



ΕΛΛΗΝΙΚΗ
ΨΥΧΙΑΤΡΙΚΗ
ΕΤΑΙΡΕΙΑ

HELLENIC PSYCHIATRIC ASSOCIATION
UNITED KINGDOM DIVISION
HELLENIC (UK) PSYCHIATRIC BULLETIN
(PREVIOUSLY: HPA-UK NEWSLETTER)
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Editor: Nikos Christodoulou

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CHAIRMAN'S MESSAGE

George Ikkos
Chairman,
Hellenic Psychiatric Association, UK Division



Dear Members,

Season's Greetings!

The UK Division has held its AGM at The Child and Family Practice, Ridgmount Centre on 19 October 2013.

Following an initiative by Dr Katherine Kasiakogia, Trainee Representative the following priorities were agreed for the years 2013-16;

1. To increase our membership by 100%
2. To provide our members with high quality events once/ twice a year (in UK and overseas)
3. To continue our collaboration with the Hellenic Medical Society UK and arrange future joint events for the benefit of both
4. To disseminate high quality information on psychiatry training in the UK to our members in Greece who are considering training in the UK
5. To offer support and local UK contacts for Greek trainees from Greece who are looking to train/ experience working in the UK
6. If requested, share more broadly in the Hellenic Psychiatric Association our knowledge and experience of the UK training system to assist decision making about future psychiatry training in Greece
7. To engage actively with other diaspora organisations of psychiatrists in the UK
8. To engage actively with the Royal College of Psychiatrists

We have already begun actively to advance on a number of objectives. For example

- We have recruited our first member from the Irish Republic Dr Alexia Papakonstantinou who has agreed to join the committee as representative of psychiatrists who work in the Republic. We are delighted to have her on board and look forward to more colleagues training and working in the Republic to join us.

- After the AGM, we held a highly successful joint event with HMS-UK on 19 October on “Mind and Body”, which was attended by an international and multidisciplinary audience of approximately 50 participants. Professor Qasim Aziz delivered the first Asclepius Lecture and Dr Eleni Palazidou, our Academic Secretary, is reporting separately in this issue on the event.
- Dr Kasiakogia has published the first of a pair of articles on training in the UK in the previous issue of our bulletin (previously HPA UK Newsletter).
- We have agreed to submit proposals for session in the HPA Meeting in April 2014. Possible themes suggested include “Comorbidity in Psychiatric Practice” and “Forensic Psychiatry” and we hope to collaborate with colleagues working in Greece.
- We have actively supported the planning and delivery of The Great Partnership Psychiatrists Diaspora Conference at the Royal College of Psychiatrists 7 December 2014. Dr Palazidou has been an active member of the planning committee and Professor George Ikkos will be chairing a workshop on Mental Health Law in Developing Countries.
- Dr Wendy Burn, Dean and Dr Laurence Mynors-Wallis, Registrar Royal College of Psychiatrists enriched our Training event on 19 October by lecturing on the MRCPsych examinations and Outcomes in Mental Health respectively

As well as active academic work, we have been having fun. The AGM and “Mind and Body” event were followed by dinner at the Elysee Restaurant where there was plenty of opportunity for the 30 or so attendees to engage actively in discussion but also to enjoy the food, live music and singing, plate breaking and belly-dancing on offer in a packed venue!

Finally, this will be my last report as your chairman, as a new chair will be elected in April 2014 as per regulations. I would like at this opportunity to thank all the members of the Executive Committee whose good will and active support have led to the flourishing of an active division, which has much to look back to with pride and much to look forward to with confidence.

I wish all of you and your loved ones a Happy New Year.

Professor George Ikkos

EDITOR'S REPORT

Nikos Christodoulou
Secretary and Bulletin Editor,
Hellenic Psychiatric Association, UK Division



Dear Friends and Colleagues,

This issue of our newsletter marks the beginning of a period of transition for our division, central to which is our founding chairman's decision to step down at the upcoming HPA Congress in April'14. George Ikkos has been inspirational and highly successful in establishing our division, and the division has been fortunate to have him leading from the front.

Our division's transition is also reflected in a change of name for our newsletter, which is now called the Hellenic (UK) Psychiatric Bulletin. We are delighted to have opened up to colleagues from the Republic of Ireland, hence this name may have to change once again in the future to reflect geopolitical correctness (this may also affect the division's name *per se!*).

The current issue of the Bulletin hosts, among others, Dr Palazidou's report on our division's recent meeting, the second part of Dr Kasiakogia's psychiatric training "survival" guide and an interesting book review by Professor Ikkos. As you know, our Bulletin is published twice per year and is an excellent platform for all members to contribute with their work; therefore please consider yourselves invited to contribute.

In the next few months there are some events worth attending:

- Hellenic Psychiatric Association biennial conference. To be held 10-13th April 2014 at "Costa Navarino", Pylos, Greece. This is the most important recurrent event of the Hellenic Psychiatric Association. Our division aims to participate with two symposia, and you are invited to contribute. The two symposia are themed:
 - "forensic psychiatry" led by Lenia Palazidou (leniap@btinternet.com) and
 - "comorbidity", led by Nikos Christodoulou (nikoschristodoulou@gmail.com).
- RCPsych Diaspora Psychiatrists conference. To be held on 7th December 2013 at the Royal College of Psychiatrists, Prescot Street. This is an important event, featuring the participation of Lenia Palazidou and George Ikkos. Please contact Lenia at leniap@btinternet.com as soon as possible to attend.

- Joint Hellenic Psychiatric Association/ World Federation for Mental Health international conference. To be held 9-11th October 2014 in Athens. The WFMH is the largest and most inclusive international mental health organisation and usually hosts impressive meetings.

Finally, please note that our Division's publications are now hosted online by the HPA website at www.psych.gr (link on the left). Also note that the Hellenic Psychiatric Association is on facebook (<https://www.facebook.com/groups/109477939142750/>), and our division will also have its own facebook page soon (watch this space).

Happy reading!

Dr Nikos Christodoulou

PSYCHIATRY TRAINING IN THE UK – PART II

Katherine Kasiakogia-Worley
*Trainee Representative and Public Relations Officer,
Hellenic Psychiatric Association, UK Division*



Introduction: The Game

The job offer has just landed in your inbox, the Medical Staffing paperwork (occupational health, rota, job contract, CRB etc – not necessarily in that order) is in the post. The game is afoot!

The purpose of the game is to make it through as many ARCPs as you can. If you make it through all 6 ARCP levels, you get the grand prize of a CCT.

If you like this game so much that you'd want to continue playing all the way to retirement/early death, there is an expansion pack called 'revalidation'.

Should you falter, waver, or miss a step you become game for the GMC, simples really...

The rules

Before your first day at work

If you are moving into a new city make sure you leave plenty of time to settle in, find accommodation and visit your new place of work before the official first day. This will help you feel more confident and relaxed as the first few weeks at work are likely to be the most stressful.

Flat sharing and hospital accommodation may be against the Greek way of life, but are definitely worth your consideration as the social and financial benefits are immense.

Many Greeks, for reasons that defy logic and financial sense, look for ways to transport their worldly possessions from Greece to the UK. Please note that there are very few household needs that can't be met by a trip to the local household superstore. For a reasonable price such companies will deliver and for a premium they will even assemble the furniture for you.

The rota is often prepared weeks in advance of the August/ February start. If there are days that you do not wish to be oncall make sure you let the rota master know as soon as possible. Medical staffing should be able to tell you who the rota master is. They may not be able to heed all your requests but it's worth a try. If you find yourself oncall on an awkward day try to swap it as soon as possible (this allows maximum date flexibility). Under no circumstances do anything silly like pretend to be sick on the day. If you are found out this could spell the end of your career as it's a very serious probity issue.

Make sure all the paperwork is in order. Occupational health will not rest until they have all their boxes ticked and you will gain nothing by being obstructive.

It's always a good idea to meet with your new consultant and visit the unit before the madness of induction. You are expected to dress appropriately, but there is no need for extravagance. Please note that psychiatrists in the UK do not wear a white coat or scrubs.

As a new beginner it's helpful to find out in the first instance which locations you cover, how many patients there are under your care (caseload), when and where the ward round/ team meeting takes place and who the manager is (the team/ward manager is likely to be a nurse/ psychologist and not your consultant). Always be very polite and kind to your secretary and appreciate all the hard work that goes into dealing with all the admin issues.

All questions regarding training have an answer in the official 'Gold Guide'

<http://www.rcpsych.ac.uk/pdf/Gold%20Guide%202010.pdf>

The Gold Guide is the undisputed gospel of truth and neither yourself nor anyone else can ignore it.

The job

During your core training you should aim to get as broad an experience as possible. Most placements are six months long and you will be able to make requests before that (although they may not always be heeded). No matter where you find yourself make sure that you make the best of the opportunities available.

During your core training psychiatry you are likely to rotate every six months to a new post and subspecialty. Try to make the most of each opportunity, and not be blinded by your preconceptions. You should allow yourself to experience every subspecialty offered so that you can make an informed choice when your time comes to apply at ST4. That said, it is likely that you already have one or two psychiatric subspecialties in mind that you are more interested in. In this case make sure that you have enough to show during your six-month placement and your three-year core training that would show evidence of commitment. Having completed a good quality audit or working on a relevant research project are classic examples.

Make sure that you find out how much your study budget is as it varies between trusts. Always claim expenses in a timely fashion, as delays can cost you dearly.

MRCpsych teaching takes place once a week in a central location and is often immensely beneficial.

It is best to focus your conference attendance and course choice to best suit your future career aspirations. An extensive random collection of disparate courses and conferences is not as effective as a few select choices. The faculty and trainee conferences are events not to be missed and offer knowledge and networking opportunities. It is of note that the definition of networking is not aimless and pointless schmoozing but the making of personal contact with individuals in your field of interest with whom you have a professional and personal affinity which could lead to a professional collaboration and/or enhance your support network.

A very busy post will offer extra clinical training, and a less busy one more opportunities to study for your exams during the working hours. Some consultants have a strong interest in audit, or research and you should always aim to benefit from local talent.

Expert tip

Timekeeping is an essential skill. Once in a while we all have to stay over time to see something through. If you find yourself staying after five, or coming in early on a regular basis it is advised that you keep a detailed diary of your working week. It could be that you are slower in getting the job done, in which case a frank talk with your consultant would identify a plan to improve your timekeeping skills. Or, it could be that your job is extremely busy and you are trying to fit in more than what is reasonably possible. Once again an honest talk with your consultant, backed up by your diary evidence would be the best course of action so that you can remedy the situation for yourself, and those likely to come after you. It is ill-advised to try and hide situation, and minimise the difficulties, as in both situations sooner or later the truth will come out and you are likely to have to face the consequences further compounded by other people's perception of your lack of insight into the difficulties.

Extras

Your most important goal should always be to be successful at your MRCPsych examination and get your membership. Without your membership, nothing else matters.

You may get the opportunity during your core training to embark into a postgraduate degree such as an MSc or an LLM. Long distance courses are easier as you will not have a regular weekly commitment, however in certain situations may be given special leave to attend a local MSc programme. Before you register for a postgraduate degree, and take on this significant financial and time commitment make sure you have discussed and thought things through with others who have done this before you and your training program director and consultant who will have to approve your study leave.

Your personal circumstances may necessitate/call for a year out of training for personal or professional reasons. It is a personal decision that could have implications for the rest of your career. As always, the Gold guide will provide the blueprint. An individual will rarely regret exceptional or out of the ordinary achievements not only on a personal but also a professional level. Whenever you ask for advice, make sure you evaluate this critically before making up your mind.

Exams

All information you need can be found here:

<http://www.rcpsych.ac.uk/examinations.aspx>

At this point in time the MRCPsych exam consists of three written papers and one oral OSCE type exam (CASC). Membership of the Royal College is granted following success at all four steps.

It is not productive to spend a lot of time memorising textbook material. The trick to passing the written exam is practising lots of MCQ questions. There are multiple good quality online courses that offer this.

The CASC is an oral exam, effectively role-play between yourself and actor. This is a completely unfamiliar exam format for Greek trainees. The trick to success is to practice past exam questions

with a group of 3 to 4 trainees (allows for maximum practice vs observation benefit). It is of note that during CASC practice your aim should be to learn from others and teach others your 'tricks' in return. As such you should be very careful in choosing your study partners. You should preferentially aim to work with those whose clinical skills you trust, instead of just sticking with your friends.

It is usually best to stay away from thick textbooks both for exam preparation and personal learning. The three books that are essential reading would be the Oxford handbook of psychiatry, ICD 10, and the Maudsley prescribing guidelines.

Subspecialty training

Towards the end of your CT3 year you will have to apply for ST4 jobs. Unlike the clinical rotations at core level ST 4- 6 jobs are often yearly placements in different services (community, inpatient etc) of the same subspecialty.

Higher specialty trainees are allowed half a day for research and half a day for 'special interest'. Depending on the specialty you may choose to use a special interest in any number of things. As a general rule it would be prudent to focus your interests in areas where your skills would be highly sought-after at consultant level. You would be able to identify such areas by enquiring about your trusts future plans for expansion, and regularly visiting the RCPsych website and perusing the latest government policy documents.

Conclusion

Many people say that being a registrar is the best time of your life. Try to make the best of it so that you can emerge a well rounded clinician whose skills will be sought after throughout the world.

Dr Katherine Kasiakogia-Worley

MIND & BODY MEETING
AND
ASCLEPIAN ORATION
19TH OCTOBER, 2013 (LONDON, UK)



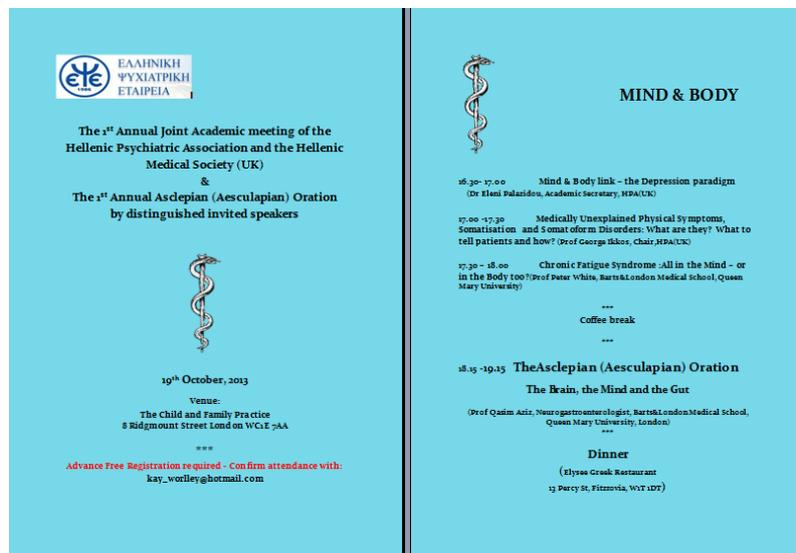
Eleni Palazidou
Academic Secretary, Hellenic Psychiatric Association, UK Division

The idea for the Mind & Body meeting was conceived in the autumn of 2012 when the WHBA (World Hellenic Biomedical Association) and St George's Medical School in Cyprus, organised a joint conference in Nicosia. In an attempt to bring together different specialties including psychiatry we decided to have a joint session of the diaspora doctors. After a lot of deliberation and extensive exchange of ideas between Prof Gabriel Panayis (rheumatology-UK), Prof Pavlos Kymissis (child psychiatrist – US) and myself (adult psychiatry-UK) we opted for the title of *Mind & Body*. The success of this meeting and the interest shown from all parties (psychiatrists, other medical specialties and non-medical scientists) encouraged me to take the idea further and attempt to establish this as a yearly event with the aim to bring together the Greek doctors in the UK. The objectives would be not only to encourage academic and clinical contact, exchange of ideas and potential collaboration but also to facilitate social contact amongst us. In addition such meetings could also serve as a pathway to Greek doctors, new to the UK, to make contacts and access help support and advice from those of us already established in the UK medical system.



To make the meeting even more interesting we attached the “Asclepian Oration” component, devoting the meeting to the God of Medicine! As the “Hippocratic Oration”, organised by the Hellenic Medical Society (UK) is reserved for doctors of Greek origin, we decided to make the Asclepian Oration “truly international”. This would allow us to expand our horizons and have a wider choice of eminent speakers, Greek as well as non-Greek. Given the scope of this meeting it was appropriate to hold this jointly with the Hellenic Medical Society UK.

The first joint meeting on Body & Mind and 1st Asclepian lecture was held on the 19th October this year and proved to be a great success. The room was packed and we had excellent feedback from the attendants. It is therefore established as an annual event and hopefully in the future it could possibly be also taken to Greece and Cyprus in collaboration with local colleagues.



The meeting started with an introductory lecture (Eleni Palazidou) with the title “**Mind and Body link; the depression paradigm**”. This discussed the evidence on the neurobiology of depression as an example which demonstrates the inextricable link between the psychosocial and physical in the genesis of mental disorder and its links with physical illness. An excellent lecture followed by Georgos Ikkos (Chair of HPA (UK) on the subject of “**Medically Unexplained Physical Symptoms, Somatisation and Somatoform Disorders: What are they? What to tell patients and how?**” It summarised the evidence on the perception of physical symptoms in particular pain and the powerful effect of psychological mechanisms in its experience. It also gave useful tips on how to sensitively and effectively present relevant information to the patients, on their condition. The third lecture titled “**Chronic Fatigue Syndrome: All in the Mind – or in the Body too?**” was delivered by our invited guest Peter White (Professor of Psychiatry, Bart’s & the London School of Medicine, Queen Mary University), an internationally established expert on the Syndrome of Chronic Fatigue. He discussed the difficulties in trying to separate mind and body mechanisms and the importance of keeping an open mind in the understanding of the pathogenesis of this incapacitating condition. He quoted Kinnier Wilson (1940) “*This antithesis between ‘organic’ and ‘functional’ disease states still lingers at the bedside and in medical literature, though it is transparently false and has been abandoned long since by all contemplative minds*” and he ended his talk with Hippocrates’ enlightened words “***The nature of the body can only be understood as a whole, for it is the great error of our day in the treatment of the human body that physicians separate the soul from the body***”.

The evening closed with an expertly delivered lecture by our Asclepian orator Prof Qasim Aziz (Centre for Digestive Diseases, The Wingate Institute for Neurogastroenterology, Bart’s& The London Medical School, Queen Mary University) on the subject of “**The Brain, the Mind and the Gut**”. He discussed the links between the brain and the gut and the mechanisms involved in

“psychosomatic conditions” such as the Irritable Bowel Syndrome. His lecture was indeed the icing on the cake!

The meeting ended with a lively discussion and we all headed to the local Greek restaurant “The Elysee” to indulge in Greek food, music and plate smashing!

Dr Eleni Palazidou

BOOK REVIEW

W. V. HARRIS ED.

MENTAL DISORDERS IN THE CLASSICAL WORLD

BRILL, LEIDEN- BOSTON, 2013



George Ikkos
Chairman,
Hellenic Psychiatric Association, UK Division

This specialist book deserves a wide readership as well as a place in every library that aspires to a comprehensive collection on the history of medicine, psychiatry and psychology.

The chapters are invariably well written. Contributors include two practicing psychiatrists, Bennett Simon from the US and Julian Hughes from the UK, but are mostly by classical scholars. There are strong contributions from France, Germany and Italy as well as the UK and the US. The editor, Professor of History and Director of the Center for the Ancient Mediterranean at Columbia University has done a superb job at bringing together a diverse group of authors and maintaining natural cohesion, despite contributions ranging on subjects from the linguistics of insanity in the archaic world to mental illness in legal practice in the Roman world and even to conceptions of depression in the Arabic world.

The first two parts of the book are devoted to issues of classification in contemporary psychiatry and the classical antiquity. The biological understanding of mental illness in antiquity was limited by the humoral theories of the time but the discourse was not without considerable sophistication. I particularly enjoyed the chapters on “The Early Greek Medical Vocabulary of Insanity”, a model of intelligent and evidence based scholarship and the one on “Plato on Madness and the Good Life” which is directly relevant to contemporary psychiatrists. The importance and influence of Plato’s conceptions recur creatively in different chapters.

The next two parts are dedicated to particular syndromes, symptoms and treatments. The editor’s own chapter on “Greek and Roman Hallucinations” charts what we know about the evolution of the secular understanding of hallucinations in the ancient world, whilst making the point that supernatural views were never entirely abandoned, perhaps especially amongst the lay population. The chapters on “Cure and (In)curability of Mental Disorders” and “Philosophical Therapy as Preventive and Psychological Medicine” illuminate the remarkable conceptual sophistication in approaching the problems of mental illness in those times. This sophistication notwithstanding psychology and psychiatry have made hugely significant advances in the understanding of the nature and function of emotions through Darwinian principles and evolutionary research which were not available to the ancients.

The final three parts tackle issues such as the representation of Madness in Homeric Poetry and Classical Tragedy, Mental Disorder and Responsibility and, finally, Madness in Roman Legal Practice. At the recent joint Conference with the Royal Society of Medicine Section of Psychiatry

on Emotion and Psychiatry, members of the Hellenic Psychiatric Association UK Division and a large multidisciplinary audience have had the privilege of hearing Glenn Most, Professor of Greek Philology at the Scuola Superiore Normale in Pisa, deliver in person his thesis on how theatrical performance dynamics lend preference to the appearance of visual as opposed to auditory hallucinations in classical tragedy.

There are many interesting chapters in each section and the one on “Madness in the *Digest*” (the Roman Law Compendium) attest to the fact that the Romans had a no nonsense approach to mental illness, with sophisticated formulations of the problems it presents in daily life and an acute understanding of the complexities arising out of its frequently recurrent nature. Read it and you will be surprised!

Professor George Ikkos