At this time in British history a further reason for a decline in the numbers of fully-trained psychiatrists is that the Commonwealth component, some of whom previously preferred to stay on and make their careers in Britain, are attracted elsewhere by better salaries, opportunities, climates and conditions. Your career structure is such that, although nearly half the public hospital beds in the U.K. are occupied by psychiatric patients, the number of consultant psychiatrists on the national health scheme is 10 per cent of the total number of N.H.S. consultants.

I personally cannot see any relationship between the decline in the number of entrants to psychiatry in Britain and the most commonly adopted eclectic or organic approaches to psychiatry chosen by most trainees. The major factor behind apparent personal neglect of the patient is usually the high patient-staff ratio, apart from which there are certain types of patients in psychiatry who do not seek, need, or gain any benefit from frequent doctor-patient one to one interviews.

The doctor-patient relationship does not necessarily suffer because it is not constructed along formal analytic lines, and to imply that the relationship does not develop without this structuring is to show a lack of understanding or appreciation of the efforts made by many psychiatrists who do not use analytic techniques. They are sometimes very appropriate, and I acknowledge that contributions by Bleuler,

Freud and Meyer are built into my understanding of psychiatry, but I cannot accept their work alone as sufficient to encompass my understanding of patients and psychiatry.

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NEEDS OF THE MENTALLY HANDICAPPED DEAR SIR.

Dr. K. Day in the January issue of *News and Notes* purports to answer some questions raised in Dr. Shapiro's letter of August 1974.

One rather important question however, remains unanswered, namely, how Dr. Day can justify drawing a Consultant Psychiatrist's salary for doing the work which he so firmly believes he should not be doing.

Why a Consultant with such views should be sent on H.A.S. visits to study and advise on the future activities of other Consultants who he believes are unnecessary anyway is a matter that possibly the H.A.S. selection panel can explain.

T. LAWLOR.

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