

Authors' reply: We are pleased that our article has stimulated debate. This was our intention. We are disappointed that some correspondents dismiss our argument by attacking a stereotype of who they think we are or a caricature of what they think we might have said, rather than addressing what we actually did say. Such correspondents have missed, or ignored, the point of the article – namely, to ask whether the de-medicalisation that has taken place over recent years in British psychiatry is bad for the health of patients and the specialty. We believe this is a question that is worth taking seriously. It is clear from the substantial correspondence and other feedback that many psychiatrists share our concerns and wish for constructive debate.

This primary concern with the decline in medical standards of care and the deliberate politicisation of debates about service delivery does not imply that we cannot (a) embrace the importance of the full range of biological, psychological and social interventions for psychiatric illness and (b) value our non-psychiatric fellow professionals and their integral contributions to mental healthcare. We also believe to be self-evident that services should be informed by the experiences of patients, their relatives and carers, and that multidisciplinary teamwork is crucial for optimal management of psychiatric illness. We are not terribly interested in what is past. We are much more interested to look ahead.

Of the wide range of views expressed by respondents, we believe the voice of trainees and those contemplating a career

in psychiatry should carry particular weight and we should like to hear more from them. They are the future of British psychiatry.

Nick Craddock, Department of Psychological Medicine, Medical School, Cardiff University, Heath Park, Cardiff CF14 4XN, UK. Email: craddockn@cardiff.ac.uk; **Danny Antebi**, Gwent Healthcare NHS Trust, UK; **Mary-Jane Attenburrow**, **Tony Bailey**, Warneford Hospital, University of Oxford, UK; **Alan Carson**, Royal Edinburgh Hospital, UK; **Phil Cowen**, Warneford Hospital, University of Oxford, UK; **Bridget Craddock**, ABM University NHS Trust; **John Eagles**, Royal Cornhill Hospital, Aberdeen, UK; **Klaus Ebmeier**, Warneford Hospital, University of Oxford, UK; **Anne Farmer**, Institute of Psychiatry, London, UK; **Seena Fazel**, Warneford Hospital, University of Oxford, UK; **Nicol Ferrier**, Institute of Neuroscience, Newcastle University, UK; **John Geddes**, **Guy Goodwin**, **Paul Harrison**, **Keith Hawton**, Warneford Hospital, University of Oxford, UK; **Stephen Hunter**, Gwent Healthcare NHS Trust, Torfaen, UK; **Robin Jacoby**, Warneford Hospital, University of Oxford, UK; **Ian Jones**, **Paul Keedwell**, **Mike Kerr**, Department of Psychological Medicine, Cardiff University, UK; **Paul Mackin**, Institute of Neuroscience, Newcastle University, UK; **Peter McGuffin**, Institute of Psychiatry, London, UK; **Donald McIntyre**, **Pauline McConville**, **Deborah Mountain**, Royal Edinburgh Hospital, UK; **Michael C. O'Donovan**, **Michael J. Owen**, Department of Psychological Medicine, Cardiff University, UK; **Femi Oyebo**, Department of Psychiatry, University of Birmingham, Queen Elizabeth Psychiatric Hospital; **Mary Phillips**, Department of Psychological Medicine, Cardiff University, UK, and Department of Psychiatry, University of Pittsburgh School of Medicine, USA; **Jonathan Price**, **Prem Shah**, Warneford Hospital, University of Oxford, UK; **Danny J. Smith**, **James Walters**, Department of Psychological Medicine, Cardiff University, UK; **Peter Woodruff**, Department of Academic Clinical Psychiatry, Sheffield University, UK; **Allan Young**, Department of Psychiatry, University of British Columbia, Canada; **Stan Zammit**, Department of Psychological Medicine, Cardiff University, UK

doi: 10.1192/bjp.193.6.517