- b usually takes place in the neonatal period
- c should be delayed as long as possible
- d may be improved by using published checklists
- e means that responsibility for health care passes to specialists in learning disability
- 3 These statements about epidemiology are true
  - a about 2 % of the population have a learning disability
  - b A GP's list of 2000 will have one child with severe learning disability born in the practice yearly
  - c about 50 % of people with learning disabilities have mild learning disability.
  - d autism is associated with epilepsy
  - e at one time, most people with learning disabilities lived in institutions

- 4 Primary care teams
  - a may employ Community Learning Disability Nurses
  - b have little to offer families except referral to specialists
  - c can be more effective if Community Teams prepare the patient for an examination
  - d could conduct audit of long-term prescribing jointly with specialists
  - e sometimes use checklists or protocols suggested by specialists

1	2	3	4
a F	a T	a T	а Т
b F	b F	bF	b F
сТ	c F	c F	сТ
d F	d T	d T	d T
еТ	e F	e F	еТ

## Correspondence

## Preparing a medico-legal report

SIR: The excellent article by Bluglass (APT, May 1995, 1, 131-137) highlights a challenge for the Editor if Advances in Psychiatric Treatment is to become the major journal of continuing professional development for psychiatrists throughout the British Isles. Bluglass acknowledges the "differences between the jurisdictions of the United Kingdom" but then deals exclusively with the English Mental Health Act and the English legal system. Practising in a country with no coroner's courts, Mental Health Act Commission or mental health review tribunals, and a Mental Health Act that does not extend to psychopathic disorder, most of the specific issues requiring a medico-legal report discussed by Bluglass are, at best of no relevance to me, and at worst confusing and misleading.

How should the different legal and administrative systems in Scotland, Northern Ireland and the Republic of Ireland be covered? The editors of *Seminars in Practical Forensic Psychiatry* (Chiswick & Cope, 1995) have probably struck the right balance. Relevant chapters have appendices written by psychiatrists practising in the rest of the British Isles setting out the legal and administrative arrangements pertaining to their country or province. The chapter is therefore of educational value to those practising outside England. Could a similar system be adopted by *APT*?

Chiswick, D. & Cope, R. (eds) (1995) Seminars in Practical Forensic Psychiatry. London: Gaskell.

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EDITOR'S REPLY: Dr Pullen makes an important point and in future Advances in Psychiatric Treatment will aim to have relevant information for other parts of the British Isles when there is specific reference to English law. I wonder if readers in England and Wales would have other requests for articles in APT more geared to their requirements, for example, on management aspects of psychiatry? We welcome correspondence and we also welcome suggestions for future articles.