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TRIAL OF 'PIRACETAM' IN CHRONIC SCHIZOPHRENIA

DEAR SIR,

A double-blind cross-over trial of Piracetam (2 = pyrrolidone acetamide) v placebo has recently been completed on sixteen male and eleven female chronic schizophrenic in-patients aged 20 to 65 years, most of whom were severely disabled despite medication and sustained efforts at rehabilitation. The trial was stimulated by work suggesting that Piracetam improves interhemispheric transfer of visual information across the corpus callosum (Buresova and Bures, 1976) and reports of impairment of transfer of information across the corpus callosum in chronic schizophrenia (Rosenthal and Bigelow, 1972; Beaumont and Dimond, 1973). The drug has been used in a variety of psychiatric conditions on the continent, especially in chronic organic states where memory is impaired (Abuzzahab et al, 1973; Dencker and Lindberg, 1977). The dosage was 1,600 mg of Piracetam three times a day for four weeks, in addition to the long-term psychotropic medication the patients were already receiving. Assessment of response was by Wing's Symptom and Behaviour Rating Scales.

The drug failed to produce any significant change in either symptoms or behaviour in this group of patients. There was no apparent effect on blood chemistry, nor were any side-effects detected. A detailed report is available on request.

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SPECIALIST NURSES

DEAR SIR,

It was with dismay and concern that I read Professor Goldberg's frivolous review of Nursing in Behavioural Psychotherapy: An Advanced Clinical Role for Nurses (Journal, September 1977 131, p 320). It is unfortunate that so eminent a professor should treat an important development as a joke. Not only is it reactionary and prejudiced but it does not attempt to make a constructive critical appraisal of well researched work in which nurses and patients are so closely involved. The attitude adopted by Professor Goldberg takes no cognisance of a successful attempt to help sick people more quickly than might otherwise be the case. This extension of the nurse's role is but one of a series of advances being made by nurses in the clinical field and should be treated with the courtesy it deserves.

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DEAR SIR,

It is a pity that Professor Goldberg should utilize his obviously fertile imagination to do gross injustice to what is an important development for nurses, as well as a potentially important therapeutic advance for psychiatric treatment in this country.

Psychiatric nurse therapists do not wish to 'fly the aeroplane' but merely to ease the burden of the pilot by providing specialist intervention for patients who might, through lack of time or other resources, go