

Subscriptions

International Psychiatry is published four times a year.

Subscription: £15.00 per annum.

For subscription enquiries please contact: Publications, Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG.

Editor

PROF. HAMID GHODSE

Editorial board

DR JOHN HENDERSON

MR DAVE JAGO

DR NASSER LOZA

DR BRIAN MARTINDALE

DR SHEKHAR SAXENA

PROF. DAVID SKUSE

Design © The Royal College of Psychiatrists 2005.

For copyright enquiries, please contact the Royal College of Psychiatrists.

All rights reserved. No part of this publication may be reprinted or reproduced or utilised in any form or by any electronic, mechanical or other means, now known or hereafter invented, including photocopying and recording, or in any information storage or retrieval system, without permission in writing from the publishers.

The views presented in this publication do not necessarily reflect those of the Royal College of Psychiatrists, and the publishers are not responsible for any error of omission or fact.

The Royal College of Psychiatrists is a registered charity (no. 228636).

Printed in the UK by Henry Ling Limited at the Dorset Press, Dorchester DT1 1HD.

The earthquake that caused the tsunami on 26 December 2004 was so powerful that it literally shook the world, which moved on its rotational axis. It was truly a global event, not merely an international one. The challenge for us all now is to ensure that the global response, which has been heart-warming in its immediate generosity, continues for as long as help is needed.

The Royal College of Psychiatrists should seek to play a full role in that response, utilising all the knowledge and skills at its disposal and all of its worldwide links.

Reference

World Health Organization (2000) *World Health Report*. Geneva: WHO.

THEMATIC PAPERS – INTRODUCTION

Traditional medicines in psychiatry

David Skuse

Behavioural and Brain Sciences Unit, Institute of Child Health, London WC1 1EH, UK, email d.skuse@ich.ucl.ac.uk

Our theme for this issue concerns the use of traditional medicines in the treatment of psychiatric disorders in three regions of the world: Africa (Alan Haworth), Bangladesh (Michael Radford) and Singapore (Ee Heok Kua and Chay Hoon Tan).

As Alan Haworth points out, the term 'traditional medicine' encompasses a wide range of health practices, ranging from the purely psychological (e.g. the spiritual therapies) to the administration of plant or animal preparations that may have pharmacological components. It is fascinating to learn that in Africa there are now attempts by local traditional healers to meet together and compare notes, although not altogether surprising that a lack of standard nomenclature can cause a few problems when specific botanical references are being made. It is particularly interesting to note that the medicines are unlikely to be effective unless they are administered in the right way, with the setting creating a psychological context in which improvement in the patient's condition is to be expected by all concerned. How true is that for psychiatric practice in the developed world, too?

In Bangladesh, Michael Radford reports that there is interest in discovering whether the outcomes of serious mental illness are rather better than they are in Western

countries, with modern systems of psychiatric care. He asks, 'Is there something poisonous that comes with lots of expensive services? Or is there something missing?' The empirical basis of assertions that outcomes are rather better in 'developing countries' that strongly feature extended families and village life is by no means secure. He draws our attention to the fact that there are abuses of people with mental illness in both systems, and it is not unusual to find seriously mentally ill people with severe deprivation of their liberty. A fascinating account is given of Bangladeshi village life.

Finally, in the relatively developed urban landscape of Singapore, we learn from Ee Heok Kua and Chay Hoon Tan that traditional Chinese medical practices are still widely available and widely used. Up to a third of patients seeking modern psychiatric help for their disorders are also consulting traditional healers. It is fascinating to learn that age-old beliefs, such as the influence of a deity on behaviour, motivate this choice, which is regarded as less stigmatising than is resort to a Western-influenced psychiatric practice. Traditional healers are held in higher regard if they are also experts in a martial art. We have yet to consider this recommendation in training guidelines from the Royal College, but I hope it will receive appropriate attention!

THEMATIC PAPER – TRADITIONAL MEDICINES IN PSYCHIATRY

Traditional psychiatric practices in Africa

Alan Haworth

Professor of Psychiatry, University of Zambia

Many leaders in Africa bemoan the disappearance of African culture, including the use of traditional medicines, and there have been numerous calls for recognition of their value and for the integration of these treatments into orthodox medicine. This is especially so with regard to

psychiatric disorders. The literature on psychiatric practice in Africa contains very few references to herbal treatments, however, and more is to be learnt about the use of herbs as adjuvants in the solution of psychosocial problems from the anthropological literature. At a conference held in the