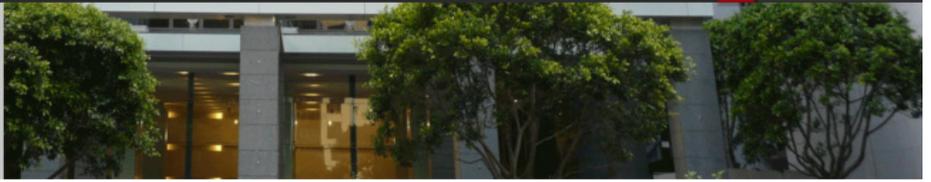




*Mental Health
Review Board
of Victoria*



Welcome to the Psychosurgery Review Board of Victoria

The Psychosurgery Review Board (the Board) was established by s56 of the Mental Health Act 1986 (the Act).

The role of the Board is to determine applications by psychiatrists for a neurosurgeon to perform psychosurgery on a person. To protect confidentiality, Board hearings are closed to the public.

About Psychosurgery

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Guidelines for Psychosurgery

[Read more...](#)

Board's Annual Report

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David Crofts

From: David Crofts <david.crofts@gmail.com>
Sent: Thursday, 17 May 2012 10:35 PM
To: prb@prb.vic.gov.au
Subject: Re: Application for Psychosurgery

Matthew Carroll
Chairperson

Psychosurgery Review Board
Level 30/570 Bourke Street
MELBOURNE VIC 3000

Dear Sir,

I recently browsed the M.H.R.B. website and upon review felt compelled to comment on the below reference from the psychosurgery section.

"The role of the Board is to determine applications by psychiatrists for a neurosurgeon to perform psychosurgery on a person. To protect confidentiality, Board hearings are closed to the public."

When the disagreement between the patient and the medical professional reaches such an extreme level as to have that medical professional actively seek permission from the M.H.R.B. to have "the ultimate act of medical deleting" performed upon the patient, ((for the personal gratification of the, so called, professional needs of the individual in question)), the least you can do is to protect the patient from becoming just another victim of the medical profession and allow any interested member of the general public un-impeded access to these hearings so they can actually provide some protection for this sad and sorry patients, so called, confidentiality.

My views re-guarding the Mental Health Act are contained in my URL below :-

<http://www.davidcrofts.com/mha/index.html>

Please bear my thoughts in your mind during any future hearings.

Yours in the hope of just treatment for all patients.

David Crofts

23 Brisbane Street
Berwick Victoria 3806
Australia

<http://www.davidcrofts.com/>

David A.S.Crofts

23 Brisbane Street
BERWICK Victoria 3806

Friday 18th May, 2012

Matthew Carroll
Chairperson

Psychosurgery Review Board
Level 30, 570 Bourke Street
MELBOURNE Victoria 3000

Dear Sir,

I find the “deliberate” confusion of your, so called, “review” board with the “mental health” review board, offensive, and re-enforcing of my belief that neither is solely concerned with the “just” treatment of the patient. The boards should not be confused as there exists no “connection” between the “reviews” under-taken by your board, and what is generally understood by the “mental health” of the “object” of the neurosurgery in question.

When one considers “mental health”, one should “deliberately” exclude any consideration of the mechanics of one's brain, and if a psychiatrist, should by some chance, identify some way in which a patient can be made to feel “better” through the application of such a blunt a tool as neurosurgery, he is required, and indeed obligated, to refer the patient to a neurologist who specializes in the mechanics of one's brain, and then leave it up to him to decide if a further referral to a neurosurgeon is indicated.

I believe that any refusal by a “psychiatrist” to make this indicated referral, proves beyond any shadow of doubt, he is simply clinging to what little control he still has over his patient's mind, so that he can prevent the “just” releasing, on him, of this patient's distress, which may have resulted from any previous psychiatric treatment that this particular psychiatric patient may have been made to suffer, and squeeze from this sad and sorry soul, what little release he is still able to give, in the name of the psychiatrists “undeniable” need to feel personal gratification from the execution of his, so called, “medical” service.

As you insist upon calling yourself a “review” board, I believe that your primary focus should be on the “well-being” of the patient, and you should not feel under any pressure to “satisfy” the requests of any psychiatrist. As a consequence of this, when you conduct your “review”, you should consider it compulsory to engage the patient in a personal exchange of information, and understand that the requesting psychiatrist may have applied “spin” to the information that he has provided to you. It will then be easier for you to perform your designated function, through a simple computation, involving the weight and relationship of all factors necessary for the making of your determination, one way or the other, as to whether the proposed course of action falls within the limits of the guidelines you have laid down, specifying what is to be considered as being in the service of the “well-being” of the patient.

Yours sincerely,

David Crofts.

P.S. If you follow the precedent set by your “cousins” in the M.H.R.B., and feel satisfied in dealing with certain failures to consent, by the application of force, then heaven help you.