

Parents' grief

Whenever someone we love dies we go through a period of grief and mourning. This also happens after a stillbirth, although parents may feel they are grieving for a child they have never known, especially if they have never seen the baby, because a stillbirth leaves the parents with an emptiness and a bewildering sense of a non-event. People grieve in different ways. After the first shock some people want to talk about the tragedy repeatedly while others want to withdraw into themselves. Some feel angry; others reproach themselves, and many women after a stillbirth feel inadequate and a failure as a woman. Many are excessively concerned over their other children, while some find themselves unable to cope with them. These are normal reactions which generally lessen in time. Most important is to recognize that it is better to let yourself grieve and express your sorrow. When parents feel depressed, talking to another parent who has suffered a stillbirth can help and so can talking to others whom they feel are understanding, such as a doctor, chaplain, social worker or health visitor. It can help to make a marriage deeper and stronger if parents share their grief.

Children's reactions to stillbirth

Children are sensitive and share the family's loss. They may not understand or talk about death in the same way as an adult. Stillbirths are especially difficult for them because the baby they expected has disappeared. They may not be able to talk about their fears, and the younger ones cannot understand explanations. They need to be reassured of their parents' love and affection, however difficult it may be for parents at the time. It helps to explain the facts to them, and allows them to express their feelings of sadness, anger or bewilderment. Children are often less afraid of death than adults and are more upset by disappearance. It is less frightening for children to tell them the truth than to leave them in ignorance at the mercy of their imagination. Children may need to be reassured that they were not the cause of the baby's death. Some children become difficult instead of showing their grief, while others may only allow their distress to come out later. Help is available from your family doctor, who may refer you to a paediatrician, a medical social worker at the hospital or to a Child Guidance Clinic.

What about another pregnancy? When to have another baby? Where to have your next baby?

Your obstetrician or family doctor will advise you about this, but it is advisable to wait a few weeks or even longer before starting another baby. Don't let

yourself be pushed into having another baby but wait until you are ready. People are often unaware of how deeply and for how long some parents can mourn a stillborn child. Neighbours, friends and relatives may not understand your grief and are often embarrassed to talk to you about the baby. The deep feelings that are brought to the surface by a stillbirth often lead to family disagreements that you should not take too seriously. You should discuss with your family doctor where to have your next baby. You may be happier to return to the obstetrician you already know but do not feel guilty if you find you prefer to go elsewhere if you have unpleasant memories of the events surrounding your loss.

Anxieties during your next pregnancy

You are bound to be anxious about your next baby. Make sure that your family doctor knows what has happened and see him as frequently as you need to. Explain to friends and relatives you may need them any time you feel worried. The right company, or even a chat on the telephone, can calm fears. If you have other children, they may become anxious during your next pregnancy, and although they may not show it they may need the opportunity to talk about it. There is a great sense of joy and relief when the next baby is born safely, alive and well, but there can be unexpected and bewildering reactions. Some react either by being totally absorbed in the baby or feeling unreal and unable to care for him. Some parents over-protect the new baby. It is not uncommon and quite normal for parents to find themselves crying for the baby that died and grieving anew, while loving and cuddling their newborn baby.

Reactions of others to the next baby's birth

Most people are delighted when you have your next baby and often assume that you will then forget that you ever had a stillbirth. Don't let these reactions interfere with you enjoying your new baby.

BIOLOGICAL PSYCHIATRY GROUP

DEAR SIR,

There seems to be general agreement on the value of having Specialist Sections or Groups in the Royal College of Psychiatrists to arrange meetings and encourage the study of special aspects of psychiatry. Recently it has been suggested that in addition to the present Sections it might be helpful to have a Section for Biological Psychiatry, which would deal mainly with the biological approach and the application of the basic neurosciences to psychiatric problems. Thus the meetings of a Section of this kind might promote

discussion of subjects such as the mechanism of action of psychotropic drugs, the operation of genetic factors, the role of the opiate receptors and endorphins, nutritional factors and similar topics. The current interest in this approach is indicated by the establishment of separate Societies for Biological Psychiatry in the USA and in other countries and by the World Congresses of Biological Psychiatry, the second of which will be held in Barcelona this year.

A possible argument against this proposal is that Biological Psychiatry is included in and forms a part of the fields of other Specialist Sections which have already been formed. However, the advantages of having a separate Section for Biological Psychiatry appear to outweigh objections of that kind. A Section of this kind might in fact be expected to exert a unifying influence by bringing together members of other Sections and developing lines of thought that are relevant to other specialist fields.

If there are a sufficient number of members of the College who would support this proposal the first step will be to arrange a meeting to consider the setting up of a Group. May I therefore ask any Members who are interested in the proposal and who might wish to join such a Group to let me know their

views. I should be glad also to have any suggestions that College members may like to make as to who might be the Chairman and Secretary of the Group.

DEREK RICHTER

*Deans Cottage,
Walton-on-the-Hill,
Tadworth, Surrey KT20 7TT*

THE WERNICKE/KORSAKOV SYNDROME

DEAR SIR,

In the course of a biochemical study of the Wernicke/Korsakov syndrome, I have investigated a pair of identical twins—one with the disease, the other normal. Such cases appear to be excessively rare but are of importance for the research.

I would be grateful if any of your readers who might know of such identical twin material would inform me and perhaps allow me to study them biochemically.

DENIS LEIGH

*The Maudsley Hospital,
Denmark Hill,
London SE5 8BZ*

MYTHS AND 'MIND'

A reply to Dr Crumpton's article (*Bulletin*, March, p 41) by Tony Smythe of MIND will be published in a forthcoming issue.

THE UNIVERSITY OF MANCHESTER FACULTY OF MEDICINE

Registered medical practitioners are invited to apply for a course in preparation for the degree of Master of Science (Psychiatry), starting in October 1978. The course will consist of part-time instruction during nine university terms. For the first two years there will be two days teaching every week in biological, clinical, social and psychological aspects of psychiatry and the methodology of research. The candidate will be examined at the end of the second year and will present a thesis at the end of the third.

Candidates should normally hold training posts at one of the psychiatric units in the Manchester region. Vacancies for such posts will be advertised in the medical press in April.

Further particulars can be obtained from Professor D. P. Goldberg, Department of Psychiatry, University Hospital of South Manchester, West Didsbury, Manchester M20 8LR, to whom application should be made as soon as possible.