

A GLANCE THROUGH THE REVIEWS

The transformation of the mental hospital.—*WHO Chronicle, Geneva, 1962, vol. 16, No. 8.*

. . . During the nineteenth century there were several movements aimed at relaxing the restraint practised in mental hospitals, on the ground that the mentally disturbed would benefit more from something that resembled a hospital rather than a prison. But it is only in the last fifty years that systematic attempts have been made to change the role of the mental hospital. These attempts yielded considerable results long before the discovery of the ataractic drugs, the importance of which is great as an adjuvant to psychotherapy and group therapy but is otherwise not to be exaggerated: for they can supply only a partial solution to the therapeutic problem and they may even distract attention from the main therapeutic target, the patient himself, regarded as a person to be cured.

During and after the First World War, Simon, van der Scheer, Rees, Sivadon and others elaborated what was called "active therapy", wherein a therapeutic community is created, a miniature society in which the individual patient works, is given responsibility, receives pay for his work, lives as an individual, and has his own recreations:

"The changes brought about by this regime in the mental hospital can only be called revolutionary. The revolting aspects of the mental hospital disappeared; the average length of stay decreased until it was counted in months instead of years. The interdependence with environment—not only of behaviour but of symptoms which were generally regarded as inherent to the illness—was once more demonstrated, as had been done by Pinel more than a century before".

Much of this work was destroyed by the Second World War.

The old concept of the mental hospital seems to have disappeared. But as a therapeutic community, the mental hospital is still an essential link in the chain of mental health services. Many patients need re-education, re-socialization, rehabilitation: processes that may take months or even years and require a combination of psychotherapy, drug therapy, and occupational, recreational, and social therapy. In highly industrialized countries, specially equipped institutions will be needed, with workshops, recreational facilities, and extensive grounds. These new mental hospitals will function primarily as rehabilitation centres analogous to those used for physical rehabilitation. In countries that are primarily agricultural, the therapeutic community will conform to the local pattern, perhaps resembling the therapeutic village community developed in Nigeria.

If the patient is to be treated by giving him trust and responsibility, the locked door must go. In many countries the doors are open in some of the wards or in part of the mental hospital. This "open door" system is not the same as the "open ward" system; while the former may be found in an institution that is itself "closed", the "open ward" receives patients on a voluntary basis. Some countries have no open ward system, in others the number of voluntary patients may range from 10 % to 85 % of all admissions. "The extent to which the open ward system is in use may be regarded as a fair measure of the level of psychiatric hospital care and of its acceptance by the population" . . .

The male nursing profession in France, by A. Montesinos, *Revue de l'Infirmière et de l'Assistance sociale, Paris 1962, No. 5.*

It is generally considered that nursing is essentially a female profession. The author makes a point of showing that there is nothing to justify such an opinion and he describes the present position of male nurses in France, as well as the problems raised by their recruitment and training: lack of schools for male nurse students, cultural level of ward attendants insufficient to enable them to enjoy satisfactory conditions of promotion, bad organization and application of such promotion. Mr. Montesinos makes several suggestions to improve this organization and hopes above all for the creation of schools for male nurse students. To upgrade the profession and provide professional openings and a less limited future to attract a larger number of men, especially discharged military male nurses, could be a means of partially resolving the present crisis of nursing personnel.

Quarantinable diseases, *Who Chronicle, Geneva, 1963, No 4.*

. . . This brief review of the development of the quarantinable diseases gives ground for optimism and especially for renewed confidence in the effectiveness of the measures employed to cut short epidemics and in particular to stop the spread, in these days of increased international and intercontinental communication, of diseases originally confined to endemic foci. But the threat of their spread remains, for in 1961, considerable outbreaks of smallpox, plague, cholera and yellow fever occurred, raising the number of cases and especially the number of deaths above the figures for 1960. Vigilance is therefore needed. Only by the co-operative efforts of laboratory workers, national and international health services, and especially medical and medico-social personnel throughout the world can the ever-present threat of the great quarantinable diseases be averted.
