

after the expiry of the period of 4 clear weeks in this paragraph referred to.

Honorary Officers

Fellows and Members of the College are reminded of their rights in connection with the forthcoming elections for the offices of Dean, Registrar, Treasurer, Editor and Librarian. All Honorary Officers are eligible for re-election, although the Librarian, Dr Ian Pullen, does not wish to be re-elected.

The nominating meeting of Council will take place on 23 April 2001 and the last date for receiving nominations will therefore be 21 May 2001. The relevant Bye-Laws and Regulations are printed below.

Extracts from the Bye-Laws and Regulations

Bye-Law XII The Other Honorary Officers

1. The Council shall, in accordance with the Regulations, make its nominations for the offices of Dean, Registrar, Treasurer, Editor and Librarian at the first meeting after the name of the President for the next ensuing College year has become known. Written nominations for the

above Honorary Offices, accompanied in each case by the nominee's written consent to stand for election, may also be lodged with the Registrar at such time as may be prescribed by the Regulations, provided that each such nomination is supported in writing by not less than 12 Members of the College who are not members of the Council.

2. The Dean, Registrar, Treasurer, Editor and Librarian shall be elected from among the Fellows, by the Members of the College, in each case in accordance with the procedure prescribed by the Regulations.

Regulation XII Election of the Other Honorary Officers

1. The method of electing the Honorary Officers other than the President, the Vice-Presidents, Sub-Deans and Deputy Registrars shall be the same as that for electing the President, save that nominations from Members of the College who are not members of the Council shall be lodged with the Registrar between the first day of June in any calendar year and the date which is 4 clear weeks after that meeting of the Council which is the first held after the name of the President for the next ensuing College year has become known.

Extract from College Regulations

Membership under Bye-Law III 2(ii) categories (a), (b) and (c)

The Royal College of Psychiatrists has recently been given leave by the Privy Council to extend this Bye-Law, and is now able to offer Membership without Examination to the following three groups of doctors:

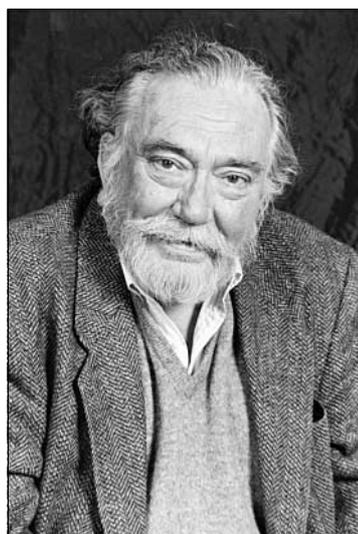
- (a) medical graduates of exceptional distinction – up to a limit of eight per College year and 100 in all at any one time;
- (b) qualified medical practitioners who qualify in the European Economic Area (EEA) and who are on the specialist register of the General Medical Council or the Medical Council of Ireland and who are in specified grades prescribed by the Regulations;
- (c) qualified medical practitioners who qualify outside the EEA and who are on the Specialist Register of the General Medical Council or the Medical Council of Ireland and who are in specified grades prescribed by the Regulations.

To nominate an individual under this Bye-Law please contact Dr Anne Dean in the Department of Postgraduate Educational Services, The Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG, and the relevant forms will be forwarded to you. The closing date is 30 September 2001.



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obituaries



George Frederic Spaul

Formerly Consultant Psychiatrist, Towers Hospital, Leicester

George Spaul was born in London on 5 March 1925. Having attended Willesden County School he obtained the Bucknill

Scholarship and proceeded to University College Hospital from 1943–1948, part of the time being spent in Leatherhead, to where the hospital had been evacuated. The scholarship was very significant, as Dr Bucknill, the originator of the scholarship, was a very distinguished psychiatrist.

He qualified MB, BS (Lond) in 1948 and his first house officer post was at the Towers Hospital, Leicester, starting on the 'appointed day' – when the NHS was first started.

He did his National Service in the Royal Army Medical Corps, becoming a junior specialist in psychiatry, and entered his formal psychiatric career as registrar at Shenley Hospital. He became a senior registrar at Belmont Hospital in 1954 where he came under the influence of Dr Maxwell Jones, his Unit at Belmont being the progenitor of the Henderson Hospital. This was George's first contact with the concept of the therapeutic community. He then attended the Tavistock Clinic course in group therapy.

He became a senior house medical officer at the Coppice Hospital, Nottingham, working with Dr Keith Woddis, and had further experience of

group therapeutic techniques. In 1965 he was appointed at the Towers Hospital as a consultant and remained in the Leicester area for the rest of his professional career, retiring in 1987.

I had the good fortune to join him at the Towers in 1967 and worked with him in a true partnership up to his retirement. He embarked on setting up the Francis Dixon Lodge (FDL), a therapeutic community in the grounds of the Towers, which is still very active and is a proper tribute to his foresight and clinical acumen. He undertook lecturing and group work for the Midland course in group work and family therapy, as well as being the consultant for the Samaritans, Cruse and the Marriage Guidance Council. He continued work at the FDL until 1992, on a part-time basis after his retirement from general psychiatry.

George was a founder Member of the Royal College of Psychiatrists in 1971 and then became a Fellow in 1980. He was a very competent and most caring psychiatrist with whom it was a pleasure to work. His patients could always rely on his integrity, knowledge and compassion in dealing with their problems.



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I was fortunate enough to work with him for many years and owe him a debt that I am unable, fully, to express as a colleague, a friend and a family man. He had the support of his wife, two sons and daughter at all times. Only his daughter followed him into the medical profession, his sons taking after his other interest in the theatre. He himself was a fine actor, a producer and authority on English literature. His interest in natural history continued to his last days. He was a keen gardener and bred many somewhat esoteric animals in his collection of glass-houses.

A much loved man who will be sadly missed.

David M. Carter

Professor Rashid Chaudhry

Formerly Emeritus Professor and Chairman, Fountain House, Lahore, Pakistan

Professor Rashid Chaudhry died in Lahore on 13 August 2000. He was a pioneer in

establishing psychiatry in Pakistan and started the first department of psychiatry in a general hospital in the country in the late 1960s and set the scene for expansion of this speciality in Pakistan. He was the first Professor of Psychiatry at King Edward Medical College, Lahore, and had served more than 15 years when he retired in 1982.

He was born in East Punjab and his family migrated to Pakistan in 1947. After graduating from King Edward Medical College he joined the Army Medical Corps and served in northern areas for about 2 years. He then proceeded to the UK for further study at the Maudsley, after which he started his career as a specialist at the Mental Hospital, Lahore. He was elected FRCPsych in 1972.

His vision to establish psychiatry as an important branch of medicine was reflected in his efforts to create more insight into mental health problems both among professionals and the general public. He also initiated the rehabilitation psychiatry in the country and founded a rehabilitation facility in the name of 'Fountain House' at Lahore.

This facility is now regarded as an important innovation and is now widely accepted as a medium for treatment and training.

Professor Rashid Chaudhry was respected for his work and expertise all over the world. He was elected office bearer of different International organisations. He received various awards from the Government of Pakistan, United Nations Organization, World Health Organization, world psychiatric bodies and voluntary organisations. He was also very active in establishing the World Islamic Association for Mental Health and served this organisation as its president for more than 5 years.

He will be remembered by a large number of friends, associates and students. His dedication and contribution in the field of mental health will continue providing inspiration for his fellow colleagues in Pakistan. May God rest his soul in peace and give strength to his family and friends to bear his loss.

Afzal Javed

reviews

Developing Primary Care for Patients with Long Term Mental Illness. Your Guide to Improving Services

By R. Byng, H. Single & C. Bury. Kings Fund. 1999. 115 pp. £12.99 (pb). ISBN: 1-85717-271-X.

Books about general practice are interesting. Books about general practice written by non-general practitioners (GPs) telling us how to do it are often quite fun. Books about general practice written by GPs are useful; books written about general practice by a practising GP are rare and valuable. This book falls into the latter category. What makes it more interesting still is that it covers a topic that is poorly covered by either the research literature or by other authors – the care of the severely mentally ill in primary care.

The book is clearly set out, describes the steps needed to undertake the various tasks, identifies why the tasks are important and what will be achieved by completing them. The descriptions throughout are simple, concise and designed with general practice in mind.

This is a book that is aimed (successfully) at primary care, but its attraction does not end there. It is of value to community mental health teams (CMHTs)

in helping them understand some of the strengths and weaknesses of primary care, and what CMHTs can do to support primary care provide high quality care to a vulnerable population. It is of value to managers in primary care groups to help them provide direction to a mental health special interest group, always difficult if the managers themselves have no experience of commissioning or developing primary care mental health services. Overall it is a useful, well constructed book.

There is but one drawback – this review is published in a psychiatric journal, and not a primary care journal, which would raise the level of awareness significantly.

Alan Cohen FRCGP Head of Primary Care, Sainsbury Centre for Mental Health

Primary Prevention of Mental, Neurological and Psychosocial Disorders

World Health Organization. Geneva: WHO. 1998. 113 pp. SW.fr. 35-, Sw.fr. 24.50 in developing countries. ISBN: 92-4-154516-X.

This fairly short document forms the latest part of the World Health

Organization's (WHO) series of publications on mental disorder. It is aimed at professionals and policy makers in a variety of sectors who may be concerned with or who are in a position to influence the prevention of mental disorders. This is a welcome enterprise that can only serve to raise the profile of this neglected area.

The book provides a useful summary of our current medical knowledge of how to prevent four largely unrelated phenomena: mental retardation (i.e. learning disabilities), epilepsy, suicide and 'burnout'. However, it is seriously flawed in terms of the brief set by the WHO. It does not really attempt to address the wider interests of policy makers, neither does it present much of a coherent strategy for the prevention of mental disorders. Indeed, it is not clear that the four 'conditions' chosen make sense as the focus for a prevention strategy or that they sit naturally together either conceptually or practically. In many countries the agencies concerned with the prevention and 'treatment' (if relevant) of these conditions will be different.

The model adopted throughout is what is often, lazily, referred to as 'the medical model'. Information about the conditions is conceived of in purely medical terms and interventions are limited to the obvious traditional public health approaches. It is as if the authors have ignored the last 40 years of practice in