



columns

e-interview

Jim van Os

Jim van Os is Professor of Psychiatry at Maastricht University, The Netherlands and Visiting Professor at the Institute of Psychiatry, London. He trained in Bordeaux and London. His special interests are person–environment interactions in Psychosis and the development of community care services in the Netherlands.

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

Be a computer scientist – or possibly a mediocre science fiction writer.

Do you feel stigmatised by your profession?

No, I got used to the fact that the cardiac surgeon is highest in rank in the informal hierarchy of the University Hospital.

What are your interests outside of work?

None.

Who was your most influential trainer, and why?

Robin Murray – for being able to inspire ambitious and less ambitious people not only to work together but also to actually be nice to each other; and for looking after all of them when the work was done.

What job gave you the most useful training experience?

Being locum registrar for one year in l'Hôpital de Vauclaire, a huge asylum in the middle of the Dordogne where the registrars from the Bordeaux rotational scheme refused to go. This experience taught me how ugly psychiatry can become if it becomes dissociated from the community.

**What research publication has had the greatest influence on your work?**

Murray, R. M. & Lewis, S.W. (1987) Is schizophrenia a neurodevelopmental disorder? [editorial]. *BMJ* (Clinical Research Edition), **295**, 681–682.

What part of your work gives you the most satisfaction?

Seeing through a research project from beginning to end.

What do you least enjoy?

Meetings with bureaucrats.

What is the greatest threat facing the profession?

Not being allowed to take a leading role in the organisation of psychiatric services.

What conflict of interest do you encounter most often?

The temptation to forget how things might feel at the receiving end of power.

Do you think psychiatry is brainless or mindless?

Mindless.

How would you entice more medical students into the profession?

By telling them that brain–mind relationships are the last challenge in medicine.

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

Don't fill the holes in current knowledge with *a priori* theories – it is OK to NOT know.

What are the main ethical problems that psychiatrists will face in the future?

The proper application of increasingly sophisticated, selective and cleverly marketed psychotropic drugs.

How should the role of the Royal College of Psychiatrists change?

Find the inspiration to become the European College of Psychiatrists.

What is the future for psychotherapy in psychiatry training and practice?

Excellent – as it is impossible to get worse than it currently is.

What single area of psychiatric research should be given priority?

None – priority should be given to clever young people with curiosity-driven and preferably slightly crazy ideas, not to bureaucratic formulations of 'areas' that can only represent limits of current knowledge.

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

Community care for people with severe mental illness.

Dominic Fannon