The rebirth of forensic psychiatry

O renascimento da psiquiatria forense

Among all the medical specialties, psychiatry is the one that most often deals with legal and ethical problems.¹ The reason for that is simple: no other specialty is so intensely dedicated to issues related to human behavior. In fact, such is the richness of the interaction between psychiatry and the law, for example, that the best name for the psychiatric subspecialty that dedicates itself to the study of the relationships between the two fields would be legal psychiatry. However, in this supplement, the expression “forensic psychiatry” was maintained out of respect for its long tradition among us.

Activities in the field of forensic psychiatry range from the forensic practice itself, which is of a strictly investigatory nature, to practice inside penitentiaries, in which physician-patient relationships are established between forensic psychiatrists and individuals deprived of their liberty. The field also encompasses the topic of patient rights and of new legislation regarding mental health, as well as questions related to malpractice, together with malpractice evaluation and prevention.

From a historical point of view, the phenomenon observed by Piccinini² – the “rebirth” of Forensic Psychiatry – can also be seen in other western nations.³ In Brazil, the subspecialty appeared in the middle of the 19th century and experienced a period of considerable growth in the first half of the 20th century. Beginning in the 1960s, it fell into decline. Among the factors responsible for that decline are the following: the limited scope of the field, which at the time was only related to investigatory issues and to clinical practice in prison environments; limited appreciation of ethical and bioethical aspects in medical and psychiatric practice; the stigma associated with the practice of the specialty, since the country was going through a period of political authoritarianism, and psychiatrists had a better chance of earning a living from clinical psychiatry.

Changes on the international and national scenes produced profound changes in the practice of psychiatry that led to a greater appreciation of forensic practice and to its rapid expansion over the last two decades, since the factors that had inhibited its development were rapidly overcome.⁴ Therefore, while Brazil was witnessing the end of its military regime and initiating the process of political openness, there was an intense international movement to promote human rights, including the civil rights of the mentally ill. Simultaneously, bioethics occupied a definitive space in health care by introducing new parameters for the physician-patient relationship and by awakening the moral conscience of medical professionals.

Within that context, working in prison environments no longer represented a stigma and began to be especially appreciated in society for being an activity involving a population that is particularly vulnerable from a bioethical perspective.⁵ In addition, the call to respect the rights of the mentally ill made it necessary
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for specialists capable of working within the interface of psychiatry and the law to play a role in the clinical scenario. Chief among such specialists are forensic psychiatrists.

Another factor that merits special attention is the proletarianization of the medical practice, currently victimized by marketeering strategies of the most diverse shades, as can be seen in relation to private health care insurance plans, whose most striking characteristic is the large scale exploitation of medical professionals and their work. The practices of such health care plans (laughable reimbursement rates, etc.) have harmful effects on medical practice (excessive work loads leading to a consequent lack of attention given to patients) and have the end result of favoring the occurrence of medical errors. Within this context, the practice of forensic medicine, which is on the margins of the activities of private health care plans, became a relatively safe refuge. In addition, the examination fees are fixed in accordance with the laws of a market in visible expansion.

It is, therefore, with immense satisfaction that we present this Forensic Psychiatry Supplement to the readers of the Revista Brasileira de Psiquiatria (Brazilian Journal of Psychiatry). The idea arose several years ago and was aimed at catering to the requests of colleagues who reside in regions that are farther away from the large national centers. With few opportunities to consistently participate in major scientific events and suffering due to the limited number of publications in the forensic field, they were calling out for help. Psychiatry residents also complained of a lack of forensic psychiatry instruction in their education. The vast majority of medical residency programs in psychiatry do not devote a sufficient amount of time to the area of forensics. Some include superficial theoretical notions in their course content without the hands-on practice that is needed for the establishment of a solid foundation in the field.

The topics were selected based on their importance in daily practice, not only from a technical point of view, but also from an ethical perspective. Authors who have broad experience in the subjects they address were invited to participate, and we thank them for their generous collaboration.

Finally, we wish to mark an absence that causes us profound feelings of grief. It is that of our dear old friend, Claudio Duque, who left us during the production of this project. He was the co-author of the article on personality disorders/psychopathy and was replaced by one of the organizers, Elias Abdalla-Filho. Without a doubt, this supplement would shine more brightly if it could count on his intelligence, talent and experience in forensic work. The passing of Claudio Duque, victimized by his own generous heart, has created an inestimable void in Brazilian forensic psychiatry.

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References