

The AEP programme of itinerant CME courses (Table 1) represents a first step in this direction. Our starting point has been the programme of CME courses delivered at the 11th Congress of the Association in Stockholm in May 2002. This programme included 36 CME courses, all developed under the guidance of an ad hoc committee. These courses were formally evaluated in Stockholm by three groups of assessors: the participants, the teachers and a group of observers appointed by the AEP and the host society, the Swedish Psychiatric Association. Among the courses which received the best ratings, the AEP Executive Committee selected those whose topics were most likely to be of interest to psychiatrists of all the various European countries. The list was then submitted to the presidents of all national psychiatric societies, asking them to host one or more of the courses within their national congresses, as a joint initiative of their society and the AEP, providing the same kind of evaluation which took place in Stockholm. Local expenses, including those of simultaneous translation, were to be covered by national societies, whereas the travel expenses and the honoraria for the teachers were to be covered by the AEP. No drug company was to be involved in any way in the organisation of the courses.

To date, concrete agreements have been made with 18 national psychiatric societies for the co-organisation of the courses (the Czech Psychiatric Society; the Danish Psychiatric Association; the Finnish Psychiatric Association; the German Society of Psychiatry, Psychotherapy and Neurology; the Icelandic Psychiatric Association; the Israeli Psychiatric Association; the Italian Psychiatric Association; the Kazakh Association of Psychiatrists and Narcologists; the Kyrgyz Psychiatric Association; the Lithuanian Psychiatric Association; the Luxembourg Society of Psychiatry, Neurology and Psychotherapy; the Maltese Psychiatric Association; the Polish Psychiatric Association; the Portuguese Psychiatric Association; the Psychiatric Association

of Slovenia; the Psychiatric Association of Turkey; the Society of Georgian Psychiatrists; the Spanish Association of Neuropsychiatry). The list of the courses scheduled for the second half of the year 2003 is presented in Table 1.

Of course, this is just a beginning, and many things can be done to extend the initiative in terms of countries involved, of courses provided, and of participants in each country. However, several principles on which the initiative is based deserve attention:

- the collaboration of an international psychiatric association with national psychiatric societies in Europe in a concrete educational activity
- the implementation of the initiative in individual European countries
- the coverage of all areas of Europe, without exclusion;
- the possibility offered to national societies to choose the topics and teachers of interest
- the coverage of part of the expenses by the international association
- the decision not to request the sponsorship of a specific drug company.

In the future, the possibility may be considered of building up a consortium of drug companies covering part of the costs of the initiative. This consortium should not have any role in the selection of the topics, the teachers, or the countries in which the courses have to be implemented. What we are especially exploring, however, is the possibility to submit to the European Union a comprehensive European educational programme, jointly promoted by the AEP, the European Region of the World Psychiatric Association, the European Union of Medical Specialists and the European region of the World Health Organization, in collaboration with national psychiatric societies in Europe.

Reference

World Health Organization (2001) *Atlas: Mental Health Resources in the World 2001*. Geneva: WHO.

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NEWS, NOTES, FORTHCOMING INTERNATIONAL EVENTS

News and notes

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Report on the annual meeting of the Royal College of Psychiatrists, Edinburgh International Conference Centre, 30 June–3 July 2003

I had spent the best part of a year helping to plan a balanced, scientifically stimulating conference, which also could:

- give delegates an opportunity to participate in interactive sessions and training courses
- give all the different concerns of Faculties, Sections and Special Interest Groups in the College a place in the metaphorical sun
- and, not least, be financially successful for the College.

One would have expected that, by the time of the opening ceremony, I would have been a bundle of nerves in trepidation that, by trying to address all these agendas, we were in real danger of pleasing no one.

Nothing was further from the truth. To my admittedly biased but none the less critical eye, the programme looked like it was going to be a success, and the wonderful city of Edinburgh could offer the guarantee that it would lend its Gaelic magic to the conference. On top of all of this, with the traditional hospitality of our hosts and the efficiency of the College Conference Office, I was as cool as a cucumber. I could then switch off from being the organiser to just one more delegate taking advantage of the annual get-together.

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We were given a good start in the welcoming ceremony by Malcolm Chisholm, SMP and Minister for Health and Community Care, indicating the commitment of the Scottish Parliament to mental health issues, no doubt made real by the example, as Dr Mike Shooter, the President, indicated, of the common sense the Scots had adopted in the process of modernising its mental health legislation, in contrast to the tortuous and somewhat ludicrous steps undertaken by their colleagues south of the border.

In a conference with no less than 63 sessions, 32 workshops, 10 keynote addresses, 5 training courses and 4 poster sessions, with nearly 350 speakers, it would be invidious to single out highlights, so I will simply report those that were of particular interest to me.

Having recently read of and been involved in the controversy about the role psychiatrists in the UK play in the management and treatment of people with personality disorders (National Institute for Mental Health in England, 2003) I attended the session on the development of psychopathology of borderline personality disorders and was disturbed, if not surprised, to hear from Professor Peter Hobson how distorted and insensitive relationships could already be detected between mothers who have a diagnosis of borderline personality disorder and their infants, and wondered how early interventions could perhaps change the course of the development of such disorders.

The Distinguished Guest Lecture was delivered in scholarly fashion by Tim Crow, who described a fascinating hypothesis that attempted to explain, in evolutionary terms, why the genetic predisposition to schizophrenia remained prevalent and universal in mankind, despite not offering any perceptible survival advantages. Linking the evolution of language to the point in which species transition occurred and which separated us from our pre-hominid ancestors, he suggested that psychosis was specific to *Homo sapiens* precisely because of its connections to the acquisition of language, which in turn determined asymmetries in our brain structures, leading to lateralisation of functions. Psychosis and what makes us human are so inextricably connected, according to this view, that one cannot exist without the other.

The Psychotherapy Lecture was delivered by Professor Sydney Bloch, who reminded us of the importance of a balance between scientific and alternative evaluations of the effectiveness of psychotherapies, particularly those that rely on creative functions.

In a session on depersonalisation, I learned how surprisingly prevalent this condition is: it has been found in up to 18% of clinic attenders, yet often goes unrecognised, particularly in psychiatric populations. Psychotherapeutic and psychotropic interventions have not been found to be particularly helpful in a syndrome that probably reflects a protective neural response, aimed at buffering the effects of high levels of arousal.

On the following day I decided to concentrate on the stream focusing on schizophrenia, and so listened to the findings of the Scottish studies led by Professor Eve Johnstone on early clinical and neuroimaging manifestations of the disease, and then a fascinating and controversial

session, led by Professor Robin Murray, that looked at the association between schizophrenia and marijuana use, and the growing evidence of the role of cannabis in the presentation and continuation of psychotic symptoms. A masterful keynote lecture by our invited and distinguished speaker Professor Jeffrey Lieberman, from the University of North Carolina, described in optimistic terms the possibilities for the treatment of first-episode schizophrenia and the opportunities to change the course of the illness.

My afternoon was spent attending sessions on treatment approaches, from cognitive-behavioural therapies to early intervention teams, novel pharmacological strategies focusing on relapse prevention, and finally the important and sometimes dispiriting topic of treatment-resistant schizophrenia. I ended the day feeling well nourished and certainly less pessimistic than I anticipated.

The following day presented me with a difficult but pleasant dilemma: should I go to a session on psychological interventions in pain management, women patients in secure settings, anti-stigma campaigns, specialist management of affective disorders or a workshop on the unlicensed use of licensed psychotropic drugs? I decided to go and learn about something I knew little about, and was rewarded by three very useful lectures on the link between psychological states and pain. The highlight was the Psychiatry of Old Age Lecture, delivered by Professor Lawrence Whalley, who examined how life course, cognitive ageing and dementia could be related, a lecture that, in fact, was of interest not only to psychiatrists dealing with the elderly, but to all of us concerned about how our lifestyles, stress and nutritional behaviours can affect the presentation of dementia in old age.

In keeping with the membership of the College in the UK and abroad, the final day contained a series of impressive sessions on mental health issues in Africa, looking at training and appropriate forms of culturally relevant psychotherapies; presentations from the Middle Eastern group, debating early detection of mental illness in primary health care and cultural adaptation of questionnaires for Arab-speaking populations; and hot topics from the USA, including the psychological after-effects of the attacks of 11 September 2001 and controversial physician-assisted suicide proposals. I attended the session led by the Critical Psychiatry Group, which examined the values and roles of psychiatrists in modern society, the politics of psychiatric drug treatment and institutional racism. The session on asylum seekers, a worryingly increasing problem for psychiatric services, was also very revealing and apposite to the practice of most psychiatrists working in large conurbations. On the topic of institutional racism, Professor Kamlesh Patel, in his plenary lecture, took on the gauntlet presented to him by the Royal College to examine its own institutional discriminatory practices, and gave a critical account of mental health services for ethnic minorities in the UK.

In this highly and unfairly selective account of what I thought was a thoroughly enjoyable, wide-ranging and informative experience, I have not mentioned the high quality of the training courses available – a new departure for College annual meetings – the variety of interactive

workshops or poster presentations, let alone the fun we had at the Gala Dinner at the Hub, on the Royal Mile, in the shadow of Edinburgh Castle. But if it serves to whet the appetite of the reader, why not book early for next year's psychiatric jamboree? It takes place in Harrogate, and promises to deliver much of the same, only better!

Finally, I am particularly grateful to Professor David Cunningham Owens for shouldering the unenviable burden of putting the scientific programme together, Kevin Healy for coordinating the workshops, Denise Coia and the Scottish Division for hosting the event, the Officers of the College, in particular the President, Mike Shooter, and Professor Richard Williams, the Director of Conferences, and, last and definitely not least, the sterling Conference Organisers for all their efforts, without whom I am sure the conference would not have been the success it proved to be.

Reference

National Institute for Mental Health in England (2003) *Personality Disorder: No Longer a Diagnosis of Exclusion*. London: NIMHE.

Dr Leonard Fagin

Conference Organiser, Annual Meeting, Royal College of Psychiatrists; Consultant Psychiatrist and Clinical Director, North East London Mental Health NHS Trust, Honorary Senior Lecturer, University College London; South Forest Centre, 21 Thorne Close, London E11 4HU, UK, email leonard.fagin@nelmht.nhs.uk

European psychiatric leaders meet in Vienna

The third annual meeting of the leaders of European and national psychiatric organisations was held in Vienna in June 2003, on the day before the World Psychiatric Association (WPA) held its International Thematic Conference on Diagnosis in Psychiatry. The purpose of the meeting was to facilitate improvements in psychiatric societies' organisational and inter-organisational functioning in our increasingly interdependent European environment. That the meeting is clearly growing in importance in the calendar of leaders is reflected in the high attendance rate among: representatives of the WPA's executive and European zones; members of the Section and Board of Psychiatry of the European Union of Medical Specialists (Union Européenne des Médecins Spécialistes: UEMS); members of the executive of the Association of European Psychiatrists (AEP); WHO European National Counterparts; members of the Board of the European Federation of Psychiatric Trainees; and, most importantly, a considerable number of persons from the leadership of national psychiatric organisations, including the Royal College of Psychiatrists.

At the 2002 annual meeting, in Stockholm, there had been much concern about the contemporary identity of the European psychiatrist and the fact that some countries

have recruitment problems. The morning of the 2003 meeting was therefore devoted to discussing these overlapping themes. The issues were brought alive by two excellent presentations from Professor Wolfgang Maier from Bonn and Professor Jeremy Holmes from the UK. Professor Maier gave an excellent overview of the evolving understandings of mind-brain paradigms, and highlighted the excitement of contemporary understandings for the modern academic psychiatrist. Professor Holmes stressed the attractions of the psychiatrist as, potentially, the epitome of the modern doctor, capable of listening to the subjective experience of the patient, bearing emotions, listening to and making narratives. These engaging talks on the interaction between subjectivity and objectivity led to a lively discussion in the now traditional small work groups that followed. In these settings, leaders could discuss practical ways of attracting high-quality doctors to our discipline.

The afternoon was spent listening to and discussing the complex issues related to European-wide quality standard-setting for continuing medical education in psychiatry.

Thanks are especially due to Wolfgang Fleishhacker for the excellent local arrangements and to Marion Palmer Jones at the Royal College of Psychiatrists for administrative support. (Editor's note: Particular thanks to Brian Martindale for his tremendous energy and enthusiasm in organising this collaborative venture.) Next year's meeting will be on 13 April 2004, just before the AEP Congress.

Section and Board of Psychiatry of the Union Européenne des Médecins Spécialistes (UEMS)

The planned expansion of the European Union (EU) has brought new members and new perspectives into the discussions of the UEMS. There is now striking diversity across cultures, particularly within psychiatric training and in the implementation of psychiatric health policies. In addition, common standards of quality assurance need to be addressed urgently.

No one doubts the difficulties. Meaningful international comparisons are not always readily made. None the less, agreements have already been reached on some fundamental issues, such as the supervision of trainees and the need to create a standard system of accreditation for postgraduate training schemes. Success in these has also encouraged the Section and Board to move forward to consider, for example, undergraduate training in psychiatry on an EU basis and postgraduate recruitment and entry into the profession.

One of the more ambitious projects is to try to define a common role for the psychiatrist or at least to provide a profile recognisable within different cultures. There has also emerged the need for the development of a charter on training and for the delineation of skills-based objectives for training.

Information supplied by

Dr James G. Strachan, UK representative, UEMS

Professor Holmes stressed the attractions of the psychiatrist as, potentially, the epitome of the modern doctor, capable of listening to the subjective experience of the patient, bearing emotions, listening to and making narratives.

Psychiatry books (less than 10 years old) and journals (less than 3 years old) are urgently required in Cambodia. Please send donations to Professor Ka Sanbaunat, Chairman, Department of Psychiatry, Psychiatric Out-patient Clinic, Preah Bat Norodom Sihanouk Hospital, Phnom Penh, Cambodia.

AEP Research Prizes 2004

The AEP offers three research prizes, of €5000 each, for the young psychiatrists who publish the best scientific papers in the years 2002/2003 in the following areas:

- clinical psychopathology and refinement of psychiatric diagnostic categories
- biological correlates and treatments of mental disorders
- psychiatric epidemiology, social psychiatry and psychotherapeutic interventions in mental disorders.

Entrants must be:

- a psychiatrist or trainee working in Europe
- under 40 years old (on 31 December 2003)
- the first author of a scientific paper published in 2002 or 2003 in a journal indexed in *Current Contents* in one of the above-mentioned areas.

Applicants should send documentation of the above with 10 copies of the paper. This must be received by 31 January 2004 by the President of the AEP, Professor Mario Maj, Clinica Psichiatrica, Primo Policlinico Universitario, Largo Madonna delle Grazie, 80138 Napoli, Italy.

Prizes will be awarded during the AEP Congress in Geneva, 14–18 April 2004. Further information is available at the website www.aep.lu.

The 2004 WPA International Congress: 'Treatments in Psychiatry: An Update'

Next year's WPA Congress in Florence, Italy, 10–13 November 2004, is expected to be one of the main psychiatric events of the year and to have some 5000 participants. The Congress aims to provide a comprehensive and high-quality update on all evidence-based treatments for mental disorders. The Congress will feature:

- 14 plenary update lectures
- 36 interactive symposia
- 12 advanced courses
- 6 forums
- symposia organised by the various components of the WPA (sections, zones, committees)
- sessions for the reporting of new research
- poster sessions
- sponsored events.

Abstracts (no longer than 250 words) can be submitted by email to the Scientific Secretariat: secretariat@wpa2004florence.org. For further information contact the Chair of the Organising Committee, Professor Mario Maj, email: majmario@tin.it.

5th WPA Co-sponsored Eastern Africa Regional Scientific Conference

This meeting of African psychiatrists was held in Kenya in April 2003. It had 150 participants, which is the largest number of African psychiatrists and other mental health workers to meet in recent times. Psychiatrists from Kenya, Uganda, Tanzania, Sudan, Ethiopia, South Africa, Nigeria, Malawi and the UK were present.

The sense of social and professional isolation can be daunting to those psychiatrists who work alone or in very

small groups and the meeting served an important function that might be little understood by colleagues from countries with many psychiatrists.

The dangers of 'intellectual inbreeding' in the leadership of psychiatry can also be mitigated and challenged through such meetings.

Information supplied by

Dr F. G. Njenga, Conference Chairman and President, African Association of Psychiatrists and Allied Professions. Email: fnjenga@africaonline.co.ke

'Estates General' of psychiatry

In Montpellier, June 2003, for the first time in France, all the country's professional and scientific mental health organisations met together for a meeting called 'Estates General' of psychiatry (the title is a reference to the assembly that launched the French revolution in the 18th century). The initiative for this exceptional event was taken by the French Federation of Psychiatry, with the aim of defending the French model of psychiatry, which has recently been under attack for economic reasons. In summary, French psychiatry is being hit by government attempts to import 'managed care' into France, but this has the attendant risk of deleterious consequences similar to those seen by colleagues in America. In France the consequences will be even worse because of:

- the balance of services in the public sector in psychiatry and the scarcity of independent in-patient facilities
- the reliance of most public social agencies on the public psychiatric system to deal with the psychological component of their users' problems
- the importance given to psychotherapy within French psychiatry.

More than 2500 participants and the presence of WPA officers (Juan Mezzich, WPA President-Elect, and Brian Martindale, Western European Zonal Representative) ensured the success of the meeting. The French media gave a large amount of coverage to the main concern of the Estates General: the dramatic cut in public financing of psychiatry in spite of ever growing demand.

Information supplied by M. Botbol

Australia, New Zealand, South East Asia and the Pacific

The Royal Australian and New Zealand College of Psychiatrists has a Regional Issues Committee to work with, and support, psychiatrists and other mental health stakeholders in South East Asia and the Pacific. It intends to respond to what is wanted or requested in the wider region, rather than having preconceptions about what it should offer. The Committee's chair is Professor Graham Mellsop (also WPA representative for Australia, New Zealand, Papua New Guinea, and the South West Pacific Zone). Members or Fellows in the Region are encouraged to make contact via email (g.mellsop@auckland.ac.nz) or fax (+ 64 9 276 0066).

WPA forums in psychiatry

The following are available via the publication section of the WPA website (www.wpanet.org):

- *The Declaration of Madrid and Current Psychiatric Practice: Users' and Advocates' Views*
- *Psychiatrists and the Death Penalty: Some Ethical Dilemmas*
- *Psychiatry in Medical Education*
- *Managed Care and Psychiatry*
- *Culture, Spirituality and Psychiatry*
- *Mass Media and Psychiatry*
- *Psychiatry and Human Sexuality*

Eating disorders

A sixth volume in the WPA's very successful series 'Evidence and Experience in Psychiatry' has been published, entitled *Eating Disorders* (eds M. Maj, K. Halmi, J. J. López-Ibor & N. Sartorius. Chichester: Wiley, 2003). Worldwide, eating disorders may be one of the major areas of clinical psychiatry in which the gap between research evidence and clinical practice is most dramatic. The six chapters deal with diagnosis, epidemiology, physical complications, pharmacological treatment, psychological interventions and social/economic burden. Each consists of a systematic review of the research evidence, followed by many commentaries from virtually all the renowned experts in the field.

Classification and diagnosis

Work progresses towards the next revisions of the world's current classification systems. A successful major WPA International Thematic Conference took place in Vienna in June in collaboration with the Austrian Society of Psychiatry and Psychotherapy. In May, the WPA Section on Classification, in collaboration with the WHO Classification Office, organised the Symposium on Philosophical and Methodological Foundations of Psychiatric Diagnosis in New York. A diversity of first-rate contributions, from philosophers, psychiatrists and other health scientists, addressed the complex issues. The *Newsletter* featuring this symposium is available on the Section's website: www.wpanet.org.

The WPA Section of Affective Disorders

The Section has adopted the *Journal of Affective Disorders* as its house journal. A fruitful collaboration has also been established with the International Society for Affective Disorders (ISAD). Both the Section and the ISAD are chaired by Professor Chris Thompson. The ISAD had a very successful inaugural meeting in Taormina, Sicily, in March 2002. Its next meeting is in Cancun, Mexico, 5–10 March 2004. ISAD members receive a personal subscription to the *Journal of Affective Disorders* as part of their membership. Details of membership and of the Cancun meeting can be found on the website www.isad.org.uk.

Albert Schweitzer Medal

Professor Henry Walton, Professor Emeritus of Psychiatry and of International Medical Education, University of Edinburgh, has been awarded the Albert Schweitzer Grand Gold Medal of the Albert Schweitzer World Academy of Medicine. This was for humanitarian services with respect to his international medical education work over numerous decades and was presented at a ceremony in the Royal Castle of Warsaw on 15 May 2003. Professor Walton was the foundation President of the Association for Medical Education in Europe, and subsequently the long-term President of the World Federation for Medical Education. He initiated the Global Curriculum in Psychiatry programme of the World Psychiatric Association.

All psychiatrists can obtain extensive up-to-date information about international news, publications and conferences (and much more) by subscribing electronically to the monthly e-bulletin of the WPA. Subscriptions are available through the website www.wpanet.org/

The Pan-African Group of the Royal College of Psychiatrists was inaugurated at the College annual meeting in Edinburgh in July. Dr Frank Njenga was elected Chairman for a period of 1 year. The position will be reviewed at the 2004 annual meeting of the College, when the decision of the Privy Council about converting the Group to a Division will have been received.

Forthcoming international events

31 October–2 November 2003

15th National Conference of the Indian Association for Social Psychiatry

Trichy, India.

Contact: Dr Savita Malhotra.
Email: savitam@sancharnet.in.

31 October–3 November 2003

Third International Conference on the Synthesis of Psychotherapy and Pharmacotherapy

Thematic conference.

Amsterdam, The Netherlands.
Contact: Dr Rob M. W. Smeets.
Email: mmoalem@kenes.com.

9–13 November 2003

Psychiatric Care Across Cultures: A Conference Week

WPA Section on Transcultural Psychiatry in collaboration with the University of Malta.

Malta St Julian's, Republic of Malta.
Email: charles.pace@um.edu.mt; cpace_malta@hotmail.com.

27–30 November 2003

XI Congreso de la Sociedad Dominicana de Psiquiatría

WPA co-sponsored conference. In collaboration with the Latin American Psychiatric Association.

Melia Caribe Tropical Hotel, Dominican Republic.
Contact: Dra. Daisy Acosta.
Email: daisyacosta@codetel.net.co.