

DEAR SIR,

We note the criticism of our paper 'Marital Stability following the Birth of a Child with Spina Bifida', made by Dr Stevenson and his co-workers, and accept that due to a major statistical error the rates of divorce occurring among parents of handicapped children in our series were greatly exaggerated. However, what we regard as the main point of our contribution remains intact, namely that the family at greatest risk of divorce is the one where the surviving handicapped child was premaritally conceived, and that this seems to be in sharp contrast to the chance of divorce in those families where the premaritally conceived malformed infant does not survive long.

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#### PSYCHIATRY FOR STUDENTS OF MEDICINE

DEAR SIR,

In a recent review of *Psychiatry for Students of Medicine* by L. Corbett and myself (*Journal*, August 1977, 131, p 209), the reviewer stated that we engaged in a polemic against radical psychiatrists, quoting a section 'some of the . . . heroes of the New Left are little more than half-baked and evil charlatans and megalomaniacs'. It is unfortunate that your reviewer replaced a key word in this sentence, 'intellectual', by three dots, thus distorting its meaning. The reference here was to certain philosophers whose writings form the intellectual basis of New Left Psychiatry, namely Hegel and Marx and certain living American and French philosophers. No reference was intended to any practitioner of New Left Psychiatry. The interested reader is referred to Karl Popper's book *The Open Society and its Enemies* which represents a devastating exposé of the evil characteristics of Hegelian and Marxist philosophy. It is of interest that a group of young and influential French philosophers have recently made the claim that Marx was not only an incompetent economist but a highly evil influence on the world. It seems that psychiatry should be aware of the psychological effects of theoretical philosophical systems in practical affairs. This was the basis for drawing the medical student's attention to these matters.

In a day and age when the Royal College of Psychiatrists leads a violent attack on its Russian colleagues such as took place at the recent meeting of the World Psychiatric Congress in Honolulu, it seems that medical students should be educated as to the basis of these political endeavours. If psychiatrists of the West merely remain silent about the consequences for human behavioural patterns of people like Hegel and Marx, then by default the Russians gain an advantage. There is one theory that Marx and Hegel were eminently sensible social scientists, promulgating reasonable courses of action, whose implementation into fact has been distorted by the Russian Communist Party. There is another theory that the systems promulgated by Hegel and Marx are inherently evil and are bound to lead to the Gulag situation, no matter who promulgates them. If the Royal College of Psychiatrists is going to indulge in political activity such as was witnessed at the recent WPA meeting, then students in psychiatry need education in these matters. This was the intention behind this chapter in the book.

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#### ACUTE PSYCHOTIC REACTIONS IN AFRICANS

DEAR SIR,

In their paper on the diagnostic classification of female psychiatric patients in Zambia (*Journal*, June 1977, 130, p 573), Drs Rwegellera and Mambwe mention the high rate of depressive illness and the paucity of acute psychotic reactions compared with other recent studies in Africa. Acute psychotic reactions or bouffées délirantes have been commonly reported in Africa, the Caribbean and elsewhere (Constant, 1972; Lambo, 1960; Royes, 1962; Sutter *et al*, 1974).

The authors point out that treatment was delayed until a firm diagnosis was made, using a structured interview, detailed discussion with staff and relatives, and British operational criteria; they suggest this is unusual in Africa and probably accounts for their large number of depressed patients. Some of the admissions were of initially acutely disturbed women who then settled down and 'remained with the clinical features of the underlying psychiatric disorder'. It appears likely that if a proportion of the patients who subsequently were diagnosed as depressed after an initially disturbed presentation had been diagnosed