

Letter to the Editor

The New Mental Health Care Bill

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Respected Sir,

The Mental Healthcare Bill 2016 is applicable to all psychiatric patients. One related issue is that it is not applicable to neurological patients. Hence the question of differentiating between psychiatric patients and neurological patients assumes significance. This is because labelling a patient as a psychiatric patient or a neurological patient and the subsequent treatment by a Psychiatrist or a Neurologist can lead to disputes.

It is not easy to differentiate between psychiatric disorders and neurological disorders since both are disorders of the brain. We cannot differentiate between them on the basis of neuroanatomy or neurophysiology. For example, can we say that disorders of some parts of the brain (such as amygdala) are psychiatric disorders and disorders of the other parts of the brain are neurological disorders? Or can we say that disorders of some physiological systems (such as Dopaminergic system) are psychiatric disorders and disorders of other systems are neurological disorders? The answer is negative.

The definition of 'mental illness' given in the MHC Bill 2016, can be applied to some neurological disorders, too: "Mental illness" means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize reality or ability to meet ordinary demands of life ...'. So, it is likely that some neurological patients, too, may be considered to be suffering from mental illness.

To eliminate ambiguity, there is a need to develop precise inclusion and exclusion criteria to distinguish between psychiatric disorders and neurological disorders. The situation is further complicated by the differences between DSM 5 [1] and the ICD-10 [2]. Some disorders (such as insomnia and hypersomnia) are considered mental disorders by the DSM 5 and hence, included in it. Whereas, the ICD-10 does not include them in mental disorders chapter, but in the chapter on neurological disorders (diseases of the nervous system). Is the allocation of disorders to Psychiatry and Neurology random and arbitrary? Or are there any specific features or criteria that differentiate psychiatric and neurological disorders as distinct groups?

A practical, day-to-day problem is: what specific criteria guide the decision to admit a particular patient in Psychiatry ward or Neurology ward? This question becomes important in view of the MHC Bill 2016.

The traditional view has been that psychiatric disorders are disorders of the mind, while neurological disorders are disorders of the brain. Can this be a criterion for differentiating between the two? If this is the only differentiating criteria, then there is an urgent need to develop a precise definition of the mind. As of today, there is no universally accepted definition of the mind [3].

May I request the experts to kindly guide about the specific inclusion and exclusion criteria to differentiate between psychiatric and neurological disorders?

REFERENCES

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