

# So you want to be ... a psychiatrist

Psychiatry is often known as ‘the other half of medicine’, and is the last truly clinical speciality. Thus psychiatrists take histories and conduct examinations, of both the physical and mental state, which in themselves substantially lead to the diagnosis.

There is no defining blood test or radiological investigation that can crack the case, although careful exclusion of possible physical factors or contributors to mental illness is mandatory. A psychiatric ‘firm’ (and teamwork is the norm) is therefore rather like a detective agency, quizzing the patient, his/her relatives or friends, checking out with GPs, social workers, the police, or even foreign embassies, and putting together often quite strange patient journeys.

Conditions range from the banal (e.g. people being fearful of going into crowded shops – up to 20% of the population has an anxiety problem at some time in their life) to the frightening (e.g. a psychotic young man wanting to cut his heart out) to the baffling patient with no name and muddled speech.

Psychiatrists usually choose to be so after an enlightening psychiatric attachment or because talking to patients seems more interesting than sticking things into them. An intercalated psychology degree can be helpful, but no more so than anthropology, the history of medicine, or even the history of art, ideas or science.

## Specialties

Psychiatry also holds within it a wide range of differing job experiences, from the psychotherapeutic focus of a child psychiatrist to the casualty-like requirements of acute adult wards, to the outreach work and home crises of community care. Involvement in the law and prison is part of forensic psychiatry (and even running places like Broadmoor) while addic-

tions, old age and learning disability have their special fascinations.

Liaison and neuropsychiatry deal with that elusive borderline between neurology and psychology, mind and brain, where functional magnetic resonance imaging scanning is now starting to reveal some extraordinary syntheses.

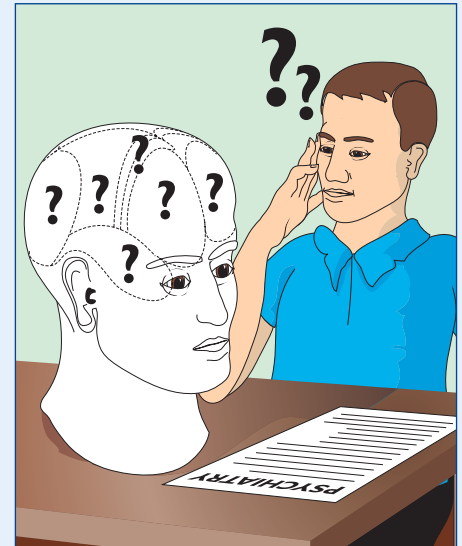
## What do you need?

The ‘core attributes’ suggested by the Royal College of Psychiatrists (2004) in their *Good Psychiatric Practice* booklet include 14 bullet points, from ‘clinical confidence’, to the ability to bring ‘empathy, courage and hope to patients and their carers’ and ‘a critical self-awareness of emotional responses to clinical situations’. Team leadership, decisiveness and the ability to appraise staff are also vital.

Currently ST1–3 consists of 3 years in approved rotations, doing 6-monthly jobs in a variety of specialties leading to the Membership qualification of the Royal College of Psychiatrists (MRCPsych). Higher ST4–6 training incorporates three to four 1-year-long posts, depending on the requirements of the particular specialty, and off you go as a consultant. There are some pre-specialist jobs now established (in 4-monthly rotations) and it is likely that these will be included in a number of foundation year 1 and 2 schemes.

## Other qualities

Psychiatry is popular, with many applicants for most rotations, so experience in



accident and emergency, neurology or general medicine for a year or two beforehand always helps. People who do personal things, like going to the Antarctic or learning Sanskrit, are also usually welcomed. Psychiatry values the sceptical polymath.

But remember, you have to be able to manage complex psychopharmacology as well as intimate confessions, to deal with stigma, and to work with other quite independent professions (e.g. social work, law, probation, police, psychology). So literature, films and plays are all grist to the mill, and reading or viewing them entirely justifiable as continuing professional development. There is wide scope for additional work, in terms of lecturing, writing, medicolegal cases and advisory boards, and psychiatrists are much in demand. Get going! **[BJHM](#)**

*Conflict of interest: none.*

Royal College of Psychiatrists (2004) *Good Psychiatric Practice*. 2nd edn. Council Report CR125. Royal College of Psychiatrists, London

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## KEY POINTS

- Psychiatry is currently a shortage speciality and posts are continuing to expand.
- Psychiatry provides a wide range of clinical experiences, suited to a wide range of personalities.
- Modern psychopharmacology and cognitive psychology therapies make for exciting research and therapeutics.
- Psychiatrists often have interests and training outside medicine, to their advantage.
- Psychiatrists have a well-established training programme and by and large continue to have a team-based ‘firm’ approach.
- Psychiatry is endearingly clinical – diagnosis and management depending on talking to people.
- Psychiatrists generally get better as they mature, perhaps because they are rarely called out at night.