Doolin Memorial Lecture 2019

Rhetoric and Reality in Mental Health: Ireland and the World

Delivered by Professor Brendan Kelly, Dept. of Psychiatry Trinity College and Tallaght Hospital

The Doolin Lecture 2019 was delivered by Brendan Kelly, Psychiatrist, on Saturday 7th Dec at the RCSI. Professor Kelly is an international authority in Psychiatry. He is the author of many books and countless scientific publications.

Brendan Kelly began with a headline in Time magazine 1979 ‘Psychiatry’s Depression’. He then showed a headline in the Economist 2019 ‘Crisis in Psychiatry’. Both articles were very similar in tone and content. He posed the question whether these statements are more perception than reality. He states that there have been many welcome developments in psychiatry both in Ireland and internationally.

In Ireland in 1963 there were 20,000 psychiatric inpatients, and in 2017 there were fewer than 5,000 inpatients. Ireland has the third lowest number of inpatient psychiatric beds in Europe, less than 40 per 100,000 population. The psychiatric admission rate is 17,000 annually, the third lowest in Europe. The suicide rate in Ireland has decreased by one-third, and similar decreases have been reported in many countries. Suicides have declined by 29% since 2000. However the suicide rates among travellers and children/teenagers remain high and are a cause of concern.

In the United States, however, the suicide rate has increased by one-third. This is mostly gun-related. Overall, suicides account for 60% of gun-related deaths.

The rate of murder/suicide is less than 2 per year in Ireland. This is one-fifth the rate in the United States.

Kelly touched on the matter of antidepressant prescribing in Ireland. Recent media reports had highlighted that it had increased 18% in 6 years. On the other hand the reports failed to point out that in the same time period there had been a decrease in the suicide rate. In addition the antidepressant prescribing rate is half that in Northern Ireland.

The Assisted Decision Making Capacity Act 2015 addresses the balance between capacity and decision-making. Kelly described a study that examined the capacity in medical/surgical patients and psychiatric patients. Assessment of the medical/surgical patients found that 71% had full capacity, 2% partial capacity, and 28% with lack of capacity. The corresponding findings for psychiatric patients was full capacity 47%, partial 51% and lack of capacity 2%. He points that the capacity for decision making among psychiatric patients is better than had been appreciated. This is important when discussing treatment options with the patients.

Kelly described six uses of the law in relation to psychiatry.

One, the Mental Health Act 2001 was reviewed in 2015. A total of 165 recommendations were proposed. Their implementation is under review.
Two, the Forensic Psychiatry capacity is inadequate. There are 2 beds for every 100,000 in the country. There are mentally ill patients inappropriately placed in prison. Currently, there are 24 patients in prison for months. At any one time there are between 20 and 30 patients on the Central Mental Hospital waiting list. There is a new facility planned for Portrane next year which will help matters.

Three, relates to the Public Health Alcohol 2018. A total of 22% of the population accounts for 66% of all alcohol consumption. Minimum Unit Pricing reduces alcohol consumption. Advertising promotions such as ‘24 cans for €20 – enjoy alcohol responsibly’ need to be tackled. It encourages binge drinking. Excessive alcohol ingestion brings so much misery to so many families. Since the introduction of Minimum Alcohol Pricing in Scotland, alcohol-related deaths have decreased 20% in Glasgow. The Lancet journal states that the stage is now set for England to follow Scotland.

Four, is the concern about Cannabis. In 2017, the US reported that the higher the use of Cannabis, the more psychosis. It increases assault and murder rates. In other words, cannabis is bad for health. The equipoise is medical information, legal/social policy, and civil liberties. Kelly thinks that we should not legalise its use.

Five, is the morbidity and mortality rates in psychiatric patients. Men with psychiatric disorders die 15 years prematurely and women with psychiatric disorders die 12 years prematurely.

Six, the rights to healthcare are an important issue for psychiatric patients. India is the first country to put into law a mental care act guaranteeing the right of all citizens to mental health care. Overnight 1.3 billion citizens became eligible for mental healthcare. Kelly has visited India to review its psychiatric services. He found that the psychiatric units were vast compounds and the psychiatry services face many logistical challenges.

Kelly considered the issues raised in the book ‘The Idea of Justice’ by Amartya Sen. It includes law, policy, education, advocacy, and medical care. One should think of justice as a continuum.

In his concluding sentences Brendan Kelly quotes Doolin who stated that medicine progresses by fits and starts with many interruptions. At the present time the shortage of consultants in Ireland is a major interruption. Currently one sixth of consultant posts are unfilled. This impacts adversely on the delivery of healthcare.

He also quoted Rudolf Virchov, who is known as the father of modern pathology and the founder of social medicine. Virchov stated that medicine is a social science and politics is nothing else but medicine on a large scale. Medicine has an obligation to point out problems and to attempt their theoretical and practical solution.

Brendan Kelly gave a clear account of the gains and challenges facing modern-day psychiatry. His clear, free-flowing delivery style made it possible for him to cover a wide range of psychiatric issues in a short period of time. The large audience found the lecture both fascinating and informative. One came away with a clear understanding about how mental health, and the delivery of psychiatric care are interwoven with society’s attitudes and social fabric.

Commentary by J.F.A. Murphy, Editor of the Irish Medical Journal