

Dear Sir,

I read with interest, the paper by Kua et al, "Beliefs about Outcome for Mental Disorders: A Comparative Study of Primary Health Practitioners and Psychiatrists in Singapore"⁽¹⁾. This survey of the beliefs was done on primary health physicians and psychiatrists working in Singapore. I agree with the authors that an understanding of the beliefs amongst health professionals as well as others will help in designing programmes to educate doctors about mental disorders.

One of the interesting findings of Kua's study was that the psychiatrists rated the long-term outcome for schizophrenia more negatively than the primary health professionals did. This included the risk of future violence and suicide. Initially, this would appear somewhat paradoxical to the reader as the paper highlighted the advance of psychopharmacology and psychiatric treatment in recent years. The reader would therefore expect the psychiatrists to rate the long-term outcome of schizophrenia more favourably than the primary health physicians. However, it is neither paradoxical nor surprising. The reason for this unusual finding is that all the psychiatrists are generally cautious about the prediction of long-term outcome of mental illnesses, especially with regard to the risk of violence⁽²⁾.

The relationship between mental illness and violence or offending behaviours is tenuous and likely multifactorial. The most important risk indicator of future risk is previous violence. The risk of such behaviours is also increased by the presence of a personality disorder or substance abuse⁽³⁾. In the vignette for schizophrenia that was used in the study, there was no clear indication of violence, personality disorder or substance abuse⁽⁴⁾; whereas there was violence mentioned in the vignette for mania⁽¹⁾. It would therefore appear that psychiatrists are more cautious about the long-term risk for violence for schizophrenia than other mental illnesses, even in the absence of risk factors.

I agree with the authors that Kua's study reinforces Jorm's study⁽⁴⁾ that doctors including psychiatrists view that there is a tendency to discriminate more against schizophrenia than other mental illnesses. Kua ended the paper by highlighting that primary health practitioners have to keep abreast with the latest advances in psychiatry. Similarly, I believe that psychiatrists should keep ourselves updated to continue the fight against the scourge and stigma of mental illness.

Yours truly,

Dr Tommy Tan
MBBS (Singapore); G Dip BA, MMed (Psychiatry)
FAMS; PG Dip. Forensic Psychiatry (London)
Consultant, Dept of Forensic Psychiatry
Woodbridge Hospital

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