

FIRST SESSION**Psychiatry in general practice****WELCOME**

Dr I. M. Scott, M.D., M.R.C.P.E. (*Provost of the North-east Scotland Faculty*)

ON behalf of the North-east Scotland Faculty I would like to welcome you all to this symposium. We are especially grateful to our two chairmen, Dr Annis Gillie, the president of our Royal College who will be in the chair tomorrow, and Professor Malcolm Millar, dean of the Aberdeen Medical Faculty.

Psychiatry has rather changed in recent years; when I was a medical student in the early 30's we used to have a few lectures on psychology, but as there was no examination we very rarely went to these, and even if we did go to one or two out of ten we found them boring and irrelevant. How wrong we were. Even when we eventually got round to doing psychiatry we came across only a few major mental illnesses, and those of you who are about my age will know that this was the extent of the knowledge with which we entered into general practice, we had to learn as we went along. How different mental health is today.

There is one other aspect I would like to refer to now, and that is to give a special welcome to Dr Ian Richardson who has only recently taken up the post of senior lecturer in the new department, the General Practice Teaching and Research Unit of the Aberdeen Medical School.

The College and especially the North-east Scotland Faculty is very grateful to the University of Aberdeen, to the dean who has done a great deal to forward this project and to the faculty of medicine working party.

OPENING REMARKS

Professor Malcolm Millar, M.D., F.R.C.P. (*Chairman*)

It is a great privilege to be here and to chair this session of the symposium on "Psychiatry in General Practice", and in my other capacity as representative of the university to welcome you to this particular hall and indeed to the university.

There was a time when patients were related to what went on in their bodies, but now their needs seem to be related more to what goes on either within their own personal minds, or perhaps more significantly between themselves and other people in their environment, and this is where the general practitioner really comes into his own because he alone can see what is happening between the patient and others of import-