

that Berner *et al* classify hypochondriasis as such as, of all things, a phobia.

The PSE is designed as a multipurpose instrument and may of course include items of form, as well as items of content, but it is essential not to compound the two.

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THE TWO-WAY TRADE—PSYCHIATRY AND NEUROSCIENCE

DEAR SIR,

McHugh and Robinson's review (*Journal*, September 1983, 143, 303–5) confirms that new transmitter pathways constitute a new neuroanatomy. However, it is questionable whether they provide for "conceptualizing new relationships of neuropathology to psychopathology" or merely corroborate Hughlings Jackson's (1884) notions of uniform and local dissolutions in the nervous system. In addition, Jackson already provided a conceptual framework for such states as hemiplegias, epileptiform seizures, choreas etc, as well as the mental phenomena of 'non-cerebral disease'.

An additional 'two-way trade' for psychiatry and neuroscience would therefore be the apparently forgotten contributions from the past to the present. In keeping with Dewhurst's (1982) sentiments, if Jackson's fertile ideas are given a second chance in psychiatry today perhaps the trade would be complete.

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References

- DEWHURST, K (1982) *Hughlings Jackson on Psychiatry*. Sandford-on-Thames, Oxford: Sandford Publications.
JACKSON, J. H. (1884) Evolution and dissolution of the nervous system. *British Medical Journal*, 591–3.

IMIPRAMINE AND AGORAPHOBIA

DEAR SIR,

Donald Klein implies that I incorrectly cited from the chapter in *Agoraphobia* edited by Chambless and Goldstein (*Journal*, September 1983, 143, 309). To make matters clear I would like to cite verbatim a sentence from the chapter:

"Even those patients who show stimulant side effects can most often be treated effectively by lowering the dose and then increasing very gradually, sometime to a maximum tolerated level of 10 mg per day (Zitrin *et al*, 1978)."

I am grateful to Dr Klein, however, for pointing out that the more recent studies he has carried out advocate doses in the range of 200 to 300 mg daily.

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Reference

- CHAMBLESS, D. L. & GOLDSTEIN, A. J. (Eds.) (1982) *Agoraphobia: Multiple Perspectives on Theory and Treatment*. Chichester: John Wiley.

SUGGESTION AND SUICIDE BY PLASTIC BAG ASPHYXIA

DEAR SIR,

Of some six hundred suicides recorded in Kingston-upon-Hull by the city coroner between 1960, by when (according to local firms) plastic bags had become widely available to the general public, and 1980 inclusive, only nine were by this means. Their dates were 12:7:71, 18:9:72, 25:10:72, 4:12:72, 7:1:78, 15:3:78, 30:4:78, 5:5:80 and 5:9:80, giving an impression of tight clustering with long intervening gaps, heightened by the fact that all occurred in the last ten years of the series.

If the ten years are slightly shifted so as to begin on 1:2:71 and end on 31:1:81, and divided into consecutive two-month segments, then there are 51 such segments without a plastic bag suicide, and 9 with exactly one each, in the sequence

0² 1 0⁶ 1³ 0²⁹ 1³ 0² 1 0 1 0⁶

(where 0 represents a segment without a plastic bag suicide, 0ⁿ n consecutive such segments, 1 a segment with one, etc). There are 11 runs (16.3 expected), with an exact probability (by the Wald-Wolfowitz test) of 0.0142469, confirming the impression of clustering. Alternatively, a non-plastic bag suicide (npbs) segment has estimated probability 5/50 = 0.1 of being followed by a plastic-bag suicide (pbs) segment, whereas a pbs segment has estimated probability 4/9 = 0.4 of being so followed; thus a plastic bag suicide in a segment appears to increase the probability of another in the next segment. In fact, the lag 1 autocorrelation is $\hat{0} = 0.34$, with exact probability (by the Fister-Yates test) of 0.023689. Either way, there is a modest but significant clustering effect or dependency.

Since the city is served by a local newspaper and, from 1971, local radio, for the reporting of proceedings in the Coroner's Court, the most likely explanation seems to be that a process of suggestion or imitation has affected the choice of means of suicide. (Our evidence cannot go so far as does Phillips (1974), who points to a direct effect in increasing the suicide rate).