

Anatomy Of An Epidemic Magic Bullets Psychiatric Drugs And The Astonishing Rise Of Mental Illness In America

With the FDA's warning that antidepressants may cause agitation, anxiety, hostility, and even violent or suicidal tendencies, these medications are at the forefront of national legal news. Harvard physician Joseph Glenmullen has led the charge to warn the public that antidepressants are overprescribed, underregulated, and, especially, misunderstood in their side and withdrawal effects. Now he offers a solution! More than twenty million Americans -- including over one million teens and children -- take one of today's popular antidepressants, such as Paxil, Zoloft, or Effexor. Dr. Glenmullen recognizes the many benefits of antidepressants and prescribes them to his patients, but he is also committed to warning the public of the dangers associated with overprescription. Dr. Glenmullen's last book, *Prozac Backlash*, sounded the alarm about possible dangers. *The Antidepressant Solution* provides the remedy. It is the first book to call attention to the drugs' catch-22: Although many people are ready to go off these drugs, they continue to take them because either the patient or the doctor mistakes antidepressant withdrawal for depressive relapse. *The Antidepressant Solution* offers an easy, step-by-step guide for patients and their doctors. Written by the premier authority in the field, *The Antidepressant Solution* is an invaluable book for all those concerned with going through the process -- from friends and family members to doctors and patients themselves.

Prozac, Xanax, Halcion, Haldol, Lithium. These psychiatric drugs--and dozens of other short-term "solutions"--are being prescribed by doctors across the country as a quick antidote to depression, panic disorder, obsessive-compulsive disorder, and other psychiatric problems. But at what cost? In this searing, myth-shattering exposé, psychiatrist Peter R. Breggin, M.D., breaks through the hype and false promises surrounding the "New Psychiatry" and shows how dangerous, even potentially brain-damaging, many of its drugs and treatments are. He asserts that: psychiatric drugs are spreading an epidemic of long-term brain damage; mental "illnesses" like schizophrenia, depression, and anxiety disorder have never been proven to be genetic or even physical in origin, but are under the jurisdiction of medical doctors; millions of schoolchildren, housewives, elderly people, and others are labeled with medical diagnoses and treated with authoritarian interventions, rather than being patiently listened to, understood, and helped. *Toxic Psychiatry* sounds a passionate, much-needed wake-up call for everyone who plays a part, active or passive, in America's ever-increasing dependence on harmful psychiatric drugs.

It is well known that American culture is a dominant force at home and abroad; our exportation of everything from movies to junk food is a well-documented phenomenon. But is it possible America's most troubling impact on the globalizing world has yet to be accounted for? In *Crazy Like Us*, Ethan Watters reveals that the most devastating consequence of the spread of American culture has not been our golden arches or our bomb craters but our bulldozing of the human psyche itself: We are in the process of homogenizing the way the world goes mad. America has been the world leader in generating new mental health treatments and

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modern theories of the human psyche. We export our psychopharmaceuticals packaged with the certainty that our biomedical knowledge will relieve the suffering and stigma of mental illness. We categorize disorders, thereby defining mental illness and health, and then parade these seemingly scientific certainties in front of the world. The blowback from these efforts is just now coming to light: It turns out that we have not only been changing the way the world talks about and treats mental illness -- we have been changing the mental illnesses themselves. For millennia, local beliefs in different cultures have shaped the experience of mental illness into endless varieties. *Crazy Like Us* documents how American interventions have discounted and worked to change those indigenous beliefs, often at a dizzying rate. Over the last decades, mental illnesses popularized in America have been spreading across the globe with the speed of contagious diseases. Watters travels from China to Tanzania to bring home the unsettling conclusion that the virus is us: As we introduce Americanized ways of treating mental illnesses, we are in fact spreading the diseases. In post-tsunami Sri Lanka, Watters reports on the Western trauma counselors who, in their rush to help, inadvertently trampled local expressions of grief, suffering, and healing. In Hong Kong, he retraces the last steps of the teenager whose death sparked an epidemic of the American version of anorexia nervosa. Watters reveals the truth about a multi-million-dollar campaign by one of the world's biggest drug companies to change the Japanese experience of depression -- literally marketing the disease along with the drug. But this book is not just about the damage we've caused in faraway places. Looking at our impact on the psyches of people in other cultures is a gut check, a way of forcing ourselves to take a fresh look at our own beliefs about mental health and healing. When we examine our assumptions from a farther shore, we begin to understand how our own culture constantly shapes and sometimes creates the mental illnesses of our time. By setting aside our role as the world's therapist, we may come to accept that we have as much to learn from other cultures' beliefs about the mind as we have to teach. Ground-breaking work on the dangers of anti-depressants and why the FDA continues to approve them. Lots of anecdotes, well-written, author will be on tour in the U.S. Good media lining up, very controversial author.

In *The Invisible Plague*, E.Fuller Torrey and Judy Miller examine the records on insanity in England, Ireland, Canada, and the UNited States over a 250 year period, concluding, through both qualitative and quantatative evidence, that insanity is, and continues to be, an unrecognized modern-day plague.

Updated with bonus material, including a new foreword and afterword with new research, this New York Times bestseller is essential reading for a time when mental health is constantly in the news. In this astonishing and startling book, award-winning science and history writer Robert Whitaker investigates a medical mystery: Why has the number of disabled mentally ill in the United States tripled over the past two decades? Interwoven with Whitaker's groundbreaking analysis of the merits of psychiatric medications are the personal stories of children and adults swept up in this epidemic. As *Anatomy of an Epidemic* reveals, other societies have begun to alter their use of psychiatric medications and are now reporting much improved outcomes . . . so why can't such change happen here in the United States? Why have the results from these long-term studies—all of which point to the same startling conclusion—been kept from the public? Our nation has been hit by an epidemic of disabling mental illness, and yet,

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as Anatomy of an Epidemic reveals, the medical blueprints for curbing that epidemic have already been drawn up. Praise for Anatomy of an Epidemic “The timing of Robert Whitaker’s Anatomy of an Epidemic, a comprehensive and highly readable history of psychiatry in the United States, couldn’t be better.”—Salon “Anatomy of an Epidemic offers some answers, charting controversial ground with mystery-novel pacing.”—TIME “Lucid, pointed and important, Anatomy of an Epidemic should be required reading for anyone considering extended use of psychiatric medicine. Whitaker is at the height of his powers.” —Greg Critser, author of Generation Rx

Mind Fixers tells the history of psychiatry’s quest to understand the biological basis of mental illness and asks where we need to go from here. In Mind Fixers, Anne Harrington, author of The Cure Within, explores psychiatry’s repeatedly frustrated struggle to understand mental disorder in biomedical terms. She shows how the stalling of early twentieth century efforts in this direction allowed Freudians and social scientists to insist, with some justification, that they had better ways of analyzing and fixing minds. But when the Freudians overreached, they drove psychiatry into a state of crisis that a new “biological revolution” was meant to alleviate. Harrington shows how little that biological revolution had to do with breakthroughs in science, and why the field has fallen into a state of crisis in our own time. Mind Fixers makes clear that psychiatry’s waxing and waning biological enthusiasms have been shaped not just by developments in the clinic and lab, but also by a surprising range of social factors, including immigration, warfare, grassroots activism, and assumptions about race and gender. Government programs designed to empty the state mental hospitals, acrid rivalries between different factions in the field, industry profit mongering, consumerism, and an uncritical media have all contributed to the story as well. In focusing particularly on the search for the biological roots of schizophrenia, depression, and bipolar disorder, Harrington underscores the high human stakes for the millions of people who have sought medical answers for their mental suffering. This is not just a story about doctors and scientists, but about countless ordinary people and their loved ones. A clear-eyed, evenhanded, and yet passionate tour de force, Mind Fixers recounts the past and present struggle to make mental illness a biological problem in order to lay the groundwork for creating a better future, both for those who suffer and for those whose job it is to care for them.

Am I depressed or just unhappy? In the last two decades, antidepressants have become staples of our medicine cabinets—doctors now write 120 million prescriptions annually, at a cost of more than 10 billion dollars. At the same time, depression rates have skyrocketed; twenty percent of Americans are now expected to suffer from it during their lives. Doctors, and drug companies, claim that this convergence is a public health triumph: the recognition and treatment of an under-diagnosed illness. Gary Greenberg, a practicing therapist and longtime depressive, raises a more disturbing possibility: that the disease has been manufactured to suit (and sell) the cure. Greenberg draws on sources ranging from the Bible to current medical journals to show how the idea that unhappiness is an illness has been packaged and sold by brilliant scientists and shrewd marketing experts—and why it has been so successful. Part memoir, part intellectual history, part exposé—including a vivid chronicle of his participation in a clinical antidepressant trial—Manufacturing Depression is an incisive look at an epidemic that has changed the way we have come to think

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of ourselves.

Based on interviews with scientists and corporate executives in the nation's most powerful pharmaceutical companies, this probing look at the state of the nation's health in the midst of a pharmaceutical revolution concludes that America's love affair with drugs is radically transforming the nation, beginning with the youngest generation. Reprint.

A "thought-provoking" look at the psychiatric profession, the overprescribing of pharmaceuticals, and the cost to patients' health (Booklist). In an effort to enlighten a new generation about its growing reliance on psychiatry, this illuminating volume investigates why psychiatry has become the fastest-growing medical field in history; why psychiatric drugs are now more widely prescribed than ever before; and why psychiatry, without solid scientific justification, keeps expanding the number of mental disorders it believes to exist. This revealing volume shows that these issues can be explained by one startling fact: in recent decades psychiatry has become so motivated by power that it has put the pursuit of pharmaceutical riches above its patients' wellbeing. Readers will be shocked and dismayed to discover that psychiatry, in the name of helping others, has actually been helping itself. In a style reminiscent of Ben Goldacre's Bad Science and investigative in tone, James Davies reveals psychiatry's hidden failings and how the field of study must change if it is to ever win back its patients' trust.

This book exposes the skyrocketing rate of antipsychotic drug prescriptions for children, identifies grave dangers when children's mental health care is driven by market forces, describes effective therapeutic care for children typically prescribed antipsychotics, and explains how to navigate a drug-fueled mental health system. • A chapter on effective parenting coauthored by a leading parenting expert, Laura Berk • Contributions by noted medical journalist Robert Whitaker, author of Anatomy of an Epidemic • Information on legal issues by Harvard-educated lawyer Jim Gottstein • Insights from former pharmaceutical industry insider, Gwen Olsen • An examination of community approaches to children's mental health care by internationally known psychologist Stuart Shanker

A challenging reappraisal of the history of antipsychotics, revealing how they were transformed from neurological poisons into magical cures, their benefits exaggerated and their toxic effects minimized or ignored.

On December 17, 2006, The New York Times began a series of front-page stories about documents obtained from Alaska lawyer Jim Gottstein, showing Eli Lilly had concealed that its top-selling drug caused diabetes and other life-shortening metabolic problems. The "Zyprexa Papers," as they came to be known, also showed Eli Lilly was illegally promoting the use of Zyprexa on children and the elderly, with particularly lethal effects. Although Mr. Gottstein believes he obtained the Zyprexa Papers legally, the United States District Court for the Eastern District of New York in Brooklyn decided he had conspired to steal the documents, and Eli Lilly threatened Mr. Gottstein with criminal contempt charges. In The Zyprexa Papers, Mr. Gottstein gives a riveting first-hand account of what really happened, including new details about how a small group of psychiatric survivors spread the Zyprexa Papers on the Internet untraceably. All of this within a gripping, plain-language explanation of complex legal maneuvering and his battles on behalf of Bill Bigley, the psychiatric patient whose ordeal made possible the exposure of the Zyprexa Papers.

Revealing the way accepted psychological guidelines are established, typically by a conservative group of white males, a cautionary manual argues that standard life problems are often misdiagnosed as mental disorders.

New York Times best-selling author presents a radical alternative to psychotropic meds: discerning the meaning in your symptoms and your struggle as a way to reclaim your health and your self. For years, we've been telling ourselves that our difficult feelings—sadness, rage,

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shame, intensity, worry—are somehow "not okay." And, all too often, we've relied on the promise of pharmaceuticals to tamp them down. The fact is, though, that these feelings are a vital part of our experience. They are real. And those of us who feel them most strongly are the canaries in the coalmine—sensitive to things that are seriously wrong in the world today. In a book that's both provocative and promising, holistic psychiatrist Kelly Brogan, M.D., author of *A Mind of Your Own*, shows us that we don't have to medicate our mental, emotional, and physical pain away—that the best way out is through. She explodes the mistaken belief that our symptoms—from mood changes to irritability to fogginess and fatigue—are evidence that we are sick or broken. Then she charts a new path to get real, get well, and get free. The journey includes:

- Coming to a new appreciation of the meaning behind symptoms, and whether you are a canary in the coal mine
- Learning the 2 major risks of medication that most doctors are not trained to disclose
- Exploring the 5 reversible physical drivers of so-called mental illness
- Starting the process of radical physical healing with inclusive details of Dr. Brogan's history-making 30-day protocol
- Taking an emotional inventory of energy drains and toxic relationships
- Taking a deeper dive into the spiritual awakening and expansion that comes when you reclaim your real self from conventional medicine
- Identifying the most likely places you have given your power away
- Understanding what the science has to say about psychedelics as a tool for awakening
- Navigating health challenges with curiosity and the proper tools

Guidance, support, and many Travel Tips shared from the trenches! Our experiences, Dr. Brogan argues, aren't problems or pathologies; they reflect what we need to accept, acknowledge, and transform in order to truly become who we are. *Own Your Self* is a journey of healing, and also something more: a journey of coming home to ourselves.

Psychiatry Under the Influence investigates the actions and practices of the American Psychiatric Association and academic psychiatry in the United States, and presents it as a case study of institutional corruption.

What if everything we thought we knew about depression—and how to heal from it—was wrong? Many antidepressants—the first line in our standard of care for treating depression—bring with them potential health risks, yet 1 in 6 Americans takes medication to alleviate feeling sad, anxious, stuck, or unable to focus or sleep. More and more, conventional medicine pathologizes how we respond to life's challenges—like feeling trapped in an unfulfilling job, grieving the death of a loved one, or being anxious about a bad relationship—telling us that they're symptoms of disease. Psychiatrist Jodie Skillicorn presents a new path, debunking the myth of the neurochemical imbalance and exploring the roots of depression, such as adverse childhood experiences (ACEs) and poorly managed day-to-day stress. Evidence-based and fully supported by current depression research, Dr. Skillicorn's holistic methods for beating depression—including nutrition, mindfulness, fostering meaningful connections, exercise, sleep, nature, and breathwork—empower readers to become agents of their own wholeness and healing.

A Pulitzer Prize-winning New York Times reporter exposes the roots of the opioid epidemic at the hands of Purdue Pharma and Raymond and Mortimer Sackler in *Pain Killer*, a "timely, compelling, important" (*The Seattle Times*) story of corporate greed and government negligence. "Groundbreaking . . . *Pain Killer* is the shocking account of the origins of today's opioid epidemic, the creators of this plague, and the way to help stop it."—Sam Quinones, author of *Dreamland: The True Tale of America's Opiate Epidemic Between 1999 and 2017*, an estimated 250,000 Americans died from overdoses involving prescription painkillers, a plague ignited by Purdue Pharma's aggressive marketing of OxyContin. Families, working class and wealthy, have been torn

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apart, businesses destroyed, and public officials pushed to the brink. Meanwhile, the drugmaker's owners, Raymond and Mortimer Sackler, whose names adorn museums worldwide, made enormous fortunes from the commercial success of OxyContin. In *Pain Killer*, Barry Meier tells the story of how Purdue turned OxyContin into a billion-dollar blockbuster. Powerful narcotic painkillers, or opioids, were once used as drugs of last resort for pain sufferers. But Purdue launched an unprecedented marketing campaign claiming that the drug's long-acting formulation made it safer to use than traditional painkillers for many types of pain. That illusion was quickly shattered as drug abusers learned that crushing an Oxy could release its narcotic payload all at once. Even in its prescribed form, Oxy proved fiercely addictive. As OxyContin's use and abuse grew, Purdue concealed what it knew from regulators, doctors, and patients. Here are the people who profited from the crisis and those who paid the price, those who plotted in boardrooms and those who tried to sound alarm bells. A country doctor in rural Virginia, Art Van Zee, took on Purdue and warned officials about OxyContin abuse. An ebullient high school cheerleader, Lindsey Myers, was reduced to stealing from her parents to feed her escalating Oxy habit. A hard-charging DEA official, Laura Nagel, tried to hold Purdue executives to account. In this updated edition of *Pain Killer*, Barry Meier breaks new ground in his decades-long investigation into the opioid epidemic. He takes readers inside Purdue to show how long the company withheld information about the abuse of OxyContin and gives a shocking account of the Justice Department's failure to alter the trajectory of the opioid epidemic and protect thousands of lives. Equal parts crime thriller, medical detective story, and business exposé, *Pain Killer* is a hard-hitting look at how a supposed wonder drug became the gateway drug to a national tragedy.

In the early years of the 18th century, a band of French scientists set off on a daring, decade-long expedition to South America in a race to measure the precise shape of the earth. Like Lewis and Clark's exploration of the American West, their incredible mission revealed the mysteries of a little-known continent to a world hungry for discovery. Scaling 16,000-foot mountains in the Peruvian Andes, and braving jaguars, pumas, insects, and vampire bats in the jungle, the scientists barely completed their mission. One was murdered, another perished from fever, and a third—Jean Godin—nearly died of heartbreak. At the expedition's end, Jean and his Peruvian wife, Isabel Gramesón, became stranded at opposite ends of the Amazon, victims of a tangled web of international politics. Isabel's solo journey to reunite with Jean after their calamitous twenty-year separation was so dramatic that it left all of 18th-century Europe spellbound. Her survival—unprecedented in the annals of Amazon exploration—was a testament to human endurance, female resourcefulness, and the power of devotion. Drawing on the original writings of the French mapmakers, as well as his own experience retracing Isabel's journey, acclaimed writer Robert Whitaker weaves a riveting tale rich in adventure, intrigue, and scientific achievement. Never before told, *The Mapmaker's Wife* is an epic love story that unfolds against the backdrop of "the greatest expedition the world has ever known."

Updated with bonus material, including a new foreword and afterword with new research, this New York Times bestseller is essential reading for a time when mental health is constantly in the news. In this astonishing and startling book, award-winning science and history writer Robert Whitaker investigates a medical mystery: Why has the number of disabled mentally ill in the

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United States tripled over the past two decades? Interwoven with Whitaker's groundbreaking analysis of the merits of psychiatric medications are the personal stories of children and adults swept up in this epidemic. As *Anatomy of an Epidemic* reveals, other societies have begun to alter their use of psychiatric medications and are now reporting much improved outcomes . . . so why can't such change happen here in the United States? Why have the results from these long-term studies--all of which point to the same startling conclusion--been kept from the public? Our nation has been hit by an epidemic of disabling mental illness, and yet, as *Anatomy of an Epidemic* reveals, the medical blueprints for curbing that epidemic have already been drawn up. Praise for *Anatomy of an Epidemic* "The timing of Robert Whitaker's *Anatomy of an Epidemic*, a comprehensive and highly readable history of psychiatry in the United States, couldn't be better."--Salon "Anatomy of an Epidemic offers some answers, charting controversial ground with mystery-novel pacing."--TIME "Lucid, pointed and important, *Anatomy of an Epidemic* should be required reading for anyone considering extended use of psychiatric medicine. Whitaker is at the height of his powers." --Greg Critser, author of *Generation Rx*.

Schizophrenics in the United States currently fare worse than patients in the world's poorest countries. In *Mad in America*, medical journalist Robert Whitaker argues that modern treatments for the severely mentally ill are just old medicine in new bottles, and that we as a society are deeply deluded about their efficacy. The widespread use of lobotomies in the 1920s and 1930s gave way in the 1950s to electroshock and a wave of new drugs. In what is perhaps Whitaker's most damning revelation, *Mad in America* examines how drug companies in the 1980s and 1990s skewed their studies to prove that new antipsychotic drugs were more effective than the old, while keeping patients in the dark about dangerous side effects. A haunting, deeply compassionate book—now revised with a new introduction—*Mad in America* raises important questions about our obligations to the mad, the meaning of “insanity,” and what we value most about the human mind.

When Claire Bien first began hearing voices, they were infrequent, benign and seemingly just curious about her life and the world around her. But the more attention Claire paid, the more frequently they began to speak, and the darker their intentions became... Despite escalating paranoia, an initial diagnosis of Schizophreniform Disorder and taking medication with debilitating side effects, Claire learned to face her demons and manage her condition without the need for long-term medication. In this gripping memoir, Claire recounts with eloquence her most troubled times. She explains how she managed to regain control over her mind and her life even while intermittently hearing voices, through self-guided and professional therapy and with the support of family and friends. Challenging a purely medical understanding of hearing voices, Claire advocates for an end to the stigma of those who experience auditory verbal hallucinations, and a change of thinking from the professionals who treat the condition.

This version is now out of print. An edition with e-book is available under ISBN 97880702041365. *Psychiatric Drugs Explained* contains a clear and comprehensive guide to the uses, benefits and impact of psychotropic drugs. It explains how people taking the drugs experience their side effects compared to the benefits they may bring. The fifth edition has been fully revised and updated to include the latest thinking on the rationale for drug treatments to help mental health professionals and service users

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understand therapeutic decision making. * Organized by disorder * Comprehensive review of drug effects, action and side-effects * 'User issues' boxes to highlight particular problems experienced * Website addresses to allow searching for further information * Questionnaires to help assess side effects Information on: * New antipsychotic drugs and metabolic complications * New antidepressants * How drugs and therapies such as cognitive behavioural therapy interact and compete * Drugs that affect sexual functioning * Evidence-based medicine

This book is a guide for psychiatrists struggling to incorporate transformational strategies into their clinical work. The book begins with an overview of the concept of critical psychiatry before focusing its analytic lens on the DSM diagnostic system, the influence of the pharmaceutical industry, the crucial distinction between drug-centered and disease-centered approaches to pharmacotherapy, the concept of "de-prescribing," coercion in psychiatric practice, and a range of other issues that constitute the targets of contemporary critiques of psychiatric theory and practice. Written by experts in each topic, this is the first book to explicate what has come to be called critical psychiatry from an unbiased and clinically relevant perspective. Critical Psychiatry is an excellent, practical resource for clinicians seeking a solid foundation in the contemporary controversies within the field. General and forensic psychiatrists; family physicians, internists, and pediatricians who treat psychiatric patients; and mental health clinicians outside of medicine will all benefit from its conceptual insights and concrete advice.

A surprising new look at the rise of ADHD in America, arguing for a better paradigm for diagnosing and treating our children In 1987, only 3 percent of American children were diagnosed with attention-deficit/hyperactivity disorder, also known as ADHD. By 2000, that number jumped to 7 percent, and in 2014 the number rose to an alarming 11 percent. To combat the disorder, two thirds of these children, some as young as three years old, are prescribed powerful stimulant drugs like Ritalin and Adderall to help them cope with symptoms. Meanwhile, ADHD rates have remained relatively low in other countries such as France, Finland, and the United Kingdom, and Japan, where the number of children diagnosed with and medicated for ADHD is a measly 1 percent or less. Alarmed by this trend, family therapist Marilyn Wedge set out to understand how ADHD became an American epidemic. If ADHD were a true biological disorder of the brain, why was the rate of diagnosis so much higher in America than it was abroad? Was a child's inattention or hyperactivity indicative of a genetic defect, or was it merely the expression of normal behavior or a reaction to stress? Most important, were there alternative treatments that could help children thrive without resorting to powerful prescription drugs? In an effort to answer these questions, Wedge published an article in Psychology Today entitled "Why French Kids Don't Have ADHD" in which she argued that different approaches to therapy, parenting, diet, and education may explain why rates of ADHD are so much lower in other countries. In *A Disease Called Childhood*, Wedge examines how myriad factors have come together, resulting in a generation addicted to stimulant drugs, and a medical system that encourages diagnosis instead of seeking other solutions. Writing with empathy and dogged determination to help parents and children struggling with

an ADHD diagnosis, Wedge draws on her decades of experience, as well as up-to-date research, to offer a new perspective on ADHD. Instead of focusing only on treating symptoms, she looks at the various potential causes of hyperactivity and inattention in children and examines behavioral and environmental, as opposed to strictly biological, treatments that have been proven to help. In the process, Wedge offers parents, teachers, doctors, and therapists a new paradigm for child mental health--and a better, happier, and less medicated future for American children

When first published in 1999, *Your Drug May Be Your Problem* was ahead of its time. The only book to provide an uncensored description of the dangers involved in taking every kind of psychiatric medication, it was also the first and only book to explain how to safely stop taking them. In the time elapsed, there have been numerous studies suggesting or proving the dangers of some psychiatric medications and even the FDA now acknowledges the problems; more studies are under way to determine their long-term and withdrawal effects. In the meantime, this book continues to be ever relevant and helpful. Fully updated to include study results and new medications that have come to market, *Your Drug May Be Your Problem* will help countless readers exert control over their own psychiatric treatment.

An account of the Elaine Massacre in Hoop Spur, Arkansas, traces the events that led to the killings of more than 100 black citizens by white mobs and federal troops, describing the related condemnations of twelve African-American men, the contributions of former slave and attorney Scipio Africanus Jones, and the landmark *Moore v. Dempsey* case.

Reprint.

IN THIS STIRRING AND BEAUTIFULLY WRITTEN WAKE-UP CALL, psychiatrist Daniel Carlat exposes deeply disturbing problems plaguing his profession, revealing the ways it has abandoned its essential purpose: to understand the mind, so that psychiatrists can heal mental illness and not just treat symptoms. As he did in his hard-hitting and widely read *New York Times Magazine* article "Dr. Drug Rep," and as he continues to do in his popular watchdog newsletter, *The Carlat Psychiatry Report*, he writes with bracing honesty about how psychiatry has so largely forsaken the practice of talk therapy for the seductive—and more lucrative—practice of simply prescribing drugs, with a host of deeply troubling consequences. Psychiatrists have settled for treating symptoms rather than causes, embracing the apparent medical rigor of DSM diagnoses and prescription in place of learning the more challenging craft of therapeutic counseling, gaining only limited understanding of their patients' lives. Talk therapy takes time, whereas the fifteen-minute "med check" allows for more patients and more insurance company reimbursement. Yet DSM diagnoses, he shows, are premised on a good deal less science than we would think. Writing from an insider's perspective, with refreshing forthrightness about his own daily struggles as a practitioner, Dr. Carlat shares a wealth of stories from his own practice and those of others that demonstrate the glaring shortcomings of the standard fifteen-minute patient visit. He also reveals

the dangers of rampant diagnoses of bipolar disorder, ADHD, and other "popular" psychiatric disorders, and exposes the risks of the cocktails of medications so many patients are put on. Especially disturbing are the terrible consequences of overprescription of drugs to children of ever younger ages. Taking us on a tour of the world of pharmaceutical marketing, he also reveals the inner workings of collusion between psychiatrists and drug companies. Concluding with a road map for exactly how the profession should be reformed, *Unhinged* is vital reading for all those in treatment or considering it, as well as a stirring call to action for the large community of psychiatrists themselves. As physicians and drug companies continue to work together in disquieting and harmful ways, and as diagnoses—and misdiagnoses—of mental disorders skyrocket, it's essential that Dr. Carlat's bold call for reform is heeded.

Anatomy of an Epidemic: Magic Bullets, Psychiatric Drugs, and the Astonishing Rise of Mental Illness in America Crown
This searing indictment, David Healy's most comprehensive and forceful argument against the pharmaceuticalization of medicine, tackles problems in health care that are leading to a growing number of deaths and disabilities. Healy, who was the first to draw attention to the now well-publicized suicide-inducing side effects of many anti-depressants, attributes our current state of affairs to three key factors: product rather than process patents on drugs, the classification of certain drugs as prescription-only, and industry-controlled drug trials. These developments have tied the survival of pharmaceutical companies to the development of blockbuster drugs, so that they must overhype benefits and deny real hazards. Healy further explains why these trends have basically ended the possibility of universal health care in the United States and elsewhere around the world. He concludes with suggestions for reform of our currently corrupted evidence-based medical system.

"A magnificent gift to those of us who love someone who has a mental illness... Earley has used his considerable skills to meticulously research why the mental health system is so profoundly broken."—Bebe Moore Campbell, author of *72 Hour Hold* Former Washington Post reporter Pete Earley had written extensively about the criminal justice system. But it was only when his own son—in the throes of a manic episode—broke into a neighbor's house that he learned what happens to mentally ill people who break a law. This is the Earley family's compelling story, a troubling look at bureaucratic apathy and the countless thousands who suffer confinement instead of care, brutal conditions instead of treatment, in the "revolving doors" between hospital and jail. With mass deinstitutionalization, large numbers of state mental patients are homeless or in jail—an experience little better than the horrors of a century ago. Earley takes us directly into that experience—and into that of a father and award-winning journalist trying to fight for a better way.

"In this in-depth critique of the mental healthcare system, a leading advocate for the mentally ill argues that the system fails to adequately treat the most seriously ill. He proposes major reforms to bring help to schizophrenics, the severely

bipolar, and others"--

" . . . here your will is upright, free, and whole, and you would be in error not to heed whatever your own impulse prompts you to: lord of yourself I crown and mitre you." Dante, *The Purgatorio* Catherine, nineteen years old and suffering from severe schizophrenia, sat in a mental hospital—mute, catatonic, and hearing voices. Her psychiatrist, Dr. Daniel Dorman, was convinced that his patient's psychotic behavior was rooted not merely in chemical imbalances but rather in the dramatic circumstances of her family history. He was therefore determined to avoid the mind-numbing medications that had been so detrimental to Catherine's well being. Dorman fought adamant opposition and criticism from his peers and superiors for a chance to guide Catherine out of madness. As much the story of a young doctor finding his own path in a controversial new world of antipsychotic drugs, where patients' advocates have nowhere to turn, *Dante's Cure* is the true account of a therapeutic process that took place six days a week, for seven years. Thanks to Dorman's devotion, persistence, and self-understanding of his role as a therapist aware of his own limitations, Catherine was able to set out on a life of her own. She is now a psychiatric nurse in southern California living free of medication; she speaks out on behalf of patient rights and humanity in the medical profession. Dorman re-creates Catherine's early life and the onset of her illness in striking detail, covering her treatment prior to his meeting her as a resident at UCLA Hospital, through her recovery and work as a nurse and activist. *Dante's Cure* offers a story of courage and hope. It reveals how madness is inherent to the human condition and therefore ought to be treated as such. To restore patients' trust in their power to recover, rather than robbing them of their agency in the name of medical knowledge, is the true moral of this remarkable journey out of madness.

Do antidepressants work? Of course—everyone knows it. Like his colleagues, Irving Kirsch, a researcher and clinical psychologist, for years referred patients to psychiatrists to have their depression treated with drugs before deciding to investigate for himself just how effective the drugs actually were. Over the course of the past fifteen years, however, Kirsch's research—a thorough analysis of decades of Food and Drug Administration data—has demonstrated that what everyone knew about antidepressants was wrong. Instead of treating depression with drugs, we've been treating it with suggestion. *The Emperor's New Drugs* makes an overwhelming case that what had seemed a cornerstone of psychiatric treatment is little more than a faulty consensus. But Kirsch does more than just criticize: he offers a path society can follow so that we stop popping pills and start proper treatment for depression.

"*Imagining Robert*" is the most honest book to date on the lives of the millions of families that must cope, day by day and year by year, over the course of a lifetime, with a condition for which, in most cases, there is no cure. By rendering his brother's mental illness in all its complexity and mystery, Jay Neugeboren has shown how even the grimmest of lives can

be sustained by the power of love

Acclaimed medical historian Howard Markel traces the careers of two brilliant young doctors—Sigmund Freud, neurologist, and William Halsted, surgeon—showing how their powerful addictions to cocaine shaped their enormous contributions to psychology and medicine. When Freud and Halsted began their experiments with cocaine in the 1880s, neither they, nor their colleagues, had any idea of the drug's potential to dominate and endanger their lives. *An Anatomy of Addiction* tells the tragic and heroic story of each man, accidentally struck down in his prime by an insidious malady: tragic because of the time, relationships, and health cocaine forced each to squander; heroic in the intense battle each man waged to overcome his affliction. Markel writes of the physical and emotional damage caused by the then-heralded wonder drug, and how each man ultimately changed the world in spite of it—or because of it. One became the father of psychoanalysis; the other, of modern surgery. Here is the full story, long overlooked, told in its rich historical context. This book overturns the idea that psychiatric drugs work by correcting chemical imbalance and analyzes the professional, commercial and political vested interests that have shaped this view. It provides a comprehensive critique of research on drugs including antidepressants, antipsychotics and mood stabilizers.

From "the most powerful psychiatrist in America" (*New York Times*) and "the man who wrote the book on mental illness" (*Wired*), a deeply fascinating and urgently important critique of the widespread medicalization of normality. Anyone living a full, rich life experiences ups and downs, stresses, disappointments, sorrows, and setbacks. These challenges are a normal part of being human, and they should not be treated as psychiatric disease. However, today millions of people who are really no more than "worried well" are being diagnosed as having a mental disorder and are receiving unnecessary treatment. In *Saving Normal*, Allen Frances, one of the world's most influential psychiatrists, warns that mislabeling everyday problems as mental illness has shocking implications for individuals and society: stigmatizing a healthy person as mentally ill leads to unnecessary, harmful medications, the narrowing of horizons, misallocation of medical resources, and draining of the budgets of families and the nation. We also shift responsibility for our mental well-being away from our own naturally resilient and self-healing brains, which have kept us sane for hundreds of thousands of years, and into the hands of "Big Pharma," who are reaping multi-billion-dollar profits. Frances cautions that the new edition of the "bible of psychiatry," the *Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5)*, will turn our current diagnostic inflation into hyperinflation by converting millions of "normal" people into "mental patients." Alarmingly, in *DSM-5*, normal grief will become "Major Depressive Disorder"; the forgetting seen in old age is "Mild Neurocognitive Disorder"; temper tantrums are "Disruptive Mood Dysregulation Disorder"; worrying about a medical illness is "Somatic Symptom Disorder"; gluttony is "Binge Eating Disorder"; and most of us will qualify for adult "Attention Deficit Disorder."

What's more, all of these newly invented conditions will worsen the cruel paradox of the mental health industry: those who desperately need psychiatric help are left shamefully neglected, while the "worried well" are given the bulk of the treatment, often at their own detriment. Masterfully charting the history of psychiatric fads throughout history, Frances argues that whenever we arbitrarily label another aspect of the human condition a "disease," we further chip away at our human adaptability and diversity, dulling the full palette of what is normal and losing something fundamental of ourselves in the process. *Saving Normal* is a call to all of us to reclaim the full measure of our humanity.

Smoke and Mirrors is an expose about how the mental health industry fools consumers into believing "mental illness" is about true illness. But in fact, it is a system of dispensing moral judgments about the appropriateness of human experiences and behaviors, not the diagnosis and treatment of real illnesses.

Despite efforts to redress the prejudice and discrimination faced by people with mental illness, a pervasive stigma remains. Many well-meant programs have attempted to counter stigma with affirming attitudes of recovery and self-determination. Yet the results of these efforts have been mixed. In *The Stigma Effect*, psychologist Patrick W. Corrigan examines the unintended consequences of mental health campaigns and proposes new policies in their place. Corrigan analyzes the agendas of government agencies, mental health care providers, and social service agencies that work with people with mental illness, dissecting how their best intentions can misfire. For example, a campaign to change the language around mental illness by replacing supposedly stigmatizing words with empowering ones has made little difference in how people with mental health conditions are viewed. Educational programs that frame mental illness as a brain disorder have made the general public less likely to blame people for their illnesses, but also skeptical that such conditions can be cured. Ultimately, Corrigan argues that effective strategies require leadership by those with lived experience, as their recovery stories replace ideas of incompetence and dangerousness with ones of hope and empowerment. As an experienced clinical researcher, as an advocate, and as a person who has struggled with such prejudices, Corrigan challenges readers to carefully examine anti-stigma programs and reckon with their true effects.

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