was advised that his prospects, being black, were abysmal. He therefore trained as a psychiatrist in Cincinnati. This was interrupted by two years in the US Navy (where he had further psychiatric training). He later returned to Cincinnati as a member of the Faculty. He then moved to Oklahoma for eight years, before moving to his present post at Harvard, in 1965. He holds a unique post being a Professor in three Faculties: Medicine, Public Health and the Graduate School of Education. He is also Consultant Psychiatrist to the Massachusetts General Hospital and the Massachusetts Institute of Technology.

Professor Pierce's research has encompassed the effects of artificial and extreme environments. This interest started when he was in the Navy, where he was initially involved in recruiting people to work at the South Pole and in submarines. His biomedical research on humans and penguins in Antarctica

led to Pierce's Peak being named after him in 1968, and later to Honorary Fellowship of the Royal Australian and New Zealand College of Psychiatrists. He remains active with the National Research Council Polar Research Board, The National Commission on Arctic Research and the NASA Committee on Life Sciences and Microgravity Research. He considers that such work on extreme situations helps in the understanding of the damaging effects of inner city ghettos on development. His life, however, has not been entirely without setbacks, and he has not been afraid to publish the results of unsuccessful work. One of the most unusual failed neuro-psychopharmacological experiments that I know of was his account of how he killed a male elephant with a homeopathic dose of LSD.

Chester Pierce remained a general psychiatrist, who was much involved with the social, economic and environmental factors which retard development and cause psychological damage. This led to another of his interests, his involvement with television—Action for Children Television and the Children's Television Workshop (Sesame Street, Electric Company). He has always been acutely aware of the damaging effects of prejudice on the provision of basic education for the most deprived and has been concerned through governmental and non-governmental agencies to remedy this handicap for a sizeable minority of the population. He has researched, written and published widely and has been continually in demand as a consultant to many individuals and agencies, from the Surgeon General of the US Air Force to being a Senior Consultant to the Peace Corps. He has been President of the American Board of Psychiatry and Neurology and Founding President of the Black Psychiatrists of America. He has already received many honours including honorary doctorates of science and the Masserman award of the World Psychiatric Association.

Professor Pierce has had a much wider range of interests than many psychiatrists and has brought distinction to the many roles he has played. As an Afro-American he has been a role model, mentor and spokesman for many ethnic minority groups and is widely acknowledged to be an intellectual leader on the North American continent. By electing him to the Honorary Fellowship, the College adds a very distinguished American to its roll of Fellows.

### **Dr Alec J. Coppen (introduced by Professor Eugene Paykel)**

Alec Coppen is the doyen of British biological psychiatrists, a long standing Fellow of this College, and an international leader in psychopharmacology and biological psychiatry.

He was born in London and educated at Dulwich College, nestling south of the slopes of Denmark Hill and perhaps absorbing the spirit of psychiatry in adolescence. He qualified in medicine at Bristol in 1953, at which University he obtained an MD five years later and in due course a DSc. He did indeed return to South London for his psychiatric training as Registrar and Senior Registrar at the Maudsley Hospital.

His talent for biological psychiatry was by now apparent. He undertook studies at the Maudsley and at the MRC Neuropsychiatry Research Unit. He then established the MRC Laboratories at West Park Hospital, building his research unit to wide international renown and a constant stream of visitors from abroad. His retirement from it in 1988 produced little evident diminution in activity.

Dr Coppen's particular research interest has been in the affective disorders and throughout his career he has been at the forefront of biological research in this area. His early work described the existence of electrolyte disturbances. Subsequently, he played a major part in establishing the role of serotonin mechanisms in depression. He has contributed over a wide range of further areas in the biological psychiatry of affective disorders, including pharmacological approaches to psychopharmacology, the role of lithium in long-term treatment, abnormalities of folic acid metabolism, disturbances of cortisol, the dexamethasone suppression test and other aspects of endocrinology. His papers have extended more diversely into psychosomatic studies, personality and the premenstrual syndrome. His 1967 paper in the *British Journal of Psychiatry*, 'The Biochemistry of Affective Disorders', became a citation classic. His studies have always been at the growing forefront of the field. His lithium clinic was a model for many others in this country and abroad. He has published more than 340 papers and seven books.

His early work inevitably led rapidly to increasing national and international recognition and roles. His unit became a collaborating WHO Centre in 1974. He was Chairman of the Research and Clinical Section of the Royal

Medico-Psychological Association before the establishment of the Royal College of Psychiatrists and later was a College examiner. He was a distinguished President of the British Association for Psychopharmacology and played a formative role in its genesis and the establishment of its scientific standing. He was Chairman of the Biological Psychiatry Section of the World Psychiatric Association. His long standing activity in the CINP, the major international psychopharmacology organisation, culminated in his being President from 1988 to 1990.

I can attest personally to his kindness to younger workers and to the warmth of friendships generated by him and his wife Gunhild, who is Swedish in origin and has a PhD in Literature. Their son is a Consultant Pathologist in South London.

Alec Coppen has received many honours. He is Corresponding Member of many national psychiatric bodies, a Distinguished Fellow of the American Psychiatric Association, an Honorary member of psychiatric and scientific societies in Mexico and Europe, a Freeman of the City of London. He received the Anna Monika Prize for research in depression in 1969, and the European College of Neuropsychopharmacology Eli Lilly Award in 1992. It is fitting that we should honour him for his achievements as the world has. I have much pleasure in presenting him to the College as an Honorary Fellow.

### **Dr Raymond Sadoun (introduced by Professor David Goldberg)**

Raymond Sadoun is beyond question France's premier psychiatric epidemiologist, having served as Research Director at INSERM between 1968 and 1990, during which time he was Head of the Research Unit for the Epidemiology of Mental Disorders for some 15 years. Psychiatric epidemiology hardly existed in France at the time, and Raymond created his country's first research unit. During this time he produced national statistics for mental disorders, and wrote papers on the basic epidemiology of psychotic states and depression. His work for INSERM allowed him to participate in part-time clinical activities as well, and he was consultant at the out-patient department of the University Clinic of Sainte-Anne, a position he held until 1990. His papers therefore include works on Creutzfeldt-Jakob disease, amphetamine psychosis, and *folie à*

*deux*. Towards the middle period of his life, pictures of the brain and clinical case descriptions give way to the serious business of large tables of numbers—with analyses by age, sex and region of France for the various psychiatric diagnoses. However, he was never content with merely enumerating facts, and his later papers have been concerned with sociological aspects of psychiatric care, and social networks and their place in the promotion of mental health. His papers thus cover a broad range of scholarship. More recent honours include his Presidency of the International Federation of Psychiatric Epidemiology, and his nomination as *Chevalier de la Légion d'honneur*.

However, there is another reason for our College to honour Dr Sadoun. He is a true Anglophile. He is in love with our people, our language; yes, even our cooking. There is no greater gastronomic delicacy than a fruit jelly. Raymond first came to love us before the war, when he spent three summers in Folkestone. He stayed with a childless couple called Mr and Mrs Swoffer, who came to regard him as a son. He was to come back to us during the war, by a roundabout route. An anti-Semitic edict of the Vichy government had denied him his place in public hospitals, and by 1943 all boys of 20 were being sent to Germany. Raymond joined 'Combal', the resistance movement and worked in it for over a year. When it became impossible to ensure his safety he was smuggled out of France by 'Bourgogne', an organisation that repatriated Allied airmen. Interned at Pamplona, he used Swoffer as his *nom de guerre*. After his experience of Spanish prisons he was liberated by a strange transaction in which he was exchanged for two sacks of wheat, and thus fell into British hands in Gibraltar. Within days he was embarked on a troopship to England, which was twice attacked from the air and twice by submarines during the eight day crossing to Liverpool. We also interned him, but not for long—and within two weeks of arrival he joined General de Gaulle's Free French Forces. He was first in Camberley and later worked in London as a medical non-commissioned officer, engaged in underground activities. In London he was struck by what he describes as the extraordinary discipline, energy and courage of ordinary people.

And in London two great things happened: he met up with his brother, and met his future wife. His brother had also been a member of 'Combal', and arrived in London at the same time as Raymond. Together in Occupied France

they had secretly listened to the BBC "*Ici Londres, les Français parlent aux Français*". Now they were both able to join '*la France libre*'. His future wife had been in England since 1940, when she arrived from Brittany on a ship carrying British soldiers, and volunteered for the Free French Forces in what was then the Capital of the free world.

Raymond is the son of a general practitioner. At the end of 1945 he restarted his medical studies after a three year gap, and took up the study of psychiatry in 1950 as an *Interne en Médecine des Hôpitaux psychiatriques*, becoming a Doctor of Medicine and Specialist in Neuropsychiatry three years later. One stepping-stone to INSERM was a two year spell as a *Chef de Clinique*, roughly equivalent to our lecturer, at the Faculty of Medicine in Paris.

Raymond is a great fighter. His greatest fight was of course for France; but he has also fought forces of reaction within French epidemiology, and fought for France to use a classification of mental disorders that would allow it to communicate with the rest of the world. Director of a WHO Collaborating Centre, he has carried out literally dozens of consultancies for the World Health Organization, and is proudest of the work carried out with Michael Rutter on the triaxial classification of mental disorders. Raymond is well known for his kindness to people, and for his unremitting helpfulness to younger people to develop their ideas and advance their careers. Wherever psychiatric epidemiologists meet, Raymond is to be found: following the latest developments with a quizzical interest, and always ready with a *mot juste*.

### **Professor Gerald Russell (introduced by Professor J. Hubert Lacey)**

To psychiatry's inestimable gain, Gerald Russell was deflected from his first career choice of neurology by the influence of Aubrey Lewis. It happened when Gerald – then a young research worker – spent six months at The Maudsley as a part of his neurology training. The experience was unsettling and a difficult decision followed as Gerald transferred his MRC Clinical Fellowship from The National, Queen's Square, to the Institute of Psychiatry.

It was not until the sixties, and as a Senior Lecturer at the Institute, that Gerald became intrigued by anorexia nervosa, and then by a circuitous route. At that time, there was much talk of the causes of weight fluctuation in depressives which Gerald felt was secondary

to appetite change. He received a grant from the Astor Foundation to study, in the United States, research methods for investigating disorders of appetite. On his return to the United Kingdom, Gerald felt that his researches would benefit from a study of anorexia nervosa patients rapidly gaining weight in the metabolic unit. Dennis Leigh obliged with a patient sample. The rest, as they say, is history.

Gerald Russell is one of the most distinguished psychiatrists of his generation. He was Professor of Psychiatry and Head of the Department of Psychiatry at the Institute. He was formerly the first Professor of Psychiatry at the Royal Free Hospital School of Medicine, where he built up a strong department. He has also been Dean of the Institute. He is a Member of Council of the Royal College and has served on a number of Royal College committees, including the Education Committee and the Joint Committee on Higher Psychiatric Training. He has pushed successfully for the establishment of the Special Interest Group on Eating Disorders and these endeavours have now come to fruition. He has received numerous international awards, including those from the American Psychopathological Association and the American Association for Marriage and Family Therapy. He has given outstanding service to the University of London and to the National Health Service over many years.

There are many aspects of Gerald which I would like to touch upon: his courtesy, his modesty, his dual commitment to clinical practice and clinical sciences, his tenacity in following up ideas, his respect of and interest in differing ideas from his own, his stubbornness on committees when he knows he's right, exceeded only by his stubborn intolerance of those who do not put their patients first.

I suppose what has always struck me is the extent to which people do not know Gerald. People often get a one-sided view but as they get to know him, they continue to be surprised by him. For instance, they may call his tenacity obstinacy, but not know until later, his humanity and wonderful puckish wit, and love of colleagues. His hobbies come as a surprise too. He has a formidable knowledge of roses and expresses an interest in the academic side of gardening for it is Margaret, his wife, who, he says, fortunately does most of the work!

Gerald's catholic taste in art, particularly the German School or the more sexually-overheated paintings of Rubens, is well known. Even here, he is the consummate teacher and I acknowledge wonderful afternoons with him in art-museums, playing truant from conferences.

I wrote to Gerald telling him that I would be introducing him as one of our Honorary Fellows. He replied that he was grateful, but did not want to be a burden to me. He asked me to use my discretion in omitting references to the more discreditable parts of his character. I'm afraid it would be a failure in my duty to the College, Madam President, if I did not tell you the full truth. Gerald has a terrible vice which is that he pesters the officials of art galleries around the world to let him pursue his obsession of taking photographs of their more interesting exhibits. The officials quickly become enamoured by Gerald's charm and clear knowledge of art and its history. Equally clearly, the museum signs say 'No Photography'. Invariably, Gerald wins, not by aggressive gesticulation, but by the slow drip-drip of logic on the stone of bureaucracy. The result? Yet further illegal photography is added to Gerald's collection!

Gerald's research, like his art, shows catholic tastes. A keen research interest has been the study of the psychological deficits which underlie learning disorders, specifically dyslexia and dyscalculia. This work has led to the study of the history of writing and its relevance to the linguistic disorder in dyslexia. Gerald has studied the metabolic aspects of premenstrual tension and depressive illness. Educational research has been another area and he has been concerned with the factors influencing the recruitment of doctors into psychiatry and the methods of encouraging research interest in psychiatric trainees.

Gerald established his international reputation following his work on anorexia nervosa. This work spanned some thirty years and has led to the elucidation of the nutritional and endocrine aspects of anorexia, and the measurement of the disturbance of body image in this illness. He described clearly a programme of treatment based on nursing care and established the idea of specialist units. Gerald has become the most respected international authority on anorexia, and his influence on treatment is profound. He is a much-loved figure among those of us who work in this field at home and abroad. His most influential work, however, has been the delineation of the syndrome of bulimia nervosa in 1979. He described and defined the condition. The diagnostic criteria originally proposed by him have been incorporated into the two main systems of classification: DSM-IV and ICD-10.

Gerald is perhaps the only living psychiatrist to have a physical sign named after him. 'Russell's sign' is the abrasion of the knuckles, diagnostic of the bulimic, self-inducing vomiting by the fingers.

Gerald's meticulousness and his attention to detail, his natural caution about new ideas give him a conservative image: an image that he is unlikely to change views or practice. Yet I can think of very few people whose views about clinical practice and way of working have changed quite so much as Gerald's. Who would have believed, fifteen years ago, that Gerald—seemingly preoccupied by hypothalamic mechanisms—would have conducted the definitive trials on interpretive psychotherapy for eating disorders? This is one of the few examples in the history of psychiatry when anyone has overcome the formidable difficulties of conducting a controlled evaluation in any form of interpretive psychotherapy. He and his team have demonstrated the specific value of family therapy in young anorectic patients and its long-term benefits. It cannot be emphasised enough that Gerald's capacity to have changed his views as to the basic nature of eating disorders as a result of his and others' scientific research and clinical evidence, is unusual and a measure of the quality of the man. There are probably many reasons why this should be so but I would like to venture one. Gerald listens to the views of students and colleagues alike, not to change those views to his, but to understand them. His research team does not pursue his aims alone. He brought together people who pursue what is important to them, as best they can, for which Gerald offered endless support and as much resources as he can conjure up.

Gerald Russell is a modest man who has little to be modest about. He is a Renaissance man. He has achieved high office and rightly so—yet would put helping people, patients and colleagues, above all else. Gerald is the international authority in his research field. Few among us can claim to have altered psychiatric diagnosis and treatment so profoundly. We should not forget that when Gerald began his work, anorexia was a vague concept, often mistaken for tuberculosis.

It is therefore with delight, satisfaction and pride that I ask you, Madam President, and our colleagues to welcome Gerald Russell, Professor Emeritus, as an Honorary Fellow of our College.

**‘Appeal for storage space for ‘Help is at Hand’ leaflets’**

The Royal College of Psychiatrists has now sent over 4 million individual requests for the College’s ‘Help is at Hand’ leaflets. In the past our sponsors and our printers have very kindly stored these leaflets for us. Unfortunately, they are unable to continue to provide this space free of charge to the College. The Public Education Committee wondered whether a member of the College, living or working in the vicinity of Belgrave Square might have some suitable dry storage space for us to store 33 pallets of leaflets (approximately 40 A4 size boxes, within each pallet). If you can help, please contact Deborah Hart, Public Education Officer at the College on 0171-235 2351, ext. 127.

The College would like to thank the following hospitals for hosting the Spring 1995 Examinations. Special thanks to the Senior Organisers, the hospital staff and patients involved.

**Part I**

- Dr J. J. Yerramilli-Rao Bedford Hospital, Bedford
- Dr D. Hall Crichton Royal Hospital, Dumfries
- Dr S. Pidd Lancaster Moor Hospital, Lancaster
- Dr N. Lockhart Medway Hospital, Medway
- Dr E. Wyn Pugh North Manchester General Hospital, Manchester
- Dr. P. M. Rice Royal Dundee Liff Hospital, Dundee
- Dr D. L. F. Dunleavy Royal Victoria Infirmary, Newcastle
- Dr T. Venkateswarlu St Anne’s Centre, Sussex
- Dr. J. M. Ludlow St Georges Community Health Centre, Sheffield
- Dr J. O’Boyle St Vincent’s Hospital, Dublin
- Dr N. Shanmuganathan Stone House Hospital (Archery House), Dartford
- Dr R. N. Chitty West Cheshire NHS Trust, Chester
- Dr J. M. Annear Warlingham Park Hospital, Surrey

**Part II**

- Dr N. Minton Abraham Cowley Unit, Chertsey
- Dr S. K. Ahmed Eastbourne District General Hospital, East Sussex
- Dr G. Stein Farnborough Hospital, Farnborough

- Dr M. S. L. De Silva Heatherwood Hospital, Ascot
- Dr A. P. Roberts Hergest Unit, District General Hospital, Bangor
- Dr R. W. Latcham Hinchingsbrooke Health Care NHS Trust, Huntingdon
- Dr P. S. Meats King’s Mill Hospital, Notts
- Dr A. F. Cooper Leverndale Hospital, Glasgow
- Dr J. Boardman Lyme Brook Mental Health Centre, Keele
- Dr A. Al-Mousawi North Wales Hospital, North Wales
- Dr J. S. Callender Royal Cornhill Hospital, Aberdeen
- Dr L. D. Mulgrigama Royal Earlswood Hospital, Surrey
- Professor E. Johnstone Royal Edinburgh Hospital, Edinburgh
- Dr C. Davies Royal United Hospital, Bath
- Dr K. White South Western Hospital, South Western
- Dr R. K. Shelley St John of God Hospital, Dublin
- Dr S. Fleminger The Royal London Hospital, Royal London
- Dr D. Battin Worcester Royal Infirmary, Worcester

With reference to the Examination Results for the MRCPsych exams I and II published in the November issue (*Psychiatric Bulletin*, 19, 708–709), the Examinations Department has informed the *Bulletin* of the following amendments:

*MRCPsych Part I, Spring 1995:* Anthony Ang Wee Kiat; Aye Aye Myint; Teresa Chan Sau Fan; Chu Lap Sun; Angel Julian Gimeno Adelantado; Sudhakar Rao S; Jenny Tsang Suk Kwan; Michael Simon Yates; Zaw Myint.

*MRCPsych Part II, Spring 1995:* Jorge Antonio Cervilla Ballesteros; Richard Dawson Gray (omitted); Alison Lo Wai Fan; Richard Hamis McAllister Williams; Jorge Milonakis Pascual; Maria Leonor Montoliu Tamarit; Silvia Rodriguez-Ferrera Massons; Danny Tam Wing Hong; Shyamala Padmini Visvanathan; Wong Meng Kong; Sian Worrall-Kent; Kenneth Yee Kay Cheuk.

**Christmas Leave**

The College will be closed from Friday 22 December, 1995, and will reopen at 8.00 am on Tuesday 2 January, 1996.