



obituaries



Albert West

Former Consultant Psychiatrist
St Crispin Hospital, Northampton

Albert West died suddenly on 20 August 2001. After qualifying MBChB (1958) in Birmingham he trained in psychiatry in Manchester under Professor E. W. Anderson. In the early 1960s the Manchester School was noted for a phenomenological approach that left Albert confident and well qualified to practise as a consultant when he was eventually appointed to St Crispin in 1972. He was soon in charge of the centralised day centre and later directed the intensive treatment unit and the forensic assessment unit. He obtained the DPM in 1965, the MRCPsych in 1971 and was later elected to the Fellowship in 1985.

He was appreciated as a patient and thoughtful teacher and his calm and courteous manner and his popularity with his colleagues soon resulted in many administrative posts and the chairing of committees. A wicked sense of humour (his humorous tales of everyday mishaps, mostly against himself, brightened his colleagues' days) was underpinned by a firm religious conviction that inevitably coloured his everyday work. Above all, Albert helped people, both his patients and friends who had problems and needed advice.

He had a special interest in forensic psychiatry and following his retirement from the NHS in 1994 he continued with medico-legal work and as an adroit member of mental health review tribunals. In that work he relished exercising his logical mind and he approached this task without fear or favour.

His interests were photography and reading, but much of his free time was spent on church work. His valued friendship will be missed by many. He is survived by his wife, Margaret, and his son, Stephen.

George Hay

Dr John David Waite Fisher

Former Consultant Psychiatrist
Ticehurst House Hospital
Wadhurst, East Sussex

John Fisher – David to his friends, family and colleagues – died on 3 December 2000 after a year's illness. To me he was the backbone of the psychiatric services in North Kent, the font of psychiatric wisdom as well as plain commonsense, for David was a plain, good man. From his childhood his health was never robust. Rather than a sporting school, his family sent him to Bootham Quaker School in York, where his exposure to the Quaker meeting may have expanded into his later interest in therapeutic communities. The family business was in the Bradford wool trade, and after school both he and his brother seemed destined for a Priestleyan life, but witnessing his father in a typically outspoken business meeting with a colleague convinced David that his interests lay elsewhere. His first love was in nature and he astounded his family with the choice of a degree course in agriculture at Clare College, Cambridge. A delightful postgraduate year followed his MA, spent on 'field research' in the fens and pubs of rural Cambridgeshire. Then came the sort of incident that changes the course of one's life. Plagued by sinusitis, at 23 he was operated on with nearly fatal results, and this convinced David to devote himself to medicine. He continued at Cambridge, now in medical studies, and graduated MBBS (1957) and elected FRCP (Edinburgh) in 1975. Health intervened again at this stage: his longstanding eczema was so severe and visible that David eschewed a 'hands-on' speciality.

After his house jobs, David went straight to a psychiatric post in Aberdeen and then at the Royal Edinburgh Hospital on one of the earliest rotational training schemes. David's career spans many important post-war developments in British psychiatry. He passed his MRCPsych in 1971 and elected FRCPsych in 1974. He was in charge of long-stay and psychogeriatric wards, he ran an early sector service in Surrey and he reorganised a rehabilitation unit on therapeutic community lines. He was a senior registrar at the Middlesex Hospital, became a consultant at Warrlingham Park Hospital and psychiatric adviser to the London Borough of Croydon. In Croydon he ran the new day hospital and was the psychiatrist working with the newly formed community psychiatric nursing service. In 1976 David moved to North Kent, as consultant at Oakwood Hospital, being one of the two consultants in the psychiatric service of the Medway Towns, which had always been semi-independent



of the local mental hospital. David's view was that the consultant should, in the main, stay out of the hospital, within his/her community. Long associated with teaching, he held one of the early honorary academic posts at Guy's Hospital, and was instrumental in persuading London medical students to peripheral attachments, which they came to hold in high regard. He was an energetic member of College educational committees. As Clinical Tutor at Oakwood Hospital, David started the rotational training scheme, which became one of the largest rotations in the south-east. As medical manager, he was a good negotiator, who brought a bluff Yorkshire commonsense to the arcane world of mental health services, but underneath was the keen brain of someone who knew where he was going. David was an excellent clinician, balanced and thorough. His relaxed manner in the ward round, with his shoes off for comfort, was loved and caricatured by his team. Since his death, tributes have poured in from the mental health review tribunals and the Mental Health Act Commission, where he was a popular medical member. David was a sociable man, a *bon viveur* who loved to travel the world with his wife, Pat. The beautiful garden of their cottage was the object of his devotion and the expert agricultural knowledge from his early years. A lifelong friend and colleague said that David is an easy subject for a eulogy; a gentle, kind man who gave his all for his work, his patients and his family.

R. L. Symonds

Arnold Stanley Thorley

Former Consultant Psychiatrist
Belmont Hospital, Sutton, Surrey

Arnold Thorley died on 27 March 2001 at the age of 94. He was born on 7 January 1907. He studied medicine at University College Hospital, London, and qualified



MRCs, LRCP, in 1932 and graduated MBBS (London) in 1934. He was awarded the MD (London) in 1939. Having decided to devote himself to psychiatry he obtained the DPM in 1936 and was elected to the FRCPsych as a Foundation Fellow.

During the Second World War he was a consultant psychiatrist on the staff of Belmont Hospital, Surrey, a war hospital

for both civilians and combatants suffering from a variety of psychological trauma. Thorley had as colleagues some of the most eminent names in the history of British psychiatry, such as Louis Ninski, Eric West, Will Sargent and Eliot Slater.

Thorley was a retiring man, but took a keen interest in the local affairs of the Bookham, Surrey, community where he

lived and where he was a prime mover in the rambling club.

In later life he became a qualified indexer and he gave invaluable service as an indexer for the *British Journal of Psychiatry* and the *Psychiatric Bulletin* for many years.

Henry Rollin

reading about

Self-help books on eating disorders

This article focuses on books that offer some kind of self-help programme or set out a pathway to recovery. Two exceptions are my recommendations of *Understanding Eating Disorders* by Palmer (1996) and *Eating Disorders. A Parents' Guide* by Bryant-Waugh and Lask (1999). *Understanding Eating Disorders* is a booklet that provides information about the main categories of eating disorders in a friendly way, and has the advantages of low cost and of being widely available from that rack of books about piles, diabetes and a myriad of other conditions, which appears in many chemist shops. *Eating Disorders. A Parents' Guide* is a paperback intended for parents of children with a serious eating disorder, and acknowledges with understanding the wish of parents to help their child recover. It distinguishes the normal range of eating behaviours from a clinical disorder, and provides advice about when and how to seek help, and what help is available.

Anorexia nervosa

There is something of a dearth of self-help books for people with anorexia nervosa. This undoubtedly reflects the complexity of dealing with anorexia, and the fact that professional, and often specialist, help may be needed. In addition, the ambivalence to change, which is associated with anorexia, also makes this condition less amenable to self-help. However, the two most widely used books are both excellent, and may be read by the sufferer alone, or a professional dealing with such patients. *Anorexia Nervosa – The Wish to Change*, (Crisp et al, 1996) is a short readable text that addresses the ambivalence associated with change, and then goes on to lay down 30 steps towards recovery. There is a work section, which includes paper exercises, and finally a chapter that gives practical information, for example about nutrition and where to turn to for additional help. The other main text is *Anorexia Nervosa: A Survival Guide for Families, Friends and Sufferers* (Treasure,

1997). It too is reasonably short and readable. It includes four sections: an overview of anorexia, a section for carers, a section for sufferers and guidelines for professionals. I found the chapter for carers particularly interesting as it attempts to address communication difficulties and encourage a collaborative approach to problem-solving. The chapters for sufferers set out step-by-step guidelines.

Bulimia nervosa and binge eating disorder

There is a wider variety of texts on bulimia nervosa and binge eating disorder, and the boundary between self-help programmes and information with some advice thrown in is less clear. There are several books set out as manualised programmes. One of these is *Overcoming Binge Eating* by Fairburn (1995). Although it looks off-putting, with a large number of graphs and charts, it makes a surprisingly easy read as soon as you start, and has the advantage of being authoritative and engendering confidence. It quotes various research trials to support the methods described and is divided into two sections; one psychoeducational and the other a rigorous and clear programme based on cognitive-behavioural techniques. A further advantage is that Fairburn and Wilson (1993) have written a cognitive-behavioural therapy (CBT) treatment manual, which constitutes the final chapter of *Binge Eating – Nature, Assessment and Treatment*. This manual provides guidance for professionals who may wish to help their patients through a CBT self-help programme, specifically that contained within *Overcoming Binge Eating* (Fairburn, 1995).

Another useful book is *Bulimia Nervosa and Binge Eating* by Cooper (1996). It too is divided into two sections, the first being psychoeducational and the second a manualised self-help package. This programme is based on a cognitive-behavioural approach, which takes the reader through six steps, with review of the previous step before proceeding to the next one. It is practical and easy to understand, and shorter than *Overcoming Binge Eating*. Both of these books stress

the importance of mastering each step before moving on to the next, but may discourage a minority of people who struggle and get stuck at a particular point.

Another book that offers guidance for professionals is the *Clinician's Guide to Getting Better Bit(e) by Bit(e)* by Schmidt and Treasure (1997). It is divided into two parts: the clinician's guide, which stresses problems with ambivalence to change and gives a clear account of Miller and Rollnick's motivational interviewing, and the self-help manual, which is also published separately as a paperback, *Getting Better Bit(e) by Bit(e)* (Schmidt & Treasure, 1993). The self-help manual is friendly and approachable, with worksheets and cartoons and extracts from real cases. It has a more relaxed style and invites the reader to dip in and out, while conveying expertise and confidence.

The Cullen Centre Self Help Manual for Bulimia Nervosa by Freeman et al (1998) unfortunately has not been published as a book, but is available by mail from the Cullen Centre (Royal Edinburgh Hospital, 29 Morningside Terrace, Edinburgh EH10 5HD). I include it because I think it is a valuable addition to the literature. The text takes a modular approach, and the manual describes CBT techniques. There is plenty of psychoeducational material, including a useful segment on nutrition, and there are regular summary points, homework assignments and homework reviews. The manual focuses on different ways out of the dilemma, with clear guidelines about changing eating patterns.

Beyond Chaotic Eating is written by an ex-sufferer and counsellor, Wilkinson (1993). Although sensitively written, and offering some useful advice, it contains some inaccuracies, and is occasionally antipsychiatrist. It also neglects the acknowledgement of the need for hospital help at times, which is of concern as the text addresses both anorexia and bulimia. It has quite a heavy Christian bias, which may not suit all patients. *Overcoming Overeating* by Hirschmann and Munter (2000) concentrates on changing self image and challenging myths about food, eating and self. It has valuable practical advice, and spends a lot of effort on teaching the reader to recognise body