



prescribed by doctors, have increased along with the increased prescribing by the medical profession of pills to the unhappy. Suicide deaths by domestic gas poisoning have fallen *pari passu* with the reduction of carbon monoxide in domestic gas. Such deaths fell by 1,872. Total suicide deaths fell by 1,699, so that the fall in domestic gas poisoning deaths amply accounts for the reduction in total suicide deaths in England and Wales in the past decade.

Putting one's head in the gas oven was, in Britain, the most popular way of killing oneself. In most parts of Britain this no longer works. Our thanks for Britain's falling suicide rates should probably go to the Gas Boards and not to suicide prevention programmes.

ANDREW MALLESON.

Queen Street Mental Health Centre,
999 Queen Street West,
Toronto 3, Ontario,
Canada.

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RELATIVES' REACTIONS TO THE TRANSFER OF LONG-STAY MENTALLY HANDICAPPED IN-PATIENTS

DEAR SIR,

In July 1972 a new unit for the mentally handicapped was opened in Wakefield, Yorkshire. The Leeds Regional Hospital Board has planned that 80 long-stay in-patients at a hospital in Leeds, approximately 15 miles away, should move to the new hospital, to relieve overcrowding at the Leeds hospital. The preparations for the movement of these patients have revealed the fears, worries and uncertainties which haunt the relatives of the mentally handicapped. Eligibility for transfer to the new hospital was determined on the basis of the patients' homes being in the area which the new hospital would serve.

A letter explaining the intentions was sent to all the relatives of the eligible patients in September 1970, at least 18 months before the new hospital was due to be completed. The next-of-kin were invited to consider their wishes and to express their views. It was expected that the prospect of a brand new hospital nearer to the patients' homes would be welcome to relatives. In the six weeks which followed, 30 per cent of the relatives had replied, half agreeing to, half expressing reservations about the suggested transfer. During 1971 those relatives from whom no certain reply had been received and those who had doubts were approached again and interviewed by a doctor or visited by a social worker. Eventually only three did not want a transfer.

Of deepest concern to the next-of-kin was the uprooting of patients from the familiar environment, the friends and the staff they knew, even though it could be argued that changes constantly occurred at the old hospital. Relatives attached less importance to nearness or ease of visiting.

There are future hopes of placing many mentally handicapped patients in alternative accommodation, but the reactions of relatives in this exercise showed that the hospital for the long-stay mentally handicapped is still regarded by many parents as the safe repository for their unfortunate children. Trust in staff they know and the security of familiar surroundings are valued highly by next-of-kin, who are chary of their mentally handicapped relations being exposed to the unknown or untried, even if it is theoretically better for them.

D. A. SPENCER.

Meanwood Park Hospital,
Tongue Lane,
Leeds, LS6 4QB.