

alcohol and drug misuse managerially, while maintaining separation of service provision. It stresses the need for in-patient beds for short and long-term admissions; other residential facilities; out-patient clinics; and day hospital places. A conservative recommendation is made for an average three beds per 100,000 population for the management of substance misuse, although it is acknowledged that this number would have to be adjusted according to socio-demographic factors. Undoubtedly, the very factors identified by Tomlinson would necessitate a higher number of beds in London; because 12 beds is the minimum number if a "group" approach is to be adopted and a therapeutic milieu developed, collaboration between districts would be essential to develop a supra-district unit. The College also recommends that there should be 0.6 whole time equivalent consultants specialising in substance misuse per 100,000 population, but again this will be influenced by factors such as social deprivation.

Conclusion

It is regrettable that the government in its response *Making London Better* (1993) is muted on the subject of mental health in general and on substance misuse in particular, although specific reference is made to the latter in the stated aim to modernise primary health care. Whatever improvements are achieved in line, say, with The Royal College of Psychiatrists' Report, it seems unlikely that substance misusers' use of the comparatively anonymous, open access facilities of accident and emergency departments will diminish significantly. Currently there are about

4,200 substance misuse-related presentations in London's accident and emergency departments each month – clear evidence of their important role in meeting the diverse health needs of these patients. In view of the significant public health and social problems associated with substance misuse, it should be the subject of a specialty review before any changes are implemented that might adversely affect the services delivered to this vulnerable group. If there is any doubt about the importance of these services it should be remembered that there may be as many as 40,000 deaths annually in England and Wales due to excessive alcohol consumption and that injecting drug misuse is currently the most rapidly increasing category of exposure among those developing HIV/AIDS. Any deterioration in service could have a disastrous effect on public health in London.

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Lynette Napper

The Officers and the Secretary are extremely sad to announce the sudden and untimely death of Lynette Napper, Deputy Secretary and Education Officer at the College. Lynette died on Saturday, 28 August, after a brief illness.

Lynette joined the College in 1985 as Education Officer and she became Deputy Secretary in 1986. Many Members of the College will be very aware of the enormous contribution that she made to the work of the College. Her recent work on the preparation of

the Presidential report *Mental Health of the Nation* and the College's response to the Ashworth Inquiry demonstrated her particular skill in producing succinct yet elegant prose from a mass of written material.

Lynette was a popular member of staff, with a delightful sense of humour. She was always willing to listen to colleagues' problems and offer wise advice. She will be deeply missed by everyone at the College.
