

From the Editor's desk

By Peter Tyrer

A coterie of rotaries

I dislike driving through places that are infested with roundabouts, which in the US are called rotaries. These coiled monstrosities – the largest of which in England is appropriately called Spaghetti Junction – force you to change course for no good reason, throw you off balance, have no indication of rights of way and so stimulate the base driving instincts of primitive man, and all too often bring you back to the place where you started. At least they do for me, but spatial awareness was never my strongest asset. So what has this got to do with this sophisticated column? Well, it is unfortunate that many articles describing original work are stuck on the roundabout of science; they signify a change in course but they too end up where they began. The trouble is that it is only in retrospect that we can decide they are wrong. In this month's issue I am asking you to guess where we are on the psychiatric highway. Does the evidence of the effectiveness of inhaled loxapine in reducing the agitation of psychosis (Lesem *et al.*, pp. 51–58) signal another change in emergency tranquillisation,¹ do the findings of Joinson *et al.* (pp. 17–23) and Chen *et al.* (pp. 31–36) indicate new needs in economic black or blue skies,² and should Facebook carry a public health warning about early mortality for those who have eating problems (Becker *et al.*, pp. 43–50)?³ Our editorials and reappraisals can give a wider perspective and so improve our navigational skills. Fifty years after Erving Goffman's seminal book *Asylums* we can appreciate its real message (Mac Suibhne, pp. 1–2); it is not that psychiatric hospitals are intrinsically bad, but they are when they dehumanise, and our old asylums facilitated the dumping of human kindness in favour of utilitarian ignorance. Today we are all community psychiatrists, even in countries where asylums ruled until very recently,⁴ but even here there may be room for reappraisal as the pressures of community care affect our performance.⁵

I have convinced myself over the years that, although we may have got psychiatric diagnosis wrong in so many areas, at least we could be confident that with eating disorders we had got it right. We had two separate disorders, anorexia nervosa and bulimia nervosa, which had clear differences in presentation and incidence.⁶ Fairburn & Cooper (pp. 8–10) shatter this complacency by reminding us that the clumsy 'eating disorders not otherwise specified' (EDNOS), a diagnosis clearly stuck on the roundabout if ever there was one, is now the dominant diagnosis in practice. Let us hope that binge-eating disorder, a relatively homogeneous new variant, can become an approved diagnosis shortly⁷ and improve the value of our classification. Finally, if you want to avoid roundabouts altogether and follow a straight road to contentment, it is clear from the evidence of Gibb *et al.* (pp. 24–30) that a stable partnership is the answer to an existence free of psychiatric confusion.

Eliminating Chinglish

I have just returned from Shanghai after an intensive meeting that constituted the first stage of the prediction in one of my recent columns⁸ that in 2059 a reformed *Chinese Journal of Psychiatry* would be the dominant world journal in the psychiatric literature. Our Chinese colleagues are learning fast and, with the help of that global mover and shaker, Norman Sartorius, are improving their writing skills with a planned and coordinated influx of editors from psychiatric journals, including me. In this context I was pleased to note that our hosts were impressed by the yellow of our journal as it was the colour of imperial China and traditionally superior. But we all agreed that the new Chinese journal, represented in embryonic form by the *Shanghai Archives of Psychiatry*, the oldest of the psychiatric journals,¹⁰ needed to improve its presentation of English and to eliminate the unsatisfactory alternative, Chinglish, from its writings. Although we are increasingly publishing very well-written papers from China – the recent interesting paper on mortality in schizophrenia is an example⁹ – there is still some way to go. The replacement of 'ah, so' by 'I understand fully' is a sensitive issue. I felt it important to approach this delicately in the form of verse, which, incidentally, you will observe, is also a rotary.

To separate English from Chinglish
Requires a linguist to distinguish
The choice of each particle
Both decorous and visible
That should never be missable
And words floating free in transition
Between puzzlement and derision
Just need the right preposition
To take the unstoppable route
Towards a clear logical suit
And avoid ending as gobbledegook
All these errors we must extinguish
To separate English from Chinglish

Happy New Year!

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