

mystery as rather to point out that there are difficulties attending the psychiatric practice of treating different types of psychiatric problems as all equally 'medical'. Kendell, in fact, lends strong support to my arguments, as expressed most recently in my Methuen pamphlet on *The Future of Psychiatry*, by concluding that the functional psychoses would, on his criterion, be 'diseases', while neuroses and 'the ill-defined territory of personality disorder' cannot (at least as yet) be so regarded. That, of course, was the basis of my argument in that pamphlet (and earlier in my *Handbook of Abnormal Psychology*); that psychiatry was in fact split in two parts, one medical, dealing with what might justifiably be called 'diseases', and the other behavioural, dealing with behavioural maladjustments and constituting a psychological-educational rather than a medical problem. The argument about 'lesions', although important, probably distracts attention from the major difference. Kendell's arguments would seem to support my position, although only implicitly.

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SUBJECTIVE AGE IN CHRONIC SCHIZOPHRENIA

DEAR SIR,

We read with interest the recent article by Crow and Mitchell (*Journal*, April 1975, 126, p 360), and as we were in the process of testing a random sample of psychiatric in-patients in connection with another project we decided to obtain subjective ages on these patients as well. As a result, subjective ages were obtained from 144 patients in the various wards of Harlem Valley Psychiatric Center, Wingdale, New York. Responses from four of these patients were eliminated because of vagueness or extremeness (e.g. '30 to 40 years old', '1,000 years old').

The subjective age-distribution obtained is quite similar to that obtained by Crow and Mitchell (Table).

Crow and Mitchell conducted additional analyses on those patients who reported themselves to be five or more years younger than they really were. They found that 27 per cent of their sample fell in this category, with a mean true age for these patients of 59 years and a mean duration of stay of 26 years. Corresponding figures in our series were 28 per cent of the entire sample, with a mean true age of 53 years and a mean duration of stay of 18 years.

Among their patients whose subjective age was five or more years younger than their real age Crow and

Mitchell attached particular diagnostic importance to those whose subjective age was within five years of their age upon admission. They found 26 patients (12 per cent) in this category, while we found 12 (9 per cent).

Our results are very similar to those of Crow and Mitchell, despite the fact that the composition of the two samples differed. Their sample consisted of only chronic, male schizophrenics, while ours consisted of males and females, schizophrenics and a few non-schizophrenics, and short-term and long-term patients. Interestingly, although our sample was more varied, of the 12 subjects in the critical group (i.e. those who reported their ages to be five or more years less than their actual age and within five years of their age at admission) 11 were diagnosed as schizophrenics and 10 of these were males.

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TABLE
Comparison of two subjective age studies

| | Crow-Mitchell | | Smith-Oswald | |
|---|---------------|-----|--------------|----|
| Males | 220 | | 71 | |
| Females | 0 | | 69 | |
| Mean age (years) .. | 54 | | 49 | |
| Mean length of stay (yrs) | 19 | | 15 | |
| <i>Distribution of subjective ages</i> | | | | |
| | N | % | N | % |
| I. Correctly reported age | 80 | 36* | 51 | 36 |
| II. Subjective age within 5 years of actual age .. | 74 | 34 | 39 | 28 |
| III. Subjective age \geq 5 years below actual age | 60 | 27 | 39 | 28 |
| IV. Subjective age \geq 5 years above actual age | 6 | 3 | 11 | 8 |

* Based on a sample of 220.

SCHIZOPHRENICS' FAMILIES

DEAR SIR,

The use of a controlled family study (Stephens *et al*, *Journal*, August 1975, 127, pp 97-108) to investigate the schizophrenic 'spectrum' appears to have potential for clarifying the diagnostic boundaries of