

Study Tour to Denmark, 1983

ANDREW C. SMITH, Consultant Psychiatrist, Greenwich District Hospital, London SE10

In the autumn of 1981 the College meeting was held jointly with the Danish Psychiatric Association, many of whose members came to London for a few days. Planning for the recent study tour by College members to Denmark started soon afterwards. By fortunate timing, Dr Tove Aarkrog's article on psychiatry in Denmark was published in the *Bulletin* (May 1983, 7, 90–91) on the eve of the group's departure.

Programmes varied according to our interests, the assiduous Danish hosts catering for child psychiatry, adolescence, mental handicap, psychotherapy and old age, as well as a mainstream concern with general psychiatry and presentations of research interests. I mention what we saw and discussed in the field of adult psychiatry and the elderly.

Admission wards varied from a deprived adapted old municipal hospital in Copenhagen (inconvenient rooms, high ceilings and overcrowding, with patients in bed in the corridors after a heavy weekend's admissions), to large spacious adaptations of mental hospital wards in the country's oldest mental hospitals of Skt. Hans, Roskilde and Rissov, Aarhus, and magnificent new purpose-built wards (in Frederiksborg) with ample space for 20 patients on one floor around a garden quadrangle. The mental hospitals were largely familiar to English psychiatrists, but the new wards were of a substantially higher standard than those found in new English hospitals in terms of the quality of building, space, number of individual rooms, and the ubiquitous attention to pleasing the eye with works of art. Every ward seen displayed paintings, collages and ceramics by the patients, works by local artists (which were for sale) and handknotted rugs which are part of the officially funded decor. Geriatric wards also included spacious new buildings and adapted old ones, with equipment comparable to our own. It was a familiar experience to hear that financial cuts were being instituted so that further building has probably ceased for the moment. (In Denmark, as at home, the recession is associated with high unemployment and fewer jobs than ever for rehabilitated psychiatric patients.)

Family practitioners are usually impossible to contact after the first part of the morning, so that a considerable number of emergency referrals to the hospital service come from the widespread and officially sanctioned day-long deputizing service. A number of psychiatrists practise as non-hospital specialists, seeing psychiatric patients in their offices down-town. These are private practices only in the sense that the doctors work on their own, for this arrangement is part of the health service and the fees are paid by the State. True private practice, with fees paid by the patient to the doctor, is and has long been rare in Denmark. These specialists are in fact encouraged by the government, and

one can see why: they are providing a supplementary out-patient service near the patients' homes, a form of community care, and are cheaper than hospitals.

The consultants' work is largely confined to the hospitals, home visits being unknown. Their salaries seemed to be approximately comparable to our own. Medical staffing is definitely stronger than here, as we established from close questioning in two different county services. Scaled to an equivalent 200,000 catchment population, they had for a mental hospital based service 9 hospital doctors plus 6 full-time and 8 part-time extramural specialists ('doing 90 per cent of the out-patient work'). For a service in a newly built district general hospital, aiming to do without mental hospital beds (and explicitly highly staffed to do the job with what they regarded as the low figure of 0.47 beds per thousand, plus 60 day places), there were 11 consultants, 29 trainees (of whom 16 were described as being of equivalent experience to senior registrars) and 8 extramural specialists. These staff deal with 1,100 to 1,300 admissions per year. There are also clinical psychologists and hospital-based social workers.

In her article Dr Aarkrog mentioned a disastrous junior doctors' contract. Specifically, it seems that deadlocked negotiations conducted in the shadow of major medical unemployment resulted in a very strict application of a rule of a maximum of 40 hours work per week, including on-call. Night on-call is followed by time off, with regular experience for the doctors being impaired, and continuous patient care by a single junior almost impossible.

In orientation and style, the acute hospital service could be regarded as not very different from most parts of this country. The philosophy is predominantly medical, major treatments are often physical plus well-provided occupational therapy. Psychotherapy is less heard of, although we saw a fine rehabilitative community ward for young in-patient schizophrenics. (Jobs being largely unobtainable, the patients sometimes move on to subsidized 'work-communities', doing, for example, farm-work.) Behaviour therapy was not familiar; community psychiatric nurses were wanted and coming soon, it was hoped; home helps and domestic meals services for the housebound in Copenhagen were excellent.

Admission of disturbed and unwilling patients in emergency involves an informant, a doctor not on the hospital staff and thus not a psychiatrist, and investigation and implementation by the police. This admits the patient, and then the doctors have considerable power to implement treatment, although the patient is always appointed a guardian to watch his welfare, and can appeal to the minister of justice. There are, as here, less common procedures for

long-lasting disputed admissions of chronically paranoid patients and for disturbed offenders from the courts. The Danish figure for the percentage of involuntary admissions in the mental illness service is said to be under 4 per cent.

In Aarhus the distinguished staff of the Institute of Psychiatry offered seminars and talks on their work. Professor Mogens Schou conducted an update on his psychopharmacological interests—haloperidol with lithium used freely up to 20 mg a day of the former at least; damage only reported with very high doses; long-term prophylaxis of recurrent unipolar depressives is better with lithium or tricyclic antidepressants than placebo (he would try lithium in preference first); standard lithium level to aim for in the majority of cases is 0.6–0.8. Professor Erik Stromgren, retired from his Chair but not from facilitating the WHO international study of schizophrenia, spoke of past, present

and future classifications of psychosis, schizophrenia around the world, and the particularly closely studied epidemiology of the local island of Samsø. He then conducted us round the treasures of the best psychiatric library in Scandinavia.

In a College study tour, this much is achieved in the mornings. In the afternoons there was time to explore castles, sample (but not get to know fully) the riches of Copenhagen, see the Viking Ship museum in Roskilde and the preserved bog-man in Aarhus. The Danish hosts invited us to their homes, held a reception in a museum of modern art and dined us in an old hunting-lodge. They were patient with our questions, generous with their time, and charming in themselves. Dr Cyril Davies of the Study Tours Sub-Committee had all the arrangements at his fingertips, and spoilt us. We are grateful to him and to Jane Boyce at the College. He is open to suggestions for the next tour.

Forthcoming Events

The **Second Conference on 'Teaching Dynamic Psychotherapy'** will be held at University College, Oxford from 12 to 14 April 1984. The conference, organized by the Association of University Teachers of Psychiatry and the Oxford University Department of Psychiatry, is designed for mental health professionals actively involved in teaching psychotherapy, particularly supervision. Information: Dr Mark Aveline, Psychotherapy Unit, St Ann's Hospital, Nottingham NG3 6LF (please enclose an s.a.e.).

'**Teaching Dynamic Psychotherapy to Medical Students**': an AUP conference to be held at the Royal College of Psychiatrists on 2 December 1983. This conference will explore aims and objectives and ways and means of teaching. Information: Dr Mark Aveline, Psychotherapy Unit, St Ann's Hospital, Nottingham NG3 6LF (please enclose an s.a.e.).

The **Royal Society of Health** is holding a one-day conference, 'When Adoption Fails', on 23 November 1983 at the University of Newcastle upon Tyne. Closing date for application: 16 November. Information: Conference Department, Royal Society of Health, 13 Grosvenor Place, London SW1X 7EN.

The **10th Conference of the International Association of Forensic Sciences** will be held in Oxford from 18 to 25 September 1984. The general theme will be 'Forensic Science: The Changing Years' and within that general theme there will be three sub-themes—'Quality Assurance', 'Mass Investigation' and 'Evidential Value'. Residential accommodation will be available in various Oxford colleges. Information: Professor R. Buglass, Midland Centre for Forensic Psychiatry, All Saints Hospital, Lodge Road,

Birmingham B18 5SD or Dr R. Antebi, Duke Street Hospital, 253 Duke Street, Glasgow G31.

The **3rd Pacific Congress of Psychiatry** will be held from 14 to 18 May 1984 at Seoul, Korea. Information: Organizing Committee, 3rd Pacific Congress of Psychiatry, c/o Yonsei University College of Medicine, Department of Psychiatry, PO Box 8044, Seoul, Korea.

The **International Conference on Anorexia Nervosa and Related Disorders** will be held from 3 to 7 September 1984 at Swansea University, Wales. It will focus on clinical, therapeutic and scientific aspects of anorexia nervosa and bulimia nervosa. The meeting will be chaired by Professor Gerald Russell of the Institute of Psychiatry. Information: Dr Paul D. G. Harris, Conference Co-ordinator, Anorexia Nervosa Conference, PO Box 406, Sketty, Swansea SA2 9BQ, Wales.

The **First International Symposium on Intervention and Stimulation in Infant Development** will be held at the Jerusalem Hilton Hotel from 8 to 12 July 1984. Information: Dr D. Tamir or Dr E. Chigier, 1st International Symposium on Intervention and Stimulation (ISID), PO Box 394, Tel Aviv 61003, Israel.

The Department of Psychiatry at the University of Manchester and the Regional Group of Child and Adolescent Psychiatrists are holding a conference on 2 December 1983 at the Regional Conference Centre, Prestwich. The title of the conference will be, '**The Professionals, the Community and the Handicapped Child**'. Information: Professor David C. Taylor, Department of Child and Adolescent Psychiatry, Jesson House, Manchester Road, Pendlebury, Manchester M27 1FG.