**The Medical Council on Alcohol’s 50th anniversary Witness Seminar**

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The Medical Council on Alcoholism, as it was then called, had its first meeting on 20 April 1967 at the headquarters of the British Medical Association (the BMA). The Council’s formation was an outgrowth of a period of increasing concern about alcohol consumption in the UK and a desire to raise both public and medical concern about the issue, in particular among general practitioners.

Fifty years later, on 14 November 2017, BMA House was the scene for another meeting about what is now, since 2002, called the Medical Council on Alcohol (MCA). This was a ‘witness seminar’, an exercise in group oral history. The initiative of the MCA’s committee, it brought together people who had played roles in the Council over time and others with an interest in its history. The witness seminar is well used in the history of health and medicine and in policy history as a means to spark reminiscence and reflection which might not flow so freely in an individual interview. This seminar was chaired by Professor Virginia Berridge, who had organised and chaired previous such events.

Dr Bruce Ritson, currently MCA vice president and its chair from 1993-2003, but involved in the MCA since the 1970s, described how the initial focus which had been on the suffering individual drinkers had shifted in the 1990s towards primary prevention of consumption. He asked whether this created a dilemma. Perhaps the people who were most harmed ~~from~~  by alcohol and who were the original stimulus for the MCA had been neglected. This issue was taken up later in the seminar.

Dr Brian Hore, who had also been involved with the MCA for many years confirmed the shift in focus. He drew attention to the interest from government at the beginning, in particular from the Department of Health, whose staff had regularly attended MCA meetings and been active in its committee. The MCA was one of several bodies in the field in the 1970s, including the National

Council on Alcohol, the Alcohol Education Centre and the Federation of Residential Establishments.

The MCA had focussed on treatment but also on the education of doctors and medical students. The MCA had decided to remain a stand-alone organisation.~~; it did join the other bodies when they~~ ~~merged.~~ It thus survived when government ceased its funding ~~the merger and~~  of the organisations and when new agencies such as Alcohol Concern were formed. Its survival was initially with support from a Trust which had links with the alcohol industry. Funding later had depended more on the profits and subsequently through the part sale of its journal *Alcohol and Alcoholism* ~~(part sold~~ in 2012 to its publisher Oxford University Press~~)~~.

Dr Allan Thomson, one of that journal’s founding editors, was the third speaker. He mentioned the change from the original ‘blue journal’ *British Journal on Alcohol and Alcoholism* ~~that~~ which started as a photocopied sheet distributed to GPs and other practitioners. The transition to an international multidisciplinary research journal came in the 1980s, before the internet, email and mobile phones.

Colin Drummond, current chair of the MCA, spoke of the remarkable increase in addiction psychiatry in the UK, from maybe 15-20 such specialists when he was training in the 1970s to 239 by 2006.His concern was for its decline since then because addiction treatment had moved into local government - at a time when local authority budgets were being cut.

The discussion which opened out from these four introductions ranged widely and added fresh material on the history of the Council. Participants stressed the diversity of health occupations involved in the early years, including general practitioners but other health professionals as well. The general practitioner representation had declined and the current Director, Dr Dominique Florin, is unusual in being both a GP and the first female Medical Director. The Council had also had a strong emphasis on the involvement of medical professionals with alcohol problems and both Dr Alasdair Young, an MCA executive member, and Diane Goslar, a patient, spoke of their involvement in this way. The military connection was important- in particular the Royal Navy. The directors of the MCA prior to Dr Florin, had all come from service backgrounds and two spoke at the seminar. The Navy with its rum ration had been a fertile location for the development of alcohol problems.

Participants spoke of the educational role of the MCA, its regional advisers who promoted talks and lectures on alcohol into the medical curriculum, and the production of the Alcohol and Health

Handbook written by Dr Marsha Morgan among others and made available to students. Dr David Johnson, a consultant psychiatrist in addictions in Argyle and Bute, remembered being a medical student in Aberdeen in the late 1980s where he attended an introductory lecture on alcohol and received a free copy of the handbook. In his clinical work he had drawn on knowledge from that handbook.

The comments on the current state of play in alcohol treatment and addiction psychiatry led to analysis of the implications for the MCA and a possible future role. Professor Betsy Thom referred to the change to which Bruce Ritson had drawn attention, away from treatment and towards prevention. Professionals in the field now could deal with ‘early intervention’ but did not know how to deal with dependence and severe drinking and where to place the people who had that level of problem. Professor Susanne MacGregor raised in addition the relationship of the MCA to the new large non-statutory service providers. The transfer of responsibility to local government had meant that it was agencies such as Turning Point and Addaction who employed health professionals, including psychiatrists. She asked ~~‘C~~whether~~ould~~ the MCA could play a role in liaising with the big service providers to spur them to take treatment and care seriously~~?’~~. Dr James Nicholls from Alcohol Research UK also drew attention to the current flux as alcohol organisations such as his own and Alcohol Concern, with which it had merged, were changing. There were parallels with the past and an opportunity to take stock and move forward. This Witness Seminar proved to be a valuable discussion of the potential future role of the MCA as well as a window on its past.