

ALTERNATIVES TO PSYCHOTROPIC DRUGS

The Citizens Commission on Human Rights does not give legal or medical advice. However, medical studies show that underlying, undiagnosed physical problems can manifest as so called "psychiatric symptoms." Everyone needs to know the alternatives to psychotropic drugs (mind altering drugs) so they can make fully informed choices about any treatment proposed for themselves or their family members.

Since 2003, there have been more than 60 international drug regulatory agency warnings about the risks inherent in taking psychiatric drugs. Antidepressants can cause suicide and hostility; antipsychotics can cause life-threatening diabetes; and stimulants prescribed to children may put them at risk of heart problems, stroke and even death.

While life is full of problems — and sometimes these problems are overwhelming- psychiatry and its diagnoses, treatments and drugs are not the solution and many are condemned to lifelong suffering on psychiatric drugs. Psychiatrists specialise in cataloguing and treating symptoms only. They do not treat the cause of the person's problems. Mental problems can be resolved.

Psychiatrist Joseph Glenmullen says that, "Most people can overcome the obstacles of leading satisfying lifestyles through the help of more natural alternatives that treat our whole selves, including physical, intellectual and emotional."

FIND THE UNDERLYING PHYSICAL PROBLEMS

The resolution of many mental difficulties begins with medical - not psychiatric assessment and treatment. Medical studies show time and again that for many patients, what appear to be mental problems are actually the result of an undiagnosed physical illness or condition. Ordinary medical problems can and do affect one's behaviour and outlook.

Dr William Crook, in his book, Detecting Your Hidden Allergies, says those bothered by depression, hyperactivity, fatigue and anxiety need an immediate full medical and physical examination and a complete test for food allergies that could cause precisely those mental changes in a person.

Charles B. Inlander, President of the People's Medical Society, wrote in Medicine on Trial, "People with real or alleged psychiatric or behaviour disorders are being misdiagnosed- and harmed to an astonishing degree... Many of them do not have psychiatric problems but exhibit physical symptoms that may mimic mental conditions, and so they are misdiagnosed, put on drugs, put in institutions, and sent into a limbo from which they may never return."

Dr Thomas Dorman an internist says, "Clinicians should first remember emotional stress associated with a chronic illness or painful condition can alter a patient's temperament. In my practice I have run across countless people with chronic back pain who were labelled neurotic. A typical statement from these poor patients is: 'I thought I really was going crazy.' "Often" he said, "the real problem may have been simply an undiagnosed ligament problem in the back."

The late Carl C. Pfeiffer, MD., a researcher with a doctorate in chemistry, discovered that feelings of "depression" as well as many mental and behavioural disturbances could be precipitated by vitamin or mineral deficiencies.

Antidepressants and other psychiatric drugs have "depression" as a side-effect. In the book, A Drug Free Approach to Health Care by Dr David W. Tanton, Ph.D., covered is how abnormal thyroid function may dramatically affect mood, exhibited as severe depression, fatigue and memory loss. Adrenal gland exhaustion may also be a contributing factor.

Senate Bill 929 in California established a pilot program in 1982 to provide medical evaluation to people in public psychiatric hospitals. The findings published in 1989 in Archives of General Psychiatry found that 39% of the more than 500 people studied had an active, important physical disease which was unknown to the mental health professionals. Undiagnosed and untreated physical conditions can manifest as "psychiatric" symptoms.

REVIEW DIET

An Adelaide study published in the Australian Journal of Rural Health found that South Australians view vitamins. minerals and tonics as more helpful than antidepressants in the treatment of depression. Research reported in The Journal of Epidemiology and Community Health found a link between low levels of folate — a B vitamin found in green leafy vegetables and depression. Overall low folate levels increased the risk of depression by 55% the research found.

Britain's Mental Health Foundation has stated, "There is a strong body of evidence, and a number of significant voices are championing the role of diet in the treatment of people with mental health problems."

Dr David W. Tanton, PhD., found that eating foods that create allergies or sensitivities could affect moods. EXERCISE

The December 2005 issue of The Journal of Medicine and Science in Sport & Exercise reported that exercising rather than antidepressants relieves symptoms of "depression."

Caroline Keeton Strayhorn, the Texas Comptroller (controller) of the 2006 report, "Texas Health Care Claims Study — Special Report, Foster Children" stated, "Exercise is not only physically beneficial, but has been shown to improve mood and alleviate depressive symptoms dramatically." **THE SERIOUSLY DISTURBED**

Disturbed individuals deserve and need protection from abuse. As a brief guide, help the person with guiet, food, rest and if recommended as necessary by the patients medical doctor, a mild drug so that he or she can rest properly and sufficiently. Ensure that a full and searching medical examination is conducted to determine any undiagnosed and untreated medical conditions and always find the cause of the person's problem. Never be satisfied with a mere explanation of the symptoms.

The late Dr Loren Mosher, Clinical Professor of Psychiatry wrote, "I opened Soteria House in 1971... where young persons diagnosed with "Schizophrenia" lived medication free with non professional staff trained to listen to them and provide support, safety and validation of their existence. The idea was that schizophrenia can often be overcome with the help of meaningful relationships, rather than with drugs... Interestingly, clients treated at Soteria House who received no neuroleptic [antipsychotic] medication... or were thought to be destined to have the worst outcomes, actually did the best compared to hospital and drug treated control subjects."

Dr Giorgio Antonucci in Italy treated dozens of so-called violent schizophrenic women, most who had been continuously strapped to their beds (some up to 20 years). Dr Antonucci began to release the women from their confinement, spending many, many hours each day talking with them and "penetrating their deliriums and anguish." In every case he heard stories of years of desperation and institutional suffering. He ensured that patients were treated compassionately with respect, and without drugs. Under his guidance, the ward transformed from one of the most violent in the facility to its calmest. After a few months even his "dangerous" patients were free, walking quietly in the asylum garden. Eventually they were stabilised and discharged from the hospital.

Institutions should be turned into safe havens where people will voluntarily seek help without the fear of indefinite incarceration. If admitted they need a guiet environment, nutrition, good food, rest, exercise and help with their problems in everyday life. Such institutions should be well fitted with medical diagnostic equipment. With proper medical – not psychiatric screening, a majority of people brought to institutions could avoid a life of mind altering drugs and the destitution that psychiatric treatment can deliver.

WARNING: Anyone taking psychotropic drugs should not immediately dispense with them. Due to their dangerous side-effects, including potential withdrawal effects, no one should stop taking any psychiatric drug without the advice and assistance of a competent non psychiatric, medical doctor.

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