

Dr George Stein
Consultant Psychiatrist

GMC: 1278286

Dr Stein qualified in medicine from University College Hospital and worked for a few years in general medicine obtaining his MRCP, before going on to train as a psychiatrist at the Maudsley Hospital obtaining the MRCPsych in 1976. His principal consultant appointment was in Bromley starting in 1982 where he also ran the mother and baby unit for 15 years. He worked for 25 years as an NHS consultant in Bromley and then did a short spell in the Gordon Hospital in London, and worked for 2 years in Guildford. He has diagnosed and treated the full spectrum of psychiatric disorders whilst working in the NHS. He has always worked in private practice where more neurotic and stress disorders such as post traumatic stress disorder feature more prominently.

He has a long association with the British Journal of Psychiatry and worked as an assistant editor for a number of years and co-edited both editions (1998 and 2007) of College Seminars in Adult General Psychiatry the National textbook published by the Royal College of Psychiatrists. He has published research on post natal illnesses, lithium, personality disorders and a variety of other topics.

AREAS OF EXPERTISE

- OCD
- Post Traumatic Stress Disorder
- Depression
- Schizophrenia Affective Disorders
- Personality Disorders
- Mental Capacity Assessments
- Post Natal Depression
- Substance Abuse
- Somatisation
- Alcoholism
- Work Stress
- Panic
- Bipolar Disorder

PROFESSIONAL EMPLOYMENT

25 years as an NHS consultant in Bromley.

PROFESSIONAL EDUCATION AND QUALIFICATIONS

M.B.B.S. 1968
M.R.C.P. 1971
D.C.H. 1972
M.R.C.Psych. 1976.

MEDICO-LEGAL WORK

I am able to do medico legal work covering the whole area of general psychiatry and have done a fairly large number of medico-legal reports in the area of general psychiatry and all its aspects. These include personal injury and post traumatic stress disorder, clinical negligence (appertaining to the psychiatric aspects of medical negligence but not psychiatric negligence as such); negligence cases have often been in the area of obstetrics because I had an interest in post natal depression; mental capacity assessments for adults be an issue over a wide range of problems, work stress, somatisation, alcoholism and its biological effects, other types of substance abuse, and social criminal/psychiatric/forensic problems (but not homicide), psychiatric aspects of medical negligence, employment issues and disability problems, cases for the employment Tribunal, somatisation disorder, factitious disorder, hypochondriasis depression, psychotropic drugs and their side effects and the whole area of adult general psychiatry. I have written more than 1,000 medico-legal reports around 300 appertain to personal injury of one sort or another, sometimes as an SJE but otherwise split 60:40 into claimant and respondent. I have also done and over 200 reports appertaining to childcare proceedings.

SUBSPECIALISM IN PERSONAL INJURY CASES

I specialise in his personal injury cases, I do about 30 cases of this type per year. Some are very simple and straightforward such as the road traffic accidents where the problem is one of the whiplash associated with some depression. The more complicated ones usually relate to medical negligence cases of various types and their psychiatric sequelae Many people following some medical condition or post-operative complication will develop depression particularly if the medical episode has a negligence component to it. In these cases I take a very careful medical history as well as a comprehensive psychiatric history; Examination of the psychiatric notes in great detail is essential to discern what is new and related to the medical catastrophe/ medical problem and what is old and related to the personality and previous psychiatric history. Many patients tend to place an overemphasis on the most recent event which is the medical episode; however detailed scrutiny will often reveal a variety of other factors which are responsible for the current distress and psychiatric disorder.

These reports are fairly long and detailed. I also aim to set out the summary in such a way that barristers are able to estimate the losses due to work loss due to pain; and loss of amenity; impairment in married life and so forth so that the clients potential damages can be more readily estimated. Most of these reports are commissioned on the part of the claimant (60%) but some are on the part of the defendant. This makes little difference to me as I write the reports as if I am a single joint expert. By and large the evidence I have provided in legal reports over the years has always been accepted by both sides, which is helpful as I often act as a single joint witness for both sides although Barristers have obviously questioned me closely in court. The quality of the reports themselves, or the diagnoses I have reached have never been in question, and I have often been complimented for the comprehensiveness of the reports.

I have also completed a large number of reports on Post traumatic stress disorder, forensic issues, depression and somatisation disorder as well. I have co-edited the National textbook (College Seminars in Adult General Psychiatry published by the Royal college of Psychiatrists). I am knowledgeable about all the key studies across the whole

spectrum of adult general psychiatry. In this textbook I wrote the chapter on "Peri-natal psychiatry" and this includes a moderately lengthy section on child abuse and child protection issues which I wrote. I have written a book entitled "The Hidden Psychiatry of the Old Testament" in 2019. I have also been called on a few occasions by the Crown Prosecution Service when the Judges have been unhappy at the psychiatric reports that they have been given by others and have to offer a second opinion and I have been asked to provide a second and independent medico-legal opinion.