

PSYCHIATRY

Hope for Criminals

Hope for improvement of criminals who are mentally abnormal was seen at the Third World Congress of Psychiatry, Marjorie Van de Water reports from Montreal, Canada.

► HOPE FOR IMPROVEMENT or even final cure for serious criminals who are not psychotic but are mentally abnormal was raised at the Third World Congress of Psychiatry, Montreal, Canada.

Dr. Manfred S. Guttmacher, psychiatrist of Baltimore, raised this hope by reporting on his personal contact with three widely separated institutions for the treatment of psychopathic offenders. Psychopaths have been called "persons born without a conscience." They are considered by prison authorities to be among the most serious problem members of prison populations, and the group least responsive to ordinary penal measures.

The three institutions described by Dr. Guttmacher—located in Denmark, Holland and near Baltimore in the U. S.—are operated like hospitals, not like prisons, although there are walls, locks, bars and guards. Discipline is strict but molded and limited by therapeutic goals.

Orders are accompanied by explanations. Infractions are not overlooked, but an attempt is made to understand the reason for them. A vengeful attitude is almost entirely absent. Both individual and group therapy is used in every case. Each of the institutions is headed by an experienced psychiatrist.

Although psychopaths are noted for the

chronic nature of their criminal acts, this sort of treatment has reduced recidivism (a falling back into prior criminal habits) among the men treated. Comparison of the rate of recidivism among men living in the institution in Denmark with that of a neighboring penitentiary showed significantly fewer repeat crimes among the psychopaths than among the "normal" criminals.

This was true of all three groups of offenders—those involved in property crimes, crimes of violence and sex crimes.

• Science News Letter, 79:371 June 17, 1961

English, Russian Patients

► IN THE NEXT 50 years, England will cut in half the number of mental patients now in hospitals—a drop of some 70,000 hospital beds.

This hopeful outlook was reported to the Third World Congress of Psychiatry, Montreal, Canada, by Dr. Walter S. Maclay of London. At present, he reported, 75% of all new admissions to mental hospitals are discharged within three months and more than 90% are discharged or die within two years.

With new methods of treatment in open hospitals, virtually all restraints and re-

strictions used in the past are now unnecessary. Deteriorated, hostile, aggressive, suicidal, dirty, frightened, distraught patients have disappeared, and those patients who are compelled to remain in the hospital are not resentful, nor are their relatives.

New methods credited with these dramatic changes include physical treatment, such as electric shock therapy and brain surgery, and drugs, such as tranquilizers or psychic energizers that can calm the agitated and stimulate the depressed or apathetic, as well as psychological methods for individual and group treatment.

Modern methods are making a maximum of psychiatric aid available to the people of the USSR, Dr. E. A. Babayan of Moscow reported to the meeting.

Among the variety of facilities now available are traveling psychiatric units and teams, psychiatric counseling offices in factories and schools, psychiatric help to outpatients at dispensaries, and psychiatric wings in general hospitals.

Mental hygiene is now a branch of public health in Russia.

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MEDICINE

Iron Drugs Eliminate Surgery for Bleeding

► SURGERY to correct abnormal menstrual bleeding and chronic bleeding from the stomach and intestines is eliminated in some cases by treatment with new iron drugs.

Because loss of blood results in iron deficiency anemia, iron has been used for many years in the treatment of patients with such abnormal bleeding. But because of unpleasant side effects in many instances, treatment was most commonly discontinued after the anemia had been moderately corrected.

In recent years new iron drugs have been developed that do not produce these side effects, so iron could be administered over longer periods of time and in larger doses. With the more liberal use of iron in the treatment of this kind of anemia, it was unexpectedly noted that abnormal bleeding often stopped.

This prompted further investigation of the problem by Dr. Arthur J. Samuels of the University of California, Los Angeles, Medical School.

In 13 of 15 patients studied by Dr. Samuels, bleeding ceased following adequate replacement of tissue iron stores. These included all eight patients with abnormal menstrual blood loss and five of seven with bleeding from the stomach and intestines.

It is not known why the iron treatment seems to stop the bleeding. One theory is that iron deficiency may be associated with abnormal function of tiny blood vessels that normally function as a first line of defense against a tendency to bleed. Thus iron repletion may help to correct the problem.

Another suggestion has to do with possible coagulation effects of iron at the local site of bleeding.

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MUSEUM RADIOS—Two English schoolboys get the facts on a model power station through 7-ounce transistorized radio receivers at the Science Museum in London. The recorded talk lasts about 20 minutes and guides listeners from one exhibit to the next.