

# The Welsh Psychiatric Society Y Gymdeithas Seiciatregol Gymreig

# Winter Newsletter 2012









**Welcome** to the Winter 2012 Newsletter of the Welsh Psychiatric Society. I hope that you all had an enjoyable Festive season and are feeling enthusiastic in facing the challenges of the coming year, including of course the implementation of the Welsh Mental Health Measure!

Thanks to all of you who have contributed to this newsletter — it's been great to receive your input - please keep your contributions coming in for subsequent editions, as it is your news that can help bring us all together as a community.

Although our membership is strong at about 150 members, I would like to see this number grow, not only amongst seasoned psychiatrists, but also amongst trainees, medical students and mental health professionals of other disciplines. Some of the forthcoming events that you will see highlighted below will help to raise our profile in Wales. I also intend to arrange for this newsletter to be distributed to Postgraduate Psychiatry Departments in Wales, Cardiff Medical School and Swansea Clinical School to be displayed on noticeboards/coffee rooms etc. However, any ideas of how we can attract additional membership would be gratefully received. As you know our Annual Membership fees are incredibly reasonable: -

Student Affiliateship – Free Trainee and Retired Membership – £10 Single Membership – £15 Joint Membership – £20

Remember New Membership Forms can be obtained from Paulina at: -p.lawniczak@swansea.ac.uk

Perhaps we could all be encouraging members of our teams to join and benefit from membership of our supportive network.

#### L.iz.

Dr Liz Clarke-Smith, Consultant Psychiatrist/WPS Secretary Garngoch Hospital, Hospital Road, Gorseinon, Swansea, SA4 4LH <u>liz.clarke-smith@wales.nhs.uk</u> Tel 01792-222913

# **Conference News**



**December 2011** saw the Welsh Psychiatric Society and RCPsych in Wales host another successful conference, this time in Wrexham. The conference was entitled 'Real Evidence Real Practice' and provided a range of topical and interesting talks and debates. The conference was opened by the Minister for Health and Social Services in Wales, Lesley Griffiths, and the Keynote Lecture provided a useful update on the Mental Health Programme Board from Mary Burrows and Stuart Greenwell.







As usual the quality of speakers and poster presenters remained very high and congratulations are due to all involved in the conference. There was also the opportunity for Professor Keith Lloyd (Chairman WPS) to formally present the 2011 Student Prize for Excellence in Psychiatry to Medical Student Rebecca Cox.



Professor Keith Lloyd and Rebecca Cox







Joint meeting of the Welsh Psychiatric Society and the Royal College of Psychiatrists in Wales Real Evidence–Real Practice

#### **Poster Prize Winners**

#### **New Research Idea:**

## 1st Prize Dr Liz Forty

#### Wales Mental Health Network, National Centre for Mental Health

Dr Liz Forty1, Dr Ian Jones1, Professor Michael Owen1, Professor Jonathan Bisson1, Professor Michael O"Donovan1, Professor Julie Williams1, Professor Anita Thapar1, Professor Peter Holmans1, Professor David Linden2 & Professor Nick Craddock1.

- 1 School of Medicine, Cardiff University
- 2 School of Psychology, Cardiff University

#### Aims:

The aim of the Wales Mental Health Network (WMHN) is to facilitate a Wales-wide collection of samples for mental health research. We will work across age ranges and diagnostic categories to include neurodevelopmental disorders, mood and psychotic disorders, post-traumatic stress disorder and dementias. The research, which will be conducted across the lifespan and will not be constrained by traditional diagnostic categories, aims to better understand the complex relationships between disease mechanisms and clinical picture.

# Methods:

Based within the new National Centre for Mental Health (NCMH), and working closely with NHS services, the Wales Mental Health Network will establish a cohort of patient volunteers in Wales (N>6000) with mental health problems, including childhood developmental disorders, major mood and/or psychotic disorders, post traumatic stress disorder and/or dementia. We will obtain clinical, demographic and

other information, biological samples (including blood samples) and make use of routinely collected clinical data.

#### Results:

This will allow us to improve understanding of disease mechanisms and classification, which will inform effective preventative, therapeutic and rehabilitative strategies

#### Comments:

The National Centre for Mental Health (NCMH) is Wales" first biomedical research centre. It is funded by the Welsh Government"s National Institute for Social Care and Health Research and hosted within Cardiff and Vale University Health Board. The Wales Mental Health Network (WMHN), established by the National Centre for Mental Health (NCMH), will facilitate high quality research in developmental and psychiatric disorders across the lifespan. The WMHN will establish and maintain follow up of a cohort of patients for mental health research providing a unique resource that builds on the strengths already existing in Wales.

### 2<sup>nd</sup> Prize Dr Ben Shooter

Mental Health Professionals' Attitudes to the Physical Health of Their Patients.

Dr Ben Shooter, Specialty Doctor, Torfaen Mental Health Service, Aneurin Bevan Health Board.

### Background:

Physical health has been shown to be clearly linked, both directly and indirectly to mental health. However, physical health assessment has been shown to be poorly undertaken within mental health services, despite the introduction of policies outlining the responsibility of mental health provisions and the standards expected. It has been hypothesised that the attitude of mental health professionals towards physical health care of their patients is an important factor in influencing the provision of this service, though this is an area that has been poorly researched and understood.

#### Aims:

This study aims to evaluate the attitudes of mental health professionals to physical healthcare and how this impacts on the provision of physical healthcare, specifically in relation to the implementation and uptake of policy.

#### Method:

A qualitative research design is proposed utilising semi-structured interviews to collect data. The sample would be chosen to represent mental health professionals of differing experience. The data would then be "coded" and analysed "deductively" as laid out by Pope et al (2000) in their "framework approach".

#### Outcome:

It is proposed that the data collected would then be able to be used to inform policy and training design and implementation and thus lead to improved adherence and physical health care standards.

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# **Research Findings:**

## 1st Prize Jessica Lowe

# Social Exclusion and Substance Abuse: A Comparison of Alcohol and Drug Use Among Men in Prison and Men in Homeless Hostels

Jessica Lowe (4th Year Medical Student), Professor Pamela Taylor, Dr Marianne van den Bree, Gemma Plant, Cardiff University.

**Aims**: To compare substance abuse amongst men with experience of homelessness but not imprisonment, imprisonment but not homelessness or experience of both, and to test for relationships with early childhood experiences.

**Methods**: Information was drawn from two established databases derived from interview studies, one of men newly received into hostels for homeless people and the other of new prison receptions. Some data, such as ratings from the Alcohol Use Disorders Identification Test (AUDIT) and the Drug Abuse Screening Test (DAST), were collected in the same way in both studies. Other relevant items, such as family background, were matched by constructing new binary variables from differently scaled variables. Bivariate and multivariate analyses were conducted in SPSS.

Results: The three groups of socially excluded men – only homeless (n=314, 41%), only imprisoned (n=170, 22%) and men with experience of both (n=291, 37%) - differed in distribution of substance abuse, with prisoners accounting for most of the difference in alcohol dependency and the doubly excluded for most of the difference in drug dependency. Nearly half of the men reported some form of childhood abuse; this was significantly related to reporting maternal mental illness and paternal alcohol abuse, even when other parental difficulties were taken into account. Multinomial logistic regression showed that, taking age, childhood experiences and drug or alcohol dependency into account, the doubly excluded were over ten times more likely to be dependent on drugs than the homeless only group. The doubly excluded group were also between two and four times more likely to have had experience of abuse as a child compared with those in the singly excluded groups (homeless and imprisonment respectively).

**Conclusions**: Interventions tackling substance abuse are needed for prisoners and homeless people and this research suggests prioritisation of resources for alcohol abusers in prisons and drug abusers for those who have experience of both homelessness and imprisonment. Early interventions for children at risk of abuse are not only important in themselves but may also have potential for reducing the specific risks of adult substance abuse and social exclusion in men.

### 2nd Prize Friend and Kerr

Epilepsy and Health Inequality in People with an Intellectual Disability Friend N & Kerr M and the POMONA group. Cardiff University.

**Background:** Existing studies show that people with Intellectual Disabilities (IDs) suffer from poorer health, and appear subject to health inequalities. Epilepsy is a key morbidity from which a disproportionate number of people with ID (up to 25%) are found to suffer from as compared with the general population (0.7%).

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**Aim.** The project aimed to identify whether the presence of epilepsy was associated with an inequality in health status when compared with people with ID who did not have epilepsy in a cross sectional dataset of individuals.

Method: The study extracted data from a large multinational project (The POMONA project). Groups consisting of those participants with active epilepsy (253) and those with inactive epilepsy (96) were identified, and differences in their health indicators analysed using chi squared and non-parametric statistics. In addition, to remove the potential confounder of the degree of disability, the participants were matched on level of ability using the Adaptive Behaviour Score (ABS), and analyses repeated. Results: Participants with active epilepsy were found to suffer from a greater degree of health inequalities than those without, ranging from increased mobility problems, with 12.8% vs. only 7.4% of inactive group being unable to walk (p=0.044), to decreased participation in health promotion activities with 49.8% vs. 64.4% in the inactive group having had their cholesterol measured (p=0.020). Once level of ability had been controlled for, only a few statistically significant differences remained such as higher levels of hospitalisation and a greater number of visits to the doctor. Conclusion: Those suffering from ID and epilepsy suffer from an excess of health inequalities when compared with their non-epilepsy peers. Recognition of this association could allow better identification and management of their healthcare needs, and furthermore highlight areas in which epilepsy may have a direct role in their aetiology.

#### **Audit**

# 1st Prize Abigail Legg

An Audit of the Diagnostic Assessment for Autistic Spectrum Disorders Abigail Legg, Medical Student, Cardiff University; Dr Alka Ahuja, Dr Nisha Abayanayake and Dr Muhammad Ather, Ty Bryn Unit, St Cadoc"s Hospital, Caerleon, Newport.

#### Aims:

A comprehensive assessment for Autistic Spectrum Disorders (ASD) is essential for making an accurate diagnosis. Currently, there is considerable variation in ASD assessment services across the UK. Guidance has recently been published by NICE to address these inequalities and to encourage a more standardised approach to assessment. This study aims to evaluate the clinical practice of assessment for ASD in the Gwent area, against the standards proposed in the NICE guidelines.

### Method:

A retrospective review of the clinical notes for children diagnosed with ASD between April 2010 and August 2011 was carried out. Suitable cases were identified from the case load of the multidisciplinary teams currently involved in the assessment of ASD in Gwent. A total of 30 cases met the inclusion criteria for this audit.

### Results:

The male: female ratio in this sample was 10:1 and the mean age at which ASD was diagnosed was 10 years. In line with NICE guidance all children were assessed by a multi-professional team; 83% were seen by at least 4 different professionals. Children waited an average of 5 months for an appointment and 23% were seen within the recommended 3 month timescale. An ASD-specific history was taken in 100% of cases; in some cases not all the core elements recommended by NICE were enquired about. Direct observation of the child took place in 93% of cases and a physical examination was performed where appropriate. Medical investigations were carried out in 20% and 60% were referred for further assessment of suspected co-morbid conditions.

**Conclusions**: Clinical practice successfully met some of the NICE standards; a variety of professionals were involved in the assessment process and practice was of a good standard in the areas of clinical examination and observation. The results of this audit provide a benchmark against which future practice can be compared.

## **2nd Prize Dr Dawn Washington**

Antipsychotic Polypharmacy in Patients with Schizophrenia Admitted to Llwyn-Y-Groes Psychiatric Unit, Wrexham Maelor Hospital between 01/01/09 and 31/01/10

Dr Dawn Washington et al, Betsi Cadwaladr University Health Board.

#### **Aims**

To audit antipsychotic polypharmacy in patients with schizophrenia admitted to Llwyn-Y-Groes between 01/01/09 and 31/01/10, examining whether the rationale for polypharmacy and discussions with patients were documented and what physical monitoring was completed.

#### **Background**

The audit was developed based on NICE guidelines for schizophrenia which advises against the use of polypharmacy with antipsychotics in treatment of schiozophrenia. Despite this, studies have highlighted continued use of polypharmacy and lack of documentation of rationale and discussion with patients.

#### **Methods**

Prescription charts were examined for antipsychotics and other psychiatric medications prescribed. Psychiatry notes were examined for evidence of rationale for polypharmacy, discussions with patients and physical monitoring prior to the commencement of the second antipsychotic.

#### Results

The sample was 123 admissions, of whom 15 patients (12.2%) were receiving two antipsychotics. This may be falsely low due to missing information in 22 episodes. The most common pairing was clozapine with aripiprazole (53.3%). Documentation detailing the rationale for polypharmacy and discussions with patients was low; possibly reflecting a lack of regular review and polypharmacy justification, or poor documentation of this process. Physical monitoring documentation was slightly better but again data was missing. This may be partially because examinations and

investigation results are documented separately, meaning these are more easily mislaid.

#### Recommendations

Rationale and discussions with patients should be explicitly documented. Current medication and polypharmacy rationales should be reiterated in admission notes and CPA letters. Physical monitoring results should be documented in the main clinical notes. A flow-chart document may act as an aid memoire of things to consider when adding a second antipsychotic. This could hold details of patients' baseline symptoms and physical results, thus being a useful document to refer back to. Once changes are implemented, this should be re-audited in 12 months with a target of 80% compliance with the recommendations above.







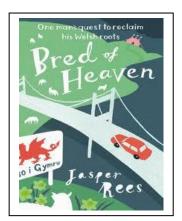


#### **BOOK REVIEW**

#### **Bred of Heaven**

## By Jasper Rees

Profile Books 2011 £12.99 292pp ISBN 978 1 84668 299 5 Rating \*\*\*\*\*



Cultural competence is a skill our College has consistently promoted. Although a highly commendable recommendation, it's an ability that's hard to acquire but having some real knowledge of the other culture makes it easier. Jasper Rees provides a quick introduction into what makes the Welsh tick. It's well-researched, informative, funny and a joy to read. In addition it provides a wonderful example of social mobility in Britain in the twentieth century.

Rees's grandfather Bert was born in 1901 and grew up on a small farm in the heart of Welsh Wales near Carmarthen. There were six siblings above him and two below. Education and getting on were core family values. The four oldest sons became farmers. The only daughter, the middle child married a farmer. The next four sons qualified as doctors and dentists. Dr T P Rees, physician superintendent of Warlingham Park mental hospital was a high profile psychiatrist. Bertram Rees was a flourishing dentist in Carmarthen who did so well at the inception of the NHS that he was able to send his two sons to Harrow. Simon the author's father became a radiologist at Barts. Despite public school, privilege and lack of struggle Jasper Rees an Englishman by birth and temperament always wanted to be a proper Welshman. After becoming a flourishing journalist he set out to learn Welsh and engage comprehensively with the New Wales as it continues to evolve in the twenty-first century.

In the same way as his forebears Rees pursued his goal with vigour, imagination and commitment. In parallel with learning the language he immersed himself in experiences at the heart of Welsh identity. He learnt to sing, joined a choir and competed in the National Eisteddfod. He tried his hand at rugby, mining, coracling and lambing. He came across The Archdruid and Wales's own Bob Dylan - Dafydd Iwan. Although the schedule of sampling various aspects of our culture is over he continues to drive up and down the M4 from London to practise with the world famous Pendyrus Male Choir in Tylorstown, Rhondda.

As professional people are increasingly mobile both within the European Community and the in global world, mental health practitioners in particular need a reader friendly guide to the local culture. In addition this book is entertaining enjoyable and evocative. For colleagues working in Wales for the first time it is a must read.

Don Williams Honorary Consultant Cefn Coed Hospital Swansea SA2 OGH

WPS Book Review 14.01.12

#### **EVENT REVIEW**

# **Psychiatric Narratives Workshop**

## 23 November 2011, Cardiff

The Collaborative Interdisciplinary Study of Science, Medicine and the Imagination Research Group based at Cardiff University is a research group dedicated to the study of the history of science (particularly the medical sciences) and the imagination (literary and cultural). Over the course of 14 months the CISSMI has conducted the *Off Sick Project*<sup>1</sup> which considered the role of narrative in understandings of illness. Among the series of events which took place in 2010/2011, the last one was the *Psychiatric Narratives Workshop* at Glamorgan Archives in Cardiff.

Three speakers, historians and a clinician, discussed problems of evidence and the way psychiatric case notes could be used to uncover patient's voice. First speaker Pamela Michael<sup>2</sup> (Bangor) presented case notes from Denbigh Asylum which she studied for several years and concluded that such records could show only one side of the story—perspective of the institution. Asylum was integral part of the community and as such could also be found in voices in literature such as the one of Caradog Prichard in *One Moonlit Night*, as he tells the story of the young boy. Second speaker Professor Peter Barham<sup>3</sup> (Oxford) talked about latest research in history of psychiatry. And last but not least clinician Dr Rhys Thomas<sup>4</sup> (Swansea) presented modern perspective on psychiatric case notes.

For participants of this workshop archivists have kindly prepared an exhibition of archival material which is also available to the public interested in the subject and research: case notes from 19<sup>th</sup> c.; *Her Majesty's Report. Supplementary Report on Lunatic Asylums in Wales* 1844; first report of Glamorgan Lunatic Asylum published in Bridgend in 1866 and many more.

For those interested in how medicine and history and literature meet I could recommend looking at the calendar of events organised by CISSMI.

# Paulina Lawniczak – February 2012



Denbigh Asylum

<sup>&</sup>lt;sup>1</sup> http://literatureandscience.research.glam.ac.uk/cissmi/offsick/

<sup>&</sup>lt;sup>2</sup> Author of a monograph Care and Treatment of the Mentally Ill in North Wales 1800-2000.

<sup>&</sup>lt;sup>3</sup> Author of a monograph Forgotten Lunatics of the Great War.

<sup>&</sup>lt;sup>4</sup> Wales Epilepsy Research Network.

# **Forthcoming Events**

Joint meeting of the Welsh Psychiatric Society and the Royal College of Psychiatrists in Wales

# **Evidence into Practice**

# Friday 11 May 2012

The Village Hotel, Swansea

# Provisional talks:

# Professor Gordon Wilcock (Dementia)

Clinical and Public Health Schizophrenia Primary Care

For further information or to book a place please contact:

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Email: p.lawniczak@swansea.ac.uk

www.wps.swan.ac.uk (New website coming soon!)

# **Forthcoming Events**

# **Public Engagement Event**

The Welsh Psychiatric Society is supporting the Public Engagement Department in organising showing of the **film 'A Dangerous Method'** on St David's Day, **1**<sup>st</sup> **March at 6pm at Chapter Arts Centre, Cardiff**, followed by a discussion about the film and its themes with a panel of 4 speakers.

The showing has been organised by Cardiff sciSCREEN which is a cross-disciplinary programme that promotes the engagement of publics with science and the academy. Using special showings of new release films, sciSCREEN uses local academic expertise to discuss contemporary developments in science in an understandable and entertaining way, facilitating debate on the wider social and cultural implications of these advances. These discussions draw on a range of disciplinary perspectives and the broad repertoire of themes found within contemporary cinema.

Directed by David Cronenberg and starring Michael Fassbender, Keira Knightley and Viggo Mortensen, **A Dangerous Method** explores the birth of psychoanalysis by focussing on the relationship between Sigmund Freud and Carl Jung. After the film screening there will be discussion, debate and a wine reception. The talks will cover the representation of the female characters, popular and professional attitudes towards psychoanalysis in Edwardian society, the depiction of psychiatrists in film, Freud's Welsh connection, and controversies surrounding repressed and recovered memories of sexual abuse.

4 speakers are confirmed for the night:

Dr Stephen Stanley - Psychologist Talking About Psychoanalysis Dr Kier Waddington - History of Psychiatry Rachel Cohen - Women in Film, Film Studies Perspective Dr Rhys Bevan-Jones — Higher Psychiatric Trainee and WPS Trainee Liaison Officer

The talks are only five minutes long (tasters), but there will be plenty of time for discussion.



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# Medfest 2012

The WPS has also agreed to support MEDFEST2012, the UK's only Medical Film Festival – organised by the Wales Student Psychiatry Society.



# **Hearing Voices Network Cymru**

We are proud to announce that Hearing Voices Network Cymru in conjunction with Working To Recovery and Asylum Associates are putting on the 2012 World Congress on Hearing Voices on the 19th, 20th and 21st September.

The theme for the conference is "Hearing Voices Network : 25 Years On - Learning From The Past, Working In The Present And Visioning The Future."

There will be more details in February on how to book a place and a call for papers. In the meantime, you may wish to look at the Intervoice website at <a href="www.intervoiceonline.org">www.intervoiceonline.org</a> or the Hearing Voices Network Cymru website at <a href="www.hearingvoicescymru.org">www.hearingvoicescymru.org</a>

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Kind regards,

**Hywel Davies** 

Chairman: Hearing Voices Network Cymru

# **Medical Student News**

It was decided at last years' Business Meeting that WPS would strive to be more involved and supportive of undergraduate trainees. To this end I have taken up the role of Undergraduate Liaison Officer. I feel it is vital to support undergraduate trainees and try to showcase psychiatry in a way that encourages an interest and possibly careers in mental health. It was really positive to see a number of undergraduate entries including some prizes at December's joint conference. We hope to continue to encourage attendance and participation at future event through subsidised places for any undergraduates submitting posters.

I am also a founding member of the Wales Students Psychiatric Society (WaSPS). The group goes from strength to strength with over 150 members subscribing to its Facebook page. On February 9<sup>th</sup>, WaSPS are hosting Medfest 2012, supported by the WPS and Royal College of Psychiatrists. For those who missed last years' event, Medfest is a UK wide Medical film festival exploring the links between media and mental health. This years' panellists are Dr Ian Jones (Perinatel Psychiatrist), John Bradburn (lecturer, journalist and film-maker), Michael Arribas-Ayllon (lecturer in cognitive and social psychology) and Mike Rymer (writer and film-maker). The event is free and open to anyone interested. Details can be found at http://www.medfest.co.uk/cardiffuniversity.htm.

We are hoping to have further events later in the year and if anyone is interested in supporting this or has any ideas please contact myself or the WaSPS (wsps@live.co.uk).

Dr Ben Shooter, Specialty Doctor Mental Health and WPS Student Liaison Officer February 2012

# **Psychiatric Trainee News**

The fourth 'Hyfforddiant CASC Training (HCT)' event took place on 29th November 2011. The day was held for junior trainees and others who were preparing for the Royal College CASC exams, and it took place at Whitchurch Hospital, Cardiff, for the first time. The morning consisted of talks and workshops in small groups with consultants and higher trainees, and there was a mock exam in the sports hall of the hospital in the afternoon - which replicated the actual RCPsych CASC exam conditions. The day was very successful and the feedback from candidates was favourable.

HCT is a not-for-profit organisation and its committee consists of higher trainees and new consultants from south and west Wales. The committee would like to thanks all who helped on the day, especially all examiners and actors. HCT aims to expand its role in helping junior trainees in future, for example through mentoring and further events.

The latest CASC exams took place in mid January 2012, and we hope it went well for Wales deanery trainees who participated.

Dr Rhys Bevan-Jones, Higher Psychiatric Trainee and WPS Trainee Liaison Officer – January 2012