

in psychiatric hospitals consisted of whipping the patients, one would hope that those who wished to retain it might be influenced by the discovery that the procedure was not effective in its purpose.

I am much more puzzled by Dr. Carr's list of 'practical realities'. Where does Dr Carr stand—in favour of compulsory attendance or not; curriculum teaching or not? The suppression of homosexual and heterosexual drives or not? And does he subscribe or not to the political system in which the educational services are organised?

It rather seems that he is on the side of 'freedom' at a level which is beyond that which many people would consider desirable. If, however, there is to be no compulsion on these matters there would be little left where coercion would have to apply.

Compulsion is, in fact, inextricably bound up with the law concerning education; but at times the nature of the application of that compulsion is too high a price to pay for some questionable benefits. The Report presents the view that corporal punishment is such an instance.

J. H. KAHN

29 Antrim Mansions,  
Antrim Road,  
London NW3 4XU

#### THE PSYCHIATRIST'S RESPONSIBILITIES IN MENTAL HANDICAP

DEAR SIR,

Dr Day draws attention to some special aspects of the practice of psychiatry with the mentally handicapped and concludes that these give rise to a 'serious misconception' about clinical responsibilities in this field compared to general psychiatry (*Bulletin*, December 1977). His argument is based on the number of mentally handicapped persons whose primary needs are for social or educational measures, a proportion of whom are in hospitals.

Whilst broadly agreeing with this, I would point out that the services for the mentally ill are also involved with an increasing diversity of patients presenting as social and other 'non-medical' problems. One essential difference is the way in which our general psychiatric colleagues have applied themselves over the years with greater energy and in much larger numbers to expanding the boundaries within which legitimate psychiatric contributions can be made.

Dr Way (*Bulletin*, March 1978) indicates some of the largely unexplored and exciting territory in mental handicap which it seems to me we could investigate more effectively if we did not have to devote so much time to the multidisciplinary

doctrine, rather than its practice. Dr Clark (*Journal*, 131, 553) reminds us of the rise and relative fall of the 'therapeutic community'; in a decade hence we could be reading a similar account of the fate of the multidisciplinary.

T. L. PILKINGTON

*Mental Handicap Service,*  
*Brierthorpe,*  
*163 Durham Road,*  
*Stockton-on-Tees,*  
*Cleveland TS19 0EA*

#### DR SEMYON GLUZMAN

DEAR SIR,

On 11 May Dr Leila Harvey arranged a meeting in Manchester to promote International Gluzman Day, 12 May, when Dr Semyon Gluzman had been in captivity for six years; he will have one more year to serve in a Soviet forced labour camp plus three years Siberian exile. The meeting, attended by professors, consultants, G.P.s, interested members of the public, and addressed by three psychiatrists, expressed strong concern that pressure and publicity should be maintained on Dr Gluzman's behalf, one of the bravest members of our profession. Almost alone among doctors inside the Soviet Union he exposed his country's abuse of psychiatry for the purpose of political repression. A telegram bearing 34 signatures was dispatched from the meeting to President Brezhnev appealing for Dr Gluzman's release.

In order to ensure that the Soviet authorities are kept aware of continued concern by doctors in the West it is planned that a constant flow of letters to Dr Gluzman be maintained using a method which makes it certain that at least some reach their destination. Details of the method, and also further information on Dr Gluzman may be obtained from Dr S. Bloch, Warneford Hospital, Oxford OX3 73X or Dr Leila Harvey, 5 Firs Avenue, Firwood, Manchester M16 0EP. Tel: 061-881 6851.

S. SHAFAR

*Macartney Day Department,*  
*North Manchester General Hospital*  
*(Division of Psychiatry),*  
*Crumpsall,*  
*Manchester M8 6RB*

#### LEAFLET FOR PARENTS OF STILLBORN CHILDREN

DEAR SIR,

I was very interested to read about this leaflet (*Bulletin*, April, p 69) and would agree with most of