

AN INTERVIEW WITH PETER R. BREGGIN, M.D.

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With growing frequency, we therapists witness our emotionally upset patients blaming their problems on "chemical imbalance" or "defective genes." They believe the popular notion that their depression, anxiety, obsessions, are biological diseases. So, often without questioning whether the benefits outweigh the risks, millions of Americans take psychoactive drugs prescribed by their primary care physician or psychiatrist.

Medical treatment for mental health cases has shifted away from psychotherapy and other psychosocial approaches in the '60s, to bio-psychiatry and chemicals in the '90s. The statistics are staggering: over eight million Americans have taken the anti-depressant Prozac; more than 100,000 yearly undergo electroconvulsive [shock] treatment; and up to a million children a year are being treated for hyperactivity with Ritalin, a highly addictive drug.

But the brain-damaging effects of these treatments are being ignored, argues Peter R. Breggin, M.D., a Harvard-trained psychiatrist, former consultant to National Institute of Mental Health (NIMH) and George Mason University professor. Some call him "the conscience of Psychiatry," because he attacks the hype and promises of the "New Psychiatry." He also documents the hazards of its drugs and treatments. He strikes back at "quick-fix" bio-psychiatrists who call psycho-social and community psychiatry "old-fashioned."

Breggin's powerful opponents helped silence his voice, until recently when St. Martin's published his meticulously documented books. In *Toxic Psychiatry*, he exposes the myths, politics, and greed that drive current psychiatric research. He explains in clear language how chemical therapies harm the brain and are far more dangerous than people realize; that "mental illness" is not biological and not genetic in origin. In *Talking Back To Prozac*, Breggin exposes the dark side of the so-called "miracle cure" manufactured by Eli Lilly, what many doctors aren't telling their patients. In *War Against Children*, he attacks the bio-psychiatric intrusions into the lives of those children unnecessarily diagnosed as having Disruptive Behavior Disorders and treated with Ritalin, a "speed"-like drug that can have effects like amphetamines and cocaine. In *Beyond Conflict*, he outlines his approach to resolving individual psychological difficulties, marital discord, and social conflict.

In the following interview, this mental health reformer explains why he's risked his professional reputation and financial security to attack the psycho-pharmaceutical industry, the American Psychiatric Association (APA), and the Federal Drug Administration (FDA). Why should therapists, who don't prescribe drugs read this? Breggin says that since "psychiatry dominates the mental health profession, much of what is wrong with psychiatry is also wrong with the whole field."

PETER R. BREGGIN CLINICAL INTERVIEW

Prof. Singer:

FOR MANY YEARS YOUR POSITION WAS IGNORED. BUT, SINCE 1991 ST.MARTIN'S HAS PUBLISHED FOUR BOOKS. WHY ALL OF A SUDDEN?

Dr. Breggin:

My work was suppressed successfully for ten years. Book agents would say my work was well-written, documented, and were sure it would be a best-seller. But then, a few months later, they'd say, "I'm sorry I can't tell you why, but we can't publish it." I received this reception from one publisher after another. Then, in 1987, I debated the President-elect of the APA on the Oprah Winfrey TV Talk Show. I criticized psychoactive drugs and warned of the potentially brain-

damaging effects of these "miracle drugs." After that show, National Association of Mentally Ill (NAMI), which aligns with the pharmaceutical industry and APA, made an attack on my medical license in Maryland. They brought charges against me for criticizing psychoactive drugs on national TV. After that attack, the media defended my right to air my clinical experience. It was a First Amendment, free speech issue, so the media covered my reform work positively. Because of that controversy, the publishing industry finally decided, "We're not going to let the Establishment shrinks tell us not to publish him. We're going to treat him as a bonafide critic of the psychiatry establishment."

Prof. Singer:

IN TOXIC PSYCHIATRY , YOU EXPOSE THE HAZARDS OF PSYCHIATRIC DRUGS SUCH AS PROZAC, HALCION, HALDOL, AND LITHIUM. THE PHARMACEUTICAL INDUSTRY IS A MULTI-BILLION DOLLAR INTERNATIONAL BUSINESS. WHAT'S BEEN THEIR RESPONSE?

Dr. Breggin:

Eli Lilly, the pharmaceutical company that makes Prozac, has been attacking me most aggressively. For example, this year, 1995, they put out a one-page press release on the benefits of Prozac. But the longest paragraph in the press release focused upon criticizing me.

You know the criticism is having an effect when a company spends 10% of its PR release on attacking me instead of promoting their drug. Character Assassination is another way I've been attacked. Eli Lilly also sent a letter to the media trying to link me to the Church of Scientology. In fact, I am an opponent of Scientology and all cults. Twenty years ago Scientologists came to me and I agreed to work on some projects with them. But at that time, when I discovered they were a cult, I publicly criticized and dissociated myself from them. And Lilly knows this.

Prof. Singer:

LAST OCTOBER (10) TIME MAGAZINE, WHICH GETS IMPORTANT PHARMACEUTICAL DOLLARS FOR ADVERTISING, CALLED YOU "PROZAC'S WORST ENEMY."

THE ARTICLE QUOTED YOUR CRITICS. THE HEAD OF NAMI CALLED YOU "IGNORANT" CLAIMING YOU ARE MOTIVATED BY FAME AND WEALTH. THE FORMER DIRECTOR OF NIMH BRANDED YOU "A MODERN EQUIVALENT OF A FLAT EARTH BELIEVER." HOW DO YOU RESPOND?

Dr. Breggin:

I view those unsavory attacks by the Establishment as a badge of honor because I've been exposing their corruption. The APA, for example, is attacking me virulently right now, because I've been exposing their financial connections to the drug companies. If more psychiatrists admitted human distress is caused by socio-environmental conditions, they and the psycho-pharmaceutical industry would be out of business.

Prof. Singer:

HAS THE CHARACTER ASSASSINATION WORKED? WHAT'S BEEN THE POPULAR RESPONSE?

Dr. Breggin:

When TV and radio audiences aren't stacked with NAMI members, the response is tremendously positive. The public tends to be 95% in favor of my criticism of drugs, electroconvulsive [shock]

therapy and lobotomy. Psychologists, social workers, clinicians throughout the country give me a lot of support. In 1972, I founded The Center for the Study of Psychiatry in Bethesda, Maryland. It is the support network for the reform work I do and has over one hundred professionals, including over 25 psychiatrists. Membership is by invitation and we have kept the size to manageable proportions.

Prof. Singer:

HOW HAS PSYCHIATRY CHANGED SINCE THE 60'S?

Dr. Breggin:

In 1966 to 68 when I was there, Biological Psychiatry was just a small section at NIMH. Now bio-psychiatry is the NIMH. The move away from social and community psychiatry happened in the '70's. There was a conscious decision to push drugs and the medical-biological approach. After all, "chemical imbalances" and "genetic predispositions" were money-makers and would help boost the power and prestige of psychiatry. Ironically, what was once the psychiatry of the poor and the state mental hospitals, bio-psychiatry, now was becoming the psychiatry of everyone.

Today, if young psychiatric residents care too much about their patients, they're called "unprofessional." Besides, many already are biased in favor of bio-psychiatry and believe their patients' problems are genetic and biological. Since they believe that their patients' behavior is a product of disease or genetic deficiencies, young psychiatrists are alienated immediately from their patients, believing meaningful communication is impossible. Instead many prescribe drugs or electroconvulsive therapy when patient emotions become intense, thereby suppressing the person. These methods discourage passionate communication and obliterate what could have been the most productive moments in psychotherapy.

After all, a year's supply of Prozac costs the payer about \$500; whereas, "talking therapy" can run into the thousands. So we've rejected the motto, "Just say no to drugs," and promoted the motto, "Take drugs to improve your life."

Prof. Singer:

HOW HAS BIO-PSYCHIATRY INFLUENCED THE FIELD OF MENTAL HEALTH?

Dr. Breggin:

Increasingly, psychotherapists find their clients discouraged from learning about themselves and taking charge of their lives because they believe the bio-psychiatric propaganda. Typically, these clients have been reading newspaper science columns, which tell them that genetics and biochemistry lie at the root of their problems.

Bio-psychiatry is influencing not only the health and mental health professions, but society itself. People used to say someone was "neurotic," now they say they've got a "chemical imbalance." For instance, when Eli Lilly gave a presentation for Depression Awareness Week at nearby Walter Johnson High School in Bethesda, Maryland, they gave the students Prozac pens and pads. Kids today talk off the top of their heads about having a "chemical imbalance" or "defective genes."

Prof. Singer:

THERE ARE 100,000 GENES IN THE HUMAN BODY. HAVE ANY GENES BEEN FOUND THAT SPECIFICALLY CAUSE DEPRESSION, ANXIETY, OVEREATING?

Dr. Breggin:

There has absolutely not been any gene or gene combination identified that causes any behavioral abnormality.

Prof. Singer:

WHAT ABOUT ALCOHOLISM?

Dr. Breggin:

There's no convincing evidence that alcoholism is genetic or biologic; it runs in cultures, it runs in families, but that's because it's a learned behavior.

Prof. Singer:

ARE YOU ALSO SAYING NO PATHOGEN HAS BEEN IDENTIFIED THAT CAUSES EMOTIONAL DISTRESS?

Dr. Breggin:

We've seen patients who get depressed when they have certain hormonal disorders. Sometimes people get depressed when they're just plain sick. Sometimes people get depressed when they have head injuries. But there's never been a particular pathogen or process clearly identified with depression. Except interestingly enough, with psychiatric drugs, which muck about with the neurotransmitters. It's clearly established that, for example, Prozac and Halcion can cause depression. Halcion is banned in Great Britain and other countries for that and other reasons.

Prof. Singer:

YOU'VE SAID THAT BIO-PSYCHIATRY VIOLATES HIPPOCRATIC OATH: "IN THE FIRST PLACE DO NO HARM." PLEASE EXPLAIN.

Dr. Breggin:

Bio-psychiatry violates the Hippocratic dictum because biological interventions basically cause brain dysfunction. In the extreme, lobotomy and electroshock clearly damage brain tissue. Then the use of psychiatric drugs, which if they're not doing brain damage, are at least causing brain dysfunction. It's important to realize that the brain damage or the brain dysfunction is not the side effect, it's the primary effect. So, in psychiatry the dictum is reversed: First the doctor does harm to the patient. Ironically, it's justified as doing good.

Prof. Singer:

YOU'RE SAYING THAT INSTEAD OF CURING PEOPLE, SOME DRUGS ACTUALLY CAUSE PROBLEMS?

Dr. Breggin:

Yes.

Prof. Singer:

ARE YOU AGAINST ALL DRUGS?

Dr. Breggin:

No. Many medical drugs have great worth, because they treat real physical diseases. Psychiatric

drugs, however, treat "illnesses" that are not actual diseases, that is, there is no identifiable pathogen.

The most potent psychiatric drugs differ little in principle from electroconvulsive therapy and from lobotomy. All the major psychiatric treatments work by producing brain dysfunction, and too often they result in lobotomy-like effects and permanent damage.

Prof. Singer:

ARE YOU AGAINST ALL PSYCHO-ACTIVE DRUGS?

Dr. Breggin:

If individual people want to take drugs, that's their privilege. But they should be informed about their actual effects and risks.

Prof. Singer:

THAT BRINGS UP THE DISEASE TARDIVE DYSKINESIA. WHAT IS IT?

Dr. Breggin:

A neurological disease frequently caused by neuroleptic drugs, such as Haldol, Mellaril, Thorazine, Navane, and Prolixin. Tardive dyskinesia is a movement disorder that can afflict any of the voluntary muscles, from the eyelids, tongue, larynx, and diaphragm to the neck, arms, legs, and torso. If you've seen the movie "Awakenings," the main character, Leonard, deteriorates while taking large doses of L-Dopa. His extreme and disabling involuntary movements are identical to a very severe case of Tardive Dyskinesia. Otherwise physically healthy people will develop the disease at a cumulative rate of 5% per year. Most people exposed long-term will develop the disease. I estimated in my 1983 medical book *Psychiatric Drugs* that five to ten million Americans per year were being treated with neuroleptics, the class of drugs we've been discussing. That estimate probably holds true today. These huge numbers alone should motivate us to learn everything we can about the impact of these addictive agents on the brain and the mind.

Prof. Singer:

DOES THAT MEAN PATIENTS SHOULD JUST STOP THEIR MEDS?

Dr. Breggin:

No, as I warn in *Toxic and Talking Back*, do not stop taking psychiatric drugs abruptly because most have addictive qualities and can produce withdrawal symptoms that are emotionally and physically distressing and sometimes life-threatening.

Prof. Singer:

ISN'T THIS IS THE FIRST TIME IN HISTORY WE HAVE SO MANY KIDS ON PSYCHOACTIVE DRUGS?

Dr. Breggin:

Psychoactive drugs are prescribed for children called hyperactive, for those with learning problems or dyslexia, for attention-deficit disorder, a diagnosis often treated with ritalin, the equivalent of amphetamine or speed.

But, the diagnosis of Attention Deficit-Hyperactivity Disorder is meaningless; For example, the

description of ADHD includes "often fidgets, has difficulty remaining seated, easily distracted, difficulty awaiting turn in games, often blurts out answers to questions before they have been completed." That describes any number of intelligent, inquisitive and sensitive children and adults I know.

Prof. Singer:

IS ADHD A MEDICAL CONCEPT OR NOT?

Dr. Breggin:

All children have learning problems or else they wouldn't need help from teachers, they'd simply learn on their own. Learning, for all of us, is a difficult process with an endless number of associated problems.

Prof. Singer:

BUT, ARE THERE LEARNING DISABILITIES BASED ON PRESUMED GENETIC AND NEUROLOGICAL DEFICITS THAT CAN BE CLINICALLY DESCRIBED, DIAGNOSED BY TESTING, AND TREATED WITH SPECIAL TECHNIQUES?

Dr. Breggin:

The answer is no. There are no known neurological deficits, no known genetic traits, no consistent clinical descriptions, no specific diagnostic testing, and no reliable techniques of treatment.

"Learning Disabilities" is a diagnosis generated not by research or even by clinical experience, but by a parent-driven movement. Unable to confront the failure of the public schools, their own family problems, or their children's lack of motivation or aptitude, parents needed another explanation.

Prof. Singer:

MY PATIENTS WERE ASTONISHED WHEN I TOLD THEM WHAT YOU UNCOVERED IN YOUR RESEARCH: THAT LESS THAN 300 PEOPLE COMPLETED THE 4-6 WEEK CLINICAL TRIALS TO GAIN FDA APPROVAL FOR PROZAC. IS THAT TRUE FOR OTHER PSYCHOACTIVE DRUGS?

Dr. Breggin:

Yes, an example is the FDA controlled trials for the neuroleptic Cloazril (clozapine), which may be administered for years, sometimes a lifetime and frequently against the patient's wishes. Testing on this extremely brain-disabling and sometimes life-threatening drug for FDA approval lasted only six weeks.

Anafranil (clomipramine), an FDA approved drug for obsessive-compulsive disorder was studied for only ten weeks. It frequently is administered for months or years.

Enormous amounts of money are required to process a drug through the FDA and the potential profits are astronomical. One former FDA official told me that the cost of the approval process can run into the hundreds of millions for one drug. He estimated that Lilly spent \$80 million getting Prozac through the FDA.

Prof. Singer:

THE PROFITS MUST BE WORTH THAT INVESTMENT. AFTER ALL, THE OVERALL 1994 SALES OF PROZAC RANKED SECOND ONLY TO AN ULCER MEDICATION, ACCORDING

THE WALL STREET JOURNAL, MARCH 27, 1995.

Dr. Breggin:

What people have to see is that a pill, like a car, is an industrial product. All the money that goes into selling and pushing that car as a safe and good buy also goes into a pill. The marketing and manufacturing focus is on profit rather than safety.

I've written my books for the hundreds of thousands of people who are being misled by the current medical and psychiatric emphasis on psychoactive drugs as safe and effective treatments, but until now have failed to receive, honest information.

This 1995 interview initiated by Prof. Singer, at the time Director of Women's Division, Center for Counter-conditioning Therapy® aimed at unmasking mental health myths. In this manner, Prof. Singer upholds the Center's GLOBAL reputation which is the pursuit of CLINICAL facts.

Hats off to Prof. Singer!!!