



e-interview

Zoltán Rihmer

Zoltán Rihmer is Professor of Psychiatry and Director of Research, Department of Clinical and Theoretical Mental Health, Semmelweis University, Faculty of Medicine, Budapest, Hungary. He trained at the University of Pécs and the National Institute for Psychiatry and Neurology, Budapest. His special interests include prediction and treatment response in mood and anxiety disorders, and prevention of suicide.

If you were not a psychiatrist, what would you do?

As a child, I wanted to be an automobile engineer; as a medical student, I thought about becoming an internist or a neurologist. But if I was to choose again, I would still prefer to be a psychiatrist.

Do you feel stigmatised by your profession?

Not at all. But psychiatry could attract higher prestige. Perception of the specialty has improved since I started in clinical practice but it could still be better.

What are your interests outside of work?

I enjoy listening to classical music, especially Italian opera, and doing work in the house and in the garden.

Who was your most influential trainer, and why?

Professor Miklós Kun, the head of the acute admissions in- and out-patient psychiatric department at the National Institute of Psychiatry and Neurology where I started my clinical work 38 years ago. He was a very open-minded and humanistic in his approach with expertise in both psychoanalysis and in traditional biological psychiatry.

What job gave you the most useful training experience?

My first appointment under Professor Kun, where there were five of us admitting and treating 120–150 in-patients a month.

**Which publication has influenced you most?**

The scientific papers of Hagop Akiskal, Jules Angst, Julien Mendlewicz and Fred Goodwin.

How has the political environment influenced your work?

Interestingly, both communism and the new democratic system had no direct influence on my work. Recently, however, worldwide antipsychiatric movements are raising some concern.

What part of your work gives you the most satisfaction?

Seeing and treating patients, doing research and writing scientific papers.

What do you least enjoy?

Doing administrative work.

What single change would substantially improve quality of care?

Abolishing the leading role of financial aspects in the healthcare system. I know that financial aspects are important in all fields of our life, but medical care is not a money-making industry but a value-making profession, or indeed an art, based on a scientific methodology.

What is the most important advice you could offer to a new trainee?

To know DSM–IV or ICD–10 is necessary, but not sufficient. They should learn the whole spectrum of psychiatry from classical psychopathology to the most recent genetic findings. A psychiatric diagnosis is much more than simply checking the symptoms, just as treatment is much more than following the guidelines or protocols. Treatment should always be individual and person-centred.

Do you think psychiatry is brainless or mindless?

Neither of the two. Indeed, brain and mind should be in harmony in the profession, just as they are in a healthy person.

What is the role of the psychiatrist in rebuilding healthcare systems?

Psychiatry is more or less present in all fields of medical care, which highlights the importance of consultation–liaison psychiatry. In addition, decision makers usually do not realise how important untreated mental disorders are in the development of several medical illnesses such as hypertension, stroke or ischaemic heart disease. In addition, treatment of mood and anxiety disorders as early as possible might reduce both suicide rates and somatic morbidity and mortality. Making them more aware of this would eventually contribute to building up a more effective healthcare system.

What single area of psychiatric practice is most in need of development?

Formulating new diagnostic categories that reflect treatment response.

What single area of psychiatric research should be given priority?

Psychopathogenetics.

How would you like to be remembered?

A man who did something good for his family, patients and colleagues, and who died at the age of 100 with good mental health!

Dominic Fannon

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