



CHAPTER OF

Psychiatrists



A Brief History of the Chapter of Psychiatrists

Beng-Yeong Ng¹ FAMS, MBBS, MMed (Psych)

Hwa-Ling Yap² FAMS, MBBS, MMed (Psych),

Kuan-Tsee Chee^{1,3} FAMS, MBBS, MRCPsych



¹ Department of Psychiatry, Singapore General Hospital, Singapore

² Division of Psychological Medicine, Changi General Hospital, Singapore

³ Emeritus Consultant Psychiatrist, Institute of Mental Health and Woodbridge Hospital, Singapore

Address for Correspondence:

Dr Ng Beng Yeong

Department of Psychiatry

Singapore General Hospital

Outram Road

Singapore 169608.

Email: ng.beng.yeong@sgh.com.sg

ABSTRACT

The Inaugural Meeting of the Chapter of Psychiatrists and Chapter of Pathologists, Academy of Medicine, was held on 5 December 1986 at King's Hotel, Singapore. Though the Academy of Medicine was duly founded in 1957, the Chapter of Psychiatrists has been in existence only since 1986. Over the last 20 years, the Chapter is very much involved in organising activities, symposia and workshops for doctors and psychiatrists. In 1998, the Guidelines on the Practice of Electroconvulsive Therapy (ECT) were issued by the Academy of Medicine, Singapore. The challenges ahead of us include: membership growth and formation of College, communication with members, and close liaison with other psychiatric associations.

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THE INAUGURAL MEETING

The Inaugural Meeting of the Chapter of Psychiatrists and Chapter of Pathologists, Academy of Medicine, was held on 5 December 1986 at King's Hotel.^{1,2} At that time the Academy already had 7 Chapters in her fold. The Chairman, Dr Lawrence Chan (then Master of the Academy of Medicine) remarked that the addition of two new Chapters was a step forward for the Academy.¹ He compared the Chapters with grassroots responsible for the bulk of continuing medical education activities for members, trainees and other interested doctors. The Inaugural Meeting was attended by 25 members, of whom 14 were psychiatrists.² The following were elected as office bearers: Dr Teo Seng Hock (as Chairman), Dr Tsoi Wing Foo (Vice-Chairman), Dr Kok Lee Peng (Honorary Secretary), Dr Wong Yip Chong (Committee member), Dr Chee Kuan Tsee (Committee member) and Dr Ong Thiew Chai (Committee member).

At the Inaugural Meeting, the issue of the Chapter of Psychiatrists in relation to the Singapore Psychiatric Association (SPA) was briefly discussed. Dr Wong Yip Chong remarked that SPA, which is the national organisation for psychiatrists, antedates the formation of the Chapter. Whilst the Chapter should strive to excel in academic aspects, he urged the Chapter to build up a close liaison with the SPA and support the latter's role in "medical-political-academic functions".¹ He said that psychiatric practice has repercussions on the public at large (the schools, military, etc) and the Chapter may be called upon to advise Government from time to time. Dr Tan Chue Tin agreed that efforts to improve psychiatry in Singapore should be the joint co-operation of both the Chapter and the national body. He was confident that the Chapter Committee would bear in mind the necessity to build up the specialty hand-in-hand with the national organisation.

SPECIALIST TRAINING AND CERTIFICATION

Another important issue discussed during the Inaugural Meeting was that of Specialist Training and Certification. The Academy of Medicine has been maintaining a Roll of Specialists since 1979.¹ The Ministry of Health had approached the Academy to further refine the specialist training and certification programme. This move was the forerunner to the establishment of a Specialist Register.

In 1986-1987, a specialist subcommittee, comprising Drs Teo Seng Hock, Tsoi Wing Foo, Wong Yip Chong and Ong Thiew Chai, was involved in drawing up the criteria and guidelines of specialist training programmes leading to specialist certification of psychiatrists. Dr Teo Seng Hock had been the chairman of the Committee of Psychiatry (under School of Postgraduate Medical Studies) since 1983.² In 1986, a postgraduate training

programme for the Master of Medicine (Psychiatry) was started in collaboration with the Royal College of Psychiatrists (UK).³ There are some similarities with the British model – a 3-year basic specialist training with a two-part examination before moving on to advanced traineeship.⁴ The external examiners are mainly from the UK and Australia.² In 1989, the logbook system was introduced and remains as a cornerstone of the basic and advanced specialty training programme.²

MEMBERSHIP OVER THE YEARS

The number of psychiatrists in Singapore has been increasing slowly over the years from 8 in 1970 to 22 in 1980, to 41 in 1987 and to 70 in 1993 (52 in public service and 18 in the private sector).⁵ Table 1 shows the membership of the Chapter over the years. The Chapter is formed by trained specialists in psychiatry from the university, public hospitals and private sector.² Table 2 lists the names of past Chairpersons, Chapter of Psychiatrists.

Table 1. Membership Over the Years

1991	27
1992	28
1993	32
1994	36
1995	40
1996	45
1997	54
1998	55
1999	57
2000	57
2001	58
2002	60
2003	75
2004	75
2005	82

Table 2. List of Chairmen

Year	Name of Chairman	Year	Name of Chairman
1986 – 1987	Dr Teo Seng Hock	1996 – 1997	Dr Lionel C C Lim
1987 – 1988	Dr Chee Kuan Tsee	1997 – 1998	Dr Lionel C C Lim
1988 – 1989	Dr Tsoi Wing Foo	1998 – 1999	Dr Yap Hwa Ling
1989 – 1990	Dr Tsoi Wing Foo	1999 – 2000	Dr Yap Hwa Ling
1990 – 1991	Dr Tan Chue Tin	2000 – 2001	Dr Simon H C Siew
1991 – 1992	Dr Kok Lee Peng	2001 – 2002	Dr Ang Yong Guan
1992 – 1993	Dr Kok Lee Peng	2002 – 2003	Dr Ang Yong Guan
1993 – 1994	Dr Kok Lee Peng	2003 – 2004	Dr Ong Thiew Chai
1994 – 1995	Dr Kok Lee Peng	2004 – 2005	Dr John C M Wong
1995 – 1996	Dr Lionel C C Lim	2005 – 2006	Dr Yap Hwa Ling



Fig. 1 Fellows of the Chapter of Psychiatrists, taken at the 20th Annual General Meeting at Goodwood Park Hotel on 23 March 2006. Front row, from left to right: Dr Teo Seng Hock, Dr Tay Woo Kheng, Dr Kok Lee Peng, Dr Yap Hwa Ling, Dr Simon Siew, Dr Calvin Fones, Dr Ng Beng Yeong, Dr Ong Thiew Chai. Back row, from left to right: Dr Joshua Kua, Dr Brian Yeo, Dr Tan Chue Tin, Dr Chee Kuan Tsee, Dr Parvathy d/o Pathy, Dr Francis Ngui, Dr Paul Ngui, Dr Pauline Sim, Dr Lionel Lim, Dr Chong Siow Ann, Dr Wong Sze Tai.

CONTINUING MEDICAL EDUCATION

The Chapter of Psychiatrists is very much involved in organising activities, symposia and workshops for doctors and psychiatrists.² Table 3 highlights some of the main topics presented during the Continuing Medical Education (CME) programme. The list is not intended to be exhaustive and interested readers can refer to the Annual Reports of the Chapter. A series of psychiatric talks co-organised with Mount Elizabeth Charter, Behavioural Health Services commenced in 2003. Most of the CME lectures are sponsored by drug companies so that the expenses can be defrayed. Among the many advances in our field over the past century are the biologic bases of human behaviour and mental disorders and psychopharmacology. These areas have also evidenced dramatic growth and changes during the last 20 years.

GUIDELINES ON ELECTROCONVULSIVE THERAPY

Practice guidelines are systematically developed strategies of patient care that are developed to assist clinicians (and patients) in clinical decision-making.⁶ It may be relevant to distinguish between standards and guidelines. Standards are instructions that should be followed in essentially all cases; exceptions to standards

Topic	Years in which activity was held
Child and adolescent psychiatry	1991, 1992, 1993, 1994, 1995, 1996, 1997, 1998, 1999, 2001, 2003, 2004
Depression	1988, 1990, 1991, 1992, 1993, 1997, 1998, 2000, 2003, 2004, 2005
Electroconvulsive therapy	1987, 1995, 1997, 1998, 2000, 2001, 2003, 2004, 2005
Psychotherapy	1987, 1988, 1990, 1992, 1993, 1996, 1999, 2001, 2003, 2004
Substance abuse, addiction	1987, 1988, 1991, 1996, 1997, 2003, 2004, 2005
Anxiety disorders	1988, 1990, 1992, 1996, 1998, 2004, 2005
Schizophrenia	1988, 1990, 1992, 1998, 2000, 2004
Sleep disorders & Insomnia	1990, 1991, 1994, 2003, 2004, 2005
Forensic psychiatry	1990, 1992, 1994, 1999, 2004
Bipolar disorders	1988, 1989, 2003, 2005
Hypnosis	1989, 1990, 2003, 2004
Eating disorders	1987, 1990, 1993, 2004
Organic Psychiatry	1989, 1995, 2004
Personality disorders	1989, 1991, 1993
Dementia	1990, 2005
Professionalism	2005, 2006



Fig. 2 39th SMCM Opening Ceremony held on 30 June 2005.



Fig. 3 Dr Mike Shooter, President, Royal College of Psychiatrists, UK & Ireland & Plenary Lecturer for Chapter of Psychiatrists, Academy of Medicine, Singapore; 1 Day Symposium, 2 July 2005 held in conjunction with the 39th Singapore-Malaysia Congress of Medicine, 30 June – 3 July 2005, Grand Hyatt Singapore.

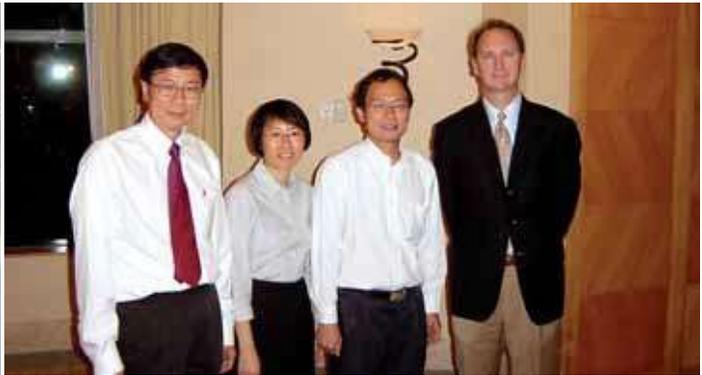


Fig. 4 Left to right: A/Prof Chong Siow Ann, Dr Yap Hwa Ling, Dr Ng Beng Yeong and A/Prof Richard S E Keefe, Visiting Academician Y2006, Academy of Medicine, Singapore and the 4th Professional Lecturer of the Chapter of Psychiatrists, 21 September 2006.

should be infrequent and strongly justified. Guidelines are recommendations that should be followed in the majority of cases; exceptions to guidelines are more common and require only minimal justification.⁷

In 1998, the Guidelines on the Practice of ECT were issued by the Academy of Medicine, Singapore.⁸ This set of guidelines aims to standardise the procedures as well as to ensure operational quality in the practice of ECT in Singapore. The committee observed that the use of ECT has stood the test of time despite countless attempts by its opponents to discredit and ban its use. When used judiciously, its safety and efficacy has been confirmed. It is hoped that the set of guidelines will ensure that ECT remains a safe and effective tool in the therapeutic armamentarium of Singapore Psychiatry.

SECTION 56(1) OF THE MEDICAL REGISTRATION ACT 1997

In 1998, the Committee was concerned with Section 56(1) of the Medical Registration Act 1997, which states: “A registered medical practitioner who treats or attends to another registered medical practitioner who is in the opinion of the medical practitioner treating or attending to him, unfit to practise as a medical practitioner by reason of his mental or physical condition shall inform the Medical Council accordingly.” A reply from Clinical Professor N Balachandran, then President of the Singapore Medical Council dated 12 October 1998, indicates that the Act “is to be interpreted very broadly so as to ensure the medical practitioner who is medically unfit would seek proper treatment. The matter will then be referred to the Health Committee.... such problems that are referred to the Health Committee, will be properly investigated and proper advice given to the practitioner”.

REPORTS BY MENTAL HEALTH PROFESSIONALS FOR CUSTODY AND ACCESS PROCEEDINGS

The Committee for 2004-2005 deliberated on the proposed reply to Family Court’s request on establishing a structured framework for the evaluation of children custody and access proceedings, requested through the Singapore Medical Association.^{9,10} The general consensus of the Committee was that it would be difficult to nominate an expert panel on the assessment of Child Custody and Access, as the number of psychiatrists in Singapore remains small, and the training differentiation for child and adult psychiatry are being developed. The Committee also noted that the Institute of Mental Health would be giving a separate formal reply to the Family Court. The Committee eventually concluded that it is best left to the Family Court to make the final decision after receiving the credentials of the child psychiatrist and declaration proof of his/her training supported by peer review.¹⁰

CHALLENGES AHEAD

The Academy of Medicine was duly founded in 1957 as the professional Corporate Body of medical and dental specialists in Singapore. The Chapter of Psychiatrists has been in existence only since 1986. Being a “late-comer” to the scene means that we can benefit from the experience gained by our counterparts from the other disciplines, and leapfrog towards maturity. We identify the following key challenges ahead of us:

1. Membership growth and formation of College

At the present moment, 6 Colleges have been formed and the remaining 4 chapters are Dental Surgeons, Pathologists, Psychiatrists and Public Health and Occupational Physicians. At the recent 20th Annual General Meeting of the Chapter of Psychiatrists, a lively discussion ensued on the pros and cons of forming a College.¹¹ There were several advantages highlighted. The College would be an independent entity and would enjoy autonomy with full administration and financial control after the first 3 years. Arguably, the College would be in a better position to represent the professional interests of psychiatrists. However, the main challenge of becoming a College will be its ability to generate income and to be self-sufficient.

Although the specialist register currently has 108 psychiatrists, only 82 are members of the Chapter. In the past, the Academy of Medicine was responsible for the accreditation of specialists. This function is now taken over by the Specialist Accreditation Board. This change has been cited as one reason why the membership has not grown and why some fellows had resigned in the past. The ultimate challenge is in making the Chapter (eventually College) relevant to psychiatrists so that they would want to become members.

2. Communication with members

As the Chapter/College expands its role, communication with its members will become more and more important. Various ways to do so include a regular bulletin to update its members or perhaps a newsletter.

3. Section /interest groups

We are in the business of human behaviour. Psychiatrists, more than any other specialists, have an obligation to speak up on issues of public interest, an example of which is the recent occurrence of Subutex (buprenorphine) addiction/dependence for which the Ministry of Health sought the Chapter’s recommendations. There will be other issues which will require the Chapter or College to take a stand.

In future, it is envisaged that we would be able to gather together experts amongst us in their subspecialty, e.g. sections or interest groups to give their opinions on issues that impact our members as well as the public. It is imperative for the Chapter to develop clinical practice guidelines for psychiatrists, which would be useful in maintaining standards of practice as well as for medico-legal implications.

4. Working together with other psychiatric associations

In the beginning, when the Chapter was formed, there was a call for cooperation with other psychiatric associations to improve the status of psychiatry in Singapore. We need to begin to work collaboratively with them on issues of common interest to further the cause of psychiatry in Singapore.

5. Training, education and research

The long-term goal of the Chapter/College in these areas would be to advance the science and practice of psychiatry and to promote study and research work that will help in the understanding and treatment of mental disorders. In this manner, the Chapter/College will be able to enhance its reputation in the region and perhaps beyond. Substantial stigma still exists against psychiatric patients and psychiatrists in Singapore and in many parts of the world.² It is envisaged that with increased awareness of the treatability

of psychiatric conditions and as more people learn to relate to friends and relatives who have mental disorders, stigma against psychiatric patients and psychiatrists will diminish.

6 The trend towards subspecialisation

The psychiatric subspecialties have come of age during a time that places higher values on generalist skills.¹² Professionals in the field need to step back and consider the place of the content of the subspecialties in relation to the general and child psychiatry curriculum. In our situation, the Chapter of Psychiatrists (and eventually the College) should work closely with the relevant bodies to define clear and discreet training requirements and qualifying criteria of exit certification for child psychiatry and to admit and register it as a subspecialty of Psychiatry. It is envisaged that a template for the discipline of Child Psychiatry ought to be defined and used to navigate the boundaries for other subspecialties like Psychogeriatrics, Psychotherapy and Forensic Psychiatry.^{9,10}

CONCLUSION

Though the Academy of Medicine was duly founded in 1957, the Chapter of Psychiatrists has been in existence only since 1986. As in other Asian countries, mental health was not a traditional priority in Singapore, and resources had tended to be limited. Despite this, psychiatry in the twentieth century has been operating in the context of a rapid proliferation of the sites and targets of intervention. In this article, the challenges ahead have been identified, and it is hoped that as psychiatry in Singapore evolves, the Chapter will continue to grow and mature, and eventually a College of Psychiatrists will be formed.

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