

**Puerperal depression—a study of predictive factors**

Sir,

An investigation carried out in Plymouth by a small group of general practitioners on a limited number of patients and reported in the *Journal of the Royal College of General Practitioners*, 1970, 19, 22, indicates that it may be possible to predict the onset of puerperal depression from easily assessed factors presenting in the antenatal period. To confirm this statistically it is necessary to use a much larger sample. It is hoped that if 200 general practitioners were to take part, it would only be necessary for each to study 15 consecutive pregnancies. The significant factors have been set out on four cards which would be sent out for completion about the following times:

1. the first or second consultation of the pregnancy
2. between the 24th and 28th weeks
3. between the 9th and 14th post-partum day
4. at an examination about the 12th week after delivery.

The first card to be completed will take slightly longer than the others but none is arduous.

As the diagnosis of puerperal depression was based on symptoms and signs rather than syndromes, it is important that even a single symptom or sign is recorded. These are set out in each of the record cards.

Ordinary clinical standards of examination should be used. An admission of depressive symptoms should not be squeezed too enthusiastically out of a patient, but neither should evidence of emotional disturbance be ignored because of personal preconceived ideas about this type of disorder. Recorders should use their own techniques in assessing answers to the questions.

Practitioners who would be interested to take part in this study are invited to get in touch with me. They will then receive further information about the study and examples of the record card to be used.

RONALD PLAYFAIR,  
Recorder.

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Milehouse,  
Plymouth, Devon.

**The British Association of Manipulative Medicine**

Sir,

I wish to draw the attention of your readers to the Introductory Course in Manipulative and Locomotor Medicine which will be held again at the Brook General Hospital, London, S.E.18, during the winter of 1970/71.

The course is run by The British Association of

Manipulative Medicine to introduce medical practitioners to the principles and practice of manipulation. Examination and diagnosis of lesions of the musculoskeletal system form the basis of the course, together with individual tuition in manipulative and injection techniques.

The course has proved most useful to general practitioners and to those practising in the fields of physical medicine, orthopaedics and industrial medicine.

It consists of a series of four weekends and will be held on 24–25 October 1970, 5–6 December 1970, 30–31 January 1971, 13–14 March 1971; with a 'follow-up' weekend on 24–25 April 1971, for those who have attended previous year's introductory courses. It has been recognized by the Department of Health and Social Security and by the British Postgraduate Medical Federation who make contributions towards expenses, tuition fees, etc.

For full details please apply to the Honorary Secretary, B.A.M.M., 32 Wimpole Street, London, W.1.

C. S. DUTTON,  
Chairman, The British Association of Manipulative Medicine.  
London.

**Dianetics\***

Sir,

I am a founder member of the Royal College and have been on the College Research Register as working in the field of mental health since its inception.

I was the opening speaker at the College symposium on *Mental health and the family doctor* in 1960 when Sir Aubrey Lewis was in the chair and my fellow speakers were Dr Michael Balint and Sir D. Stafford-Clark.

Since 1960 I have undertaken extensive research in this field, finding more and more effective ways of helping patients with emotional disorders, and this led to my investigating the claims made by L. Ron Hubbard in his book, "Dianetics: the Modern Science of Mental Health" published in 1950 and I am now writing to tell my colleagues through our *Journal* why the new technology of Standard Dianetics is of value to the medical profession.

New information which has come out of research in the field of nuclear physics has made it possible to define the mind and understand its function. It has clearly emerged that the mind is not the brain and is not accommodated within the skull. The mind is not physical in the same sense that the brain is physical, it cannot be examined, for example, under a microscope. But it is very real and is senior to the brain. L. R. Hubbard has shown that the only reason we have difficulty in