

Correspondence

Contents: Classification of fire-setters/Thought disorder or communication disorder/Chlorpromazine-induced retinopathy/Buspirone augmentation of sertraline/Osteogenesis imperfecta and non-accidental injury/Friedrich Nietzsche and Sigmund Freud/Postpartum depression – a specific concept?/ Personality features in chronic depressive episodes/ Chinese whispers and the prophylactic effect of cognitive therapy.

Classification of fire-setters

SIR: Puri *et al* (*BJP*, March 1995, 166, 393–396) raise the importance of attempting to classify fire-setters (arsonists). In so doing, they kindly refer to a study conducted by myself with Tennent & Trick (Prins *et al*, 1985) and make some comparisons with their own survey. However, it is important to point out that our study consisted of a group of *imprisoned* arsonists eligible for consideration for parole (i.e. they were not a 'psychiatrically' derived sample).

Of more relevance to the study by Puri *et al* is the survey by Rix (1994) of 153 adult arsonists referred to him for psychiatric reports. He broadens the categories of motives described in our original paper to fifteen – adding to our list re-housing, carelessness, anti-depressant activity, and arson by proxy. (Incidentally I have tried to improve upon our original attempt at classification in Prins, 1994 (Chapter 5)). It is of interest that Puri *et al* do not refer to Rix's paper although it appears in the same issue of *Medicine, Science and the Law* as my Editorial and the paper by Barnett & Spitzer which they quote. However, I would agree with their strictures on our failure to provide an adequate classificatory system. This is because, as Wooden & Berkey (1984) point out, we all too often fail to distinguish between *behavioural characteristics* of fire-setters, various *types* of fire-setters and their *motives*.

PRINS, H. (1994) *Fire-Raising: Its Motivation and Management*. London: Routledge.

PRINS, H., TENNENT, G. & TRICK, K. (1985) Motives for arson (fire-raising). *Medicine, Science and the Law*, 25, 275–278.

RIX, K. J. B. (1994) A psychiatric study of adult arsonists. *Medicine, Science and the Law*, 34, 21–34.

WOODEN, W. S. & BERKEY, M.L. (1984) *Children and Arson: America's Middle Class Nightmare*. London, Plenum Press.

H. PRINS

1 Home Close Road
Houghton-on-the-Hill
Leicester
LE7 9GT

Thought disorder or communication disorder

SIR: Thomas (*BJP*, March 1995, 166, 287–290) argues that we should be wary of the 'tautological' term 'thought disorder', and suggests that thought and speech should be considered separately.

He asserts that "speech errors arise from errors in the application of linguistic rules, without reference to thinking processes." A role for linguistic descriptions in categorising psychopathological phenomena, and the term 'communication disorder' are proposed.

The philosophical debate about the links between thought and speech has a long pedigree, and is concisely encapsulated in Wittgenstein's question "what is an explanation of the meaning of a word?" (Wittgenstein, 1958). Thomas' contentions that speech is often unrelated to thought since it frequently serves a social function, rather than communicating ideas, does little to further our understanding, and evades, rather than answers, Wittgenstein's central question.

Thomas cites Chaika in stating that language "is self-contained and has an independent structure of its own with no reference to thought or the outside world." This definition might more appropriately be applied to the self-referent system of rules in linguistic science.

'Morphological' language disturbances are discussed. Unfortunately, the examples quoted from Andreasen tend to disprove Thomas' point. "I got so angry I picked up a dish and threw it at the *gshinker*", and "So I sort of *bawked* the thing up". These violate linguistic rules only if we ignore Dr Johnson's (1775) complaint that "not knowing the original import of words, we will use them with