

## From the editor



## Taking psychiatry's changing image personally

**N**otice anything different about my picture this month? Yes, my beard is gone after 28 years. I grew it between medical school and psychiatry residency to look older. Recently, I reached what author Malcolm Gladwell coined a “tipping point” and got rid of it to look younger.

I also grew my beard (a goatee, actually) to project my vision of a psychiatrist—a nonconformist, an intellectual. Sigmund Freud had a beard, of course, and I suspect that because of him the percentage of hirsute faces is much higher in psychiatry than in other medical specialties.

I went to college in the ‘60s and early ‘70s, so the beard helped me resist feeling that I had “gone establishment” when I became a doctor. But now I am more secure in my psychiatric identity and have come to terms with being part of established medicine. I am president of my university’s multispecialty practice group, and without the beard I look more like my clean-shaven colleagues from other departments. Maybe shaving will help secure my identity as a “real” doctor, despite decades of not doing physical exams.

Are beards becoming less common among psychiatrists? My impression is yes, but my only evidence comes from counting beards in the University of Cincinnati psychiatry department’s annual photos. In 1990, 27% of men on the faculty sported facial hair, and the percentage fell to 8.8% by 2001.

As psychiatry becomes more mainstream, maybe our appearances are becoming more mainstream, too. Or maybe I am indulging in that psychiatric temptation to over-generalize from a single case report.

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