

SEM and that for the unipolar group is 0.38 ± 0.04 SEM ($p < 0.0005$ level, Student's *t* test). These values are in excellent agreement with those reported by Cazzulo *et al.* The significance of this difference is not yet clear; however, it is compatible with our observations that the antidepressant response to Li is more frequent among bipolars and that the antidepressant response is often associated with high RBC Li—plasma Li ratios.

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THE NEW CHRONICS

DEAR SIR,

There is concern about the continued accretion of 'new chronic patients' in mental illness hospitals (1). We have carried out a survey of patients admit-

ted and remaining continuously for twelve months or more in a mental illness hospital of 950 beds (2.1 per thousand population). At the end of 1973 there were 531 who had been admitted before November 1967, although this number had fallen from 719 in the previous two years. The number admitted after December 1967 had stabilized by 1971 at between 180 and 200. This number, which is remaining fairly constant, perhaps represents the number of new chronic patients in mental illness hospitals, and it is equivalent to about 0.4 per thousand population. These patients are mainly in the older age groups and over half of them are over the age of 65; 64 per cent of the whole group are women. However, there were 60 patients under the age of 55. The death/discharge rate is about 35 per annum, and as the total remains constant this number represents the admissions rate, which is equivalent to 0.07 per thousand population per year.

We also examined the potential dispersal of this group. If there were ideal community facilities and sufficient general hospital geriatric services about one quarter (0.1 per thousand) would still require prolonged in-patient care in a mental illness hospital.

The estimates in this study are in line with those discussed by the Tripartite Committee in 1972 (2). Achievement of reduction of numbers depends in particular on development of professionally supervised residential accommodation for the mentally ill in the community. But many of these hostels would resemble villas and supervised open wards in existing mental illness hospitals, and patients might be at a disadvantage because they would be isolated from the rehabilitation facilities which only a large institution can provide.

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