

we knew what was right and wrong. We cling to our point of view, as though everything depended on it. And yet our opinions have no permanence: like autumn and winter, they gradually pass away...<sup>2</sup>

"Perfect is the man who knows what comes from heaven (spiritual knowledge/wisdom) and what comes from man (wordly knowledge/science). Knowing what comes from heaven, he is in tune with heaven. Knowing what comes from man, he uses his knowledge of the known to develop his knowledge of the unknown and enjoys the fullness of life until his natural death. This is the perfection of knowledge. However, there is one difficulty. Knowledge must be based upon something, but one is not certain what this may be. How, indeed, do I know what I call heaven is not actually man, and that what I call man is not actually heaven? First, there must be a true man; then there can be true knowledge".<sup>3</sup>

These perspectives can perhaps be reconciled in the words a psychoanalyst supervisor once spoke to me, "Analysts may not be scientists in the strictest sense of that word; but they are certainly to be found among the lovers of science. For themselves and their patients, what they seek is the truth."

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#### REFERENCES

<sup>1</sup>CHUANG TSU *Inner Chapters* Trans. (1974) Gia-Fu Feng & Jane English. London: Wildwood House. Chapter Three 'The Secret of Growth'.

<sup>2</sup>Ibid Chapter Two 'The Equality of All Things'.

<sup>3</sup>Ibid Chapter Six 'The Great Master'.

### *Meeting potential colleagues*

DEAR SIRS

There appears to be some confusion over the protocol for meeting with potential colleagues when applying for a new post. One such applicant for a consultant post was severely criticised for failing to see such colleagues, although it later transpired that he had been advised that this would be seen as canvassing. Under these circumstances it might seem sensible to lay down what should be acceptable practice in this situation to help steer candidates between the risk of appearing to canvas or alternatively appearing apathetic.

As some posts may receive up to 60 applications it would be futile for all such applicants to attempt to meet all their potential colleagues. On the other hand they should certainly make sufficient enquiries to be sure the post is one they wish to pursue and it would also be sensible to meet with one of those responsible for short listing. Once the short list has been drawn up the candidate would be well advised to make himself available to meet all such colleagues as would wish to avail themselves of the opportunity. The candidate should not have attempted to meet with those on the interviewing panel who could be seen as outside assessors.

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### *Discharges by Mental Health Review Tribunals*

DEAR SIRS

It will be interesting to learn whether Dr Bermingham's promised further investigation (*Bulletin*, March 1987, 11, 96-97) into discharges by Mental Health Review Tribunals has included an examination of the extent to which Section 2 is used when Section 3 would be more appropriate. It is understandable that, when put in the position of needing to use the Mental Health Act 1983, those involved would prefer to exercise what is seen at that point as the minimum duration of detention. Nevertheless, Section 2 relates to the need for assessment, or, put another way, that the diagnosis is not initially sufficiently clear for definitive treatment to be offered without a period of clinical fact-finding. Yet, to judge by the thickness of the case-notes of the greater majority of patients admitted under Section 2, the diagnosis is already known, and the patient's treatment and management predictable.

There is no more difficulty in discharging a patient from Section 3 than from Section 2; Section 3 permits whatever time is necessary to arrange for after-care; the patient can even be sent on leave if lapse or relapse is thought likely, and the distasteful phenomenon of repeated use of Section 2 is avoided. The multidisciplinary hassle and aggravation of potentially harmful haste induced by application to the Tribunal by a patient under Section 2 does not occur.

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### *The legal aspects of psychiatry*

DEAR SIRS

Few psychiatrists with many years in practice will have not sought medico-legal advice at some time. As the service changes more issues with legal implications arise. Existing sources of medico-legal advice may be well able to assist psychiatrists with relatively uncomplicated queries. For the more complex matters psychiatrists may be left with the impression that their advisers are sometimes not completely *au fait* with the difficulties and problems which are more specific to psychiatric work in general and in its specialities.

For example, questions not infrequently arise about the ownership of, the copying of, and the availability to others, of psychiatric case files, including computer records, confidentiality, and responsibilities of multi-disciplinary team arrangements. The transfer of patients from mental hospitals to care in the community is exposing uncertainties about the legal responsibilities of hospital authorities, consultants, the rights of patients and the obligations of relatives.

Among the various interests which the Royal College of Psychiatrists pursues, the legal aspects of psychiatry do not appear to be represented by any distinct department or sub-