

References

- AUDEN, W. H. & KALLMAN, C. (1951) *The Rake's Progress* (libretto). London: Faber & Faber.
- CRAFT, R. (1992) *Stravinsky: Glimpses of a Life*. London: Lime Tree.
- CRICHTON, P. (1995) Stravinsky, Hogarth and Bedlam. *Psychiatric Bulletin*, **19**, 496–498.
- POST, F. (1994) Creativity and psychopathology. A study of 291 world-famous men. *British Journal of Psychiatry*, **165**, 22–34.
- WHITE, E. W. (1979) *Stravinsky: The Composer and his Works*, 2nd edn. London: Faber & Faber.

MICHAEL PHILPOT
Maudsley Hospital, Denmark Hill,
London SE5 8AF

Sir: Dr Philpot is right to describe my account of Stravinsky's musical output in the 1940s as 'misleading' in that I should have made it clearer that it was not so much the quantity as the quality of his work which disappointed many of his admirers: much of it was, by comparison with his earlier achievements, relatively lightweight and conventional.

That Robert Craft's attitude towards Stravinsky was ambivalent is hardly surprising. However, as Stravinsky's close collaborator and friend he remains, apart from Stravinsky himself, the crucial source of information about Stravinsky's life and works after 1948. Dr Philpot claims that there is no evidence from contemporary memoirs that Stravinsky was depressed, although in the very memoir quoted by Dr Philpot, Craft (1992) makes several references to the crisis in Stravinsky's career and to Stravinsky's distress about the lack of originality in his work in the late 1940s and early 1950s. It was for this reason, according to Craft, that he let himself be persuaded to study the serial composers, Schoenberg and Webern. This view has been endorsed by the Stravinsky expert, Walsh (1993), who is preparing a biography of the composer.

Dr Philpot wonders what de Falla, Satie and Nijinsky may have to do with Stravinsky's mental state at this time, although this is clearly explained in my article. Aware of the psychological vulnerability of these artistic colleagues, whom he had known personally, Stravinsky, himself notoriously hypochondriacal, may have been fascinated by the figure of the mad musician in the Bedlam scene of Hogarth's *Rake's Progress* because he feared that he might lose not only his creativity, but his sanity.

It is unfortunate for Dr Philpot that his eagerness to score some superficially smart points reveals an equally superficial acquaintance with the contents, both of my article and the relevant sources. Perhaps the final moral of his letter is that only well-informed criticism is convincing and that polemics are no substitute for perusal.

References

- CRAFT, R. (1992) *Stravinsky: Glimpses of a Life*. London: Lime Tree.
- WALSH, S. (1993) Igor Stravinsky. In *The Viking Book of Opera* (eds A. Holden, N. Kenyon & S. Walsh). London: Penguin Books.

P. CRICHTON
Maudsley Hospital, Denmark Hill,
London SE5 8AF

The dilemma of psychiatrists in training

Sir: I was interested to read the letter from Dr de Vries *et al* (*Psychiatric Bulletin*, January 1996, **20**, 53) concerning the place of examinations in the training of entrants to psychiatry. It is not the first time that the view has been expressed that examinations are a hindrance rather than an asset in this procedure.

I believe that your correspondents do the College a dis-service in emphasising the place of the examinations for the MRCPsych and ignoring the very considerable attention that the College has given to stressing the importance of satisfactory clinical experience, of supervision in clinical work and a range of formal teaching activities. In this context the examinations mark the completion of a comprehensive and planned period of training. After all, most trainees who have undergone approved training have little difficulty in satisfying the examiners.

An important feature of the examinations for Membership of the College and the training which precedes them is that they are the same for all entrants to our profession no matter which branch of psychiatry they subsequently enter. Specialist training at senior registrar level (soon to be specialist registrar) does not involve further examinations but is along the lines described by your correspondents. I believe that this generic training common to all psychiatrists has been a major factor in the success of the training schemes overseen by the College and by the JCHPT. How else, but by an examination could future specialists be encouraged to study the subject more broadly in their early years.

I believe that there is some truth in your correspondents' assertion that the examinations for MRCPsych have done little to encourage the teaching of research or to foster it among trainees. Changes are planned in the MRCPsych examinations which will go some way to meeting this deficiency. Details of these changes will be announced in due course. Readers will see from the recently published *Curriculum for the Examinations* that research methodology is an area of knowledge required of candidates.

R. H. S. MINDHAM
Chief Examiner, School of Medicine, University of
Leeds, Leeds LS2 9LT