exceptions to the duty of confidentiality. The only exception which appeared relevant appeared to be the public interest. As I pointed out, and Dr Bronks agreed, the case of W. v. Edgell covered very different facts and would not be a valid authority. Other cases on disclosure in the public interest do not cover the issue.

Dr Bronks is mistaken in assuming that I wish to end the practice of case studies being written. I am suggesting that the patient's consent is obtained or identification made impossible. He does not state in how many of the published case studies consent was obtained or identification prevented. Because of the need for clarification in law, the Royal Colleges, professional bodies and numerous health professional associations have drafted a Bill Governing the Use and Disclosure of Personal Health Information (1994). This Bill envisages that the patient should consent to the use of identifiable information as part of training in medicine, nursing or other health care.

It should be realised that there are many other health professionals apart from doctors who write up case studies of patients. I would suggest that the same principles on confidentiality should apply to them all.

BRITISH MEDICAL ASSOCIATION (1994) Draft Bill Governing the Use and Disclosure of Personal Health Information.

FINCH, J. (1994) Speller's Law Relating to Hospitals (7th edn). London: Chapman & Hall.

Fitchett v. Furness (1995) New Zealand Law Report, 396.

MASON, J. K. & McCall Smith, R. A. (1967) Law and Medical Ethics (2nd edn), p. 136. Citing the case of Duchess of Argyll v Duke of Argyll (1967) Ch. 302. 1965, 1 All ER611 and authorities in text books. Butterworths.

Stephens v. Avery and others (1988) 2 All ER477.

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A HUNDRED YEARS AGO

"The Association of Workers in Asylums for the Insane."

To the Editors of THE LANCET

SIRS,—I notice in THE LANCET of July 27th, under the above heading, that a meeting has been held at which Sir B. W. Richardson delivered an address. He is reported to have said that "education and training raised the status and increased the usefulness of nurses, and this experience will no doubt be repeated when the same conditions are applied to attendants on the insane." I cannot allow such a statement as this to pass unchallenged. For many years past the attendants and nurses on the insane have been carefully educated and trained. After a period of two years, during which the attendants and nurses have to attend a dozen lectures and the same number of clinical demonstrations in the wards of a hospital for the insane, they are examined, and, if successful, are granted a certificate of proficiency in nursing the insane. The superintendent of the hospital trains his attendants and nurses, but he has nothing to do with their examination. The written portion is conducted by examiners appointed by the Medico-Psychological Association of Great Britain and Ireland, and the clinical and vivâ voce part by an examiner who is generally the superintendent of a neighbouring asylum. The severity of the examination is shown by the fact that at every examination a number of candidates are plucked. The result of the education, training, and examination has been to increase the usefulness of the nurses and attendants, who now take a more intelligent interest in the cases under their care; while, as regards their status, it is quite on a par with hospital trained nurses. Indeed, some of the latter are anxious to obtain the certificate, and a scheme is on foot for admitting them to the examination after a definite period of training. Altogether more than 1000 nurses and attendants possess the certificate which is granted by the Medico-Psychological Association of Great Britain and Ireland.

I am, Sirs, yours faithfully,

FLETCHER BEACH, Honorary General Secretary, Medico-Psychological Association of Great Britain and Ireland. Welbeck-street, W., July 30th, 1895.

Reference

Lancet, 3 August 1895, 281.

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