

Neuroleptic Awareness

Part 2

The Perverse History of Neuroleptic Drugs

“The standard beliefs about modern drug treatments in Psychiatry are similar to delusions. They are fixed and probably false, and based on a distorted reading of the evidence”

Moncrieff 2002

The Perverse History of Neuroleptic drugs:

Since as far back as 1954 it has been known that neuroleptic drugs cause **Brain damage.**

1952 French psychiatrists used chlorpromazine as part of a drug cocktail that can put mental patients into "hibernation". It was said to produce **a chemical lobotomy.**

1954-55 Chlorpromazine, marketed in the U.S. as Thorazine, found to induce **symptoms of Parkinson's Disease.** Also **symptoms similar to Encephalitis Lethargica.**

1959 First reports of **permanent motor dysfunction linked to neuroleptics, later named Tardive Dyskinesia.**

1960 French physicians describe a potentially **fatal toxic reaction to neuroleptics, later named Neuroleptic Malignant Syndrome.**

1965 Neuroleptics found to **impair learning in animals and humans.**

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Brain damage caused by neuroleptic drugs continued...

1972 Tardive dyskinesia is said to resemble **Huntington's disease, or "postencephalitic brain damage"**.

1979 Tardive Dyskinesia found to be associated with cognitive impairment.

1994 Neuroleptics found to cause an increase in the volume of caudate region in the brain, which is **a sign of brain damage.**

1998 Neuroleptic use is found to be associated with **atrophy of the cerebral cortex.**

1998 Harvard researchers conclude that "oxidative stress" may be the process by which **neuroleptics cause neuronal damage in the brain.**

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Evidence of Iatrogenic effects of Neuroleptic Drugs

1978 Canadian researchers describe drug-induced changes in the brain that **make a patient more vulnerable to relapse**, which they dub "**neuroleptic induced supersensitivity psychosis**" (SSP).

1979 Prevalence of **Tardive Dyskinesia in drug-treated patients** is reported to range from 24% to 56%.

1982 Anticholinergic medications used to treat Parkinsonian symptoms induced by neuroleptics reported to cause **cognitive impairment**.

1992 Researchers acknowledge that neuroleptics cause a recognizable pathology, which they named **neuroleptic induced deficit syndrome**.
(NIDS)

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Iatrogenic effects of Neuroleptic Drugs continued...

1998 MRI studies show that neuroleptics appear to cause brain hypertrophy of the caudate, putamen, and thalamus, with the increase **"associated with greater severity of both negative and positive symptoms"**.

1998 Treatment with two or more neuroleptics is found to **increase risk of early death**.

2000 Neuroleptics linked to fatal blood clots.

2000 Tardive Dyskinesia linked to early death.

2003 Risk of early death for schizophrenia patients is found to have **increased since introduction of atypical antipsychotics**.

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Adverse social and financial effects of neuroleptics

1962 California Mental Hygiene Department determines that chlorpromazine and other **neuroleptics prolong hospitalisation.**

1966 NIMH (National Institute of Mental Health) study of one-year outcomes find that **drug-treated patients are more likely than placebo patients to be re-hospitalized.**

1975 Boston researchers report that relapse rates were **lower** in pre-neuroleptic era, and that **drug-treated patients are more likely to be socially dependent.**

1980 NIMH researchers find an increase in "**blunted effect**" and "**emotional withdrawal**" in drug-treated patients who don't relapse, and determine that **neuroleptics do not improve "social and role performance"** in non-relapsers.

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Adverse social and financial effects of neuroleptics cont...

1985 Drug-induced akathisia is linked to suicide and violent homicides.

1995 "Quality of life" in drug-treated patients reported to be "very poor".

2005 NIMH researchers report that (expensive) atypical antipsychotics provide few, if any, benefits compared to old neuroleptics.

2007 British researchers report that quality-of-life was better on old drugs than on atypicals.

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Worse Outcomes:

1994 Harvard investigators report that schizophrenia outcomes have **worsened over past 20 years**, and are now no better than in first decades of 20th century.

1995 "Real-world" relapse rates for schizophrenia patients treated with neuroleptics said to be above 80% in two years following hospital discharge, which is **much higher than in pre-neuroleptic era**.

2006 **Suicide rate for schizophrenic patients is reported to be 20 times higher today than it was a century ago.**

Source: "[Mad in America](#)", A research timeline for antipsychotic drugs, Robert Whitaker.

Better Outcomes:

1978 California investigator Maurice Rappaport reports **markedly superior three-year outcomes for patients treated *without* neuroleptics.**

1979 Loren Mosher, head of schizophrenia studies at the NIMH, reports **superior one-year and two-year outcomes for Soteria patients treated *without* neuroleptics.**

1992 World Health Organization reports that **schizophrenia outcomes are much superior in poor countries, where few patients are maintained on neuroleptics.**

2007 Illinois investigators report that **long-term recovery rates for un-medicated schizophrenia patients are *eight times higher* than for medicated patients.**

Source: “Mad in America”, A research timeline for antipsychotic drugs, Robert Whitaker.

CRUELTY

“To say that an unknown number of biomechanical substances may interact in an unknown way to produce schizophrenia is a tortuous way of admitting that we have no clue as to what the hell is going on”

Scrabanek 1984

It is commonly believed that reversal of schizophrenia is accomplished primarily through neuroleptic drug treatment, but this belief can be maintained only by ignoring a great deal of material published in the historical and scientific literature.

Source: “[Reversal of Schizophrenia Without Neuroleptics.](#)”
Matt Irwin, *Ethical Human Psychology and Psychiatry*,
Volume 6, Number I Spring 2004

A CRUEL HISTORY

A brief historical review is provided which reveals that neuroleptics became the treatment of choice after 2 centuries of physically abusive "treatments" that more resembled torture than treatment.

The rationale offered for these abuses was that insanity was primarily a physical disorder and that without these methods no recovery was possible.

A review of long-term studies of people diagnosed with schizophrenia is provided to show, however, that schizophrenia reverses naturally in most people, with the highest rate of recovery occurring in a non-industrialised country where no neuroleptics were used.

The history of psychiatric treatment of people considered mentally ill is a tragic one, and painful to recount.

Source: "[Reversal of Schizophrenia Without Neuroleptics.](#)"

Matt Irwin, *Ethical Human Psychology and Psychiatry*, Volume 6, Number I Spring 2004

A CRUEL HISTORY cont...

In eighteenth century England, the first "modern" treatments were established:
Creating open sores into which caustics would be rubbed daily for months,
Repeated bleedings to the point of loss of consciousness, liberal use of purges,
Emetics, "stripes," "blows," restraints, and straight jackets, near-starvation diets.
Simulated drowning to the point of unconsciousness, ("water-boarding")
A specially constructed "swinging chair" which could induce vomiting,
convulsions, and involuntary urination and defecation.

Hunter & Macalpine, 1963; Scull, 1989; Whitaker, 2002.

All these were defended by the physicians using them as necessary "medical" treatments, without which recovery would be impossible. Physicians claimed that insanity was a physical disorder and presented elaborate theories to justify these aggressive physical treatments.

All treatments quietened down the inmates.

Source: "[Reversal of Schizophrenia Without Neuroleptics.](#)"

Matt Irwin, Ethical Human Psychology and Psychiatry, Volume 6, Number I Spring 2004

KINDNESS and RESPECT

In mid-1800's cruel treatments were replaced by a humane approach by the Quakers of York, who created a “retreat”. With kindness and comfortable, safe conditions came better outcomes. 70% of people recovered and returned to respectable places in society.

Bockhoven,1972; Scull, 1989.

Randomized studies of programs similar to moral treatment that have been carried out in the last 30 years have had similar good results, without using neuroleptics or other "physical" treatments.

Bola & Mosher, 2003; Irwin, 2004.

Source: “Reversal of Schizophrenia Without Neuroleptics.”

Matt Irwin, Ethical Human Psychology and Psychiatry, Volume 6, Number I Spring 2004

CRUELTY AGAIN

Some Physicians then stated that this method was “unscientific” and by 1880, moral treatment had been completely eradicated.

Insanity was again labeled a physical disease, and physical treatments were reintroduced:

Prolonged immersion in very hot or very cold water, needle showers,
Being wrapped in wet sheet packs and left to be squeezed like a vice as they dried,

Surgery such as hysterectomy, tonsillectomy, colectomy, cholecystectomy, appendectomy, orchiectomy.

Deep sleep therapy, people were kept in a drug-induced sleep for days or weeks at a time.

Overall, the patients tended to do poorly. Braslow, 1997; Whitaker, 2002. - poor outcomes.

Source: [“Reversal of Schizophrenia Without Neuroleptics.”](#)

Matt Irwin, Ethical Human Psychology and Psychiatry, Volume 6, Number I Spring 2004

CRUELTY cont...

Eugenics became the dominant explanatory model for mental illness, and by the 1920s, American society had accepted the idea that mental illness was genetic in origin.

Influenced by a book written by Madison Grant (founder of the American Eugenics Society) Adolf Hitler later ordered the extermination of about 70,000 mental patients.

Source: “[Reversal of Schizophrenia Without Neuroleptics.](#)”

Matt Irwin, *Ethical Human Psychology and Psychiatry*, Volume 6, Number I Spring 2004

Fruitless Genetic Research

“No Significant Association of 14 Candidate Genes With Schizophrenia in a Large European Ancestry Sample: Implications for Psychiatric Genetics” Alan R. Sanders, et al *Am J Psychiatry* 2008; 165:497-506

“An Agenda for Psychiatric Genetics.” Barondes, S. et al (1999) *Arch. Gen. Psych.* **56**: 549-552.

("genetically influenced psychiatric disorders have so far been resistant to analysis")

“The equal environment assumption of the classical twin method: A critical analysis” Joseph, J. (1998)..

Journal of Mind and Behavior, **19**, 325-358. (Joseph points out that all twin studies of behavioral characteristics-like those defining "schizophrenia" are fundamentally flawed because identical twins have been clearly shown to be raised more similarly than are non-identical ones.)

“A critique of the Finnish Adoptive Family Study of Schizophrenia” Joseph, J. (1999). *Journal of Mind and Behavior*, **20**, 133-154. (Joseph points out that the adoption study methodology depends on random adoption-that is the adoption agency does not know the mother's background when placing the child. The Finnish study, suffers from the fact that the first half of the sample was placed with the knowledge that the mothers had "schizophrenia". This and a number of other important methodological problems make the findings highly questionable.)

“The genetic theory of schizophrenia: A critical overview”. Joseph, J. (1999). *Ethical Human Sciences and Services*, **1**, 119-145. (Conclusion: there is no evidence of a specific or important genetic component in "mental illness")

Source: [A critical bibliography of the Biopsychiatric Model](#). Loren.R.Mosher MD

BRAIN DAMAGING “TREATMENTS”

In the 1930s a new group of treatments became widespread. They quieted people down quickly, and, this time, more often permanently:

Insulin-induced comas (brain death), Metrazol-induced convulsions, electroshock, High mortality rate and bone fractures.

Frontal lobotomy - heralded as a breakthrough, induced infantile permanent states needing toilet training. Still used in late 1960s.

1954 Largactil/chlorpromazine hailed as the next breakthrough, but only a few short term studies had been done.

Then ten years later **long term studies indicated brain damage.**

These negative long term results were completely ignored.

Source: “[Reversal of Schizophrenia Without Neuroleptics.](#)”

Matt Irwin, Ethical Human Psychology and Psychiatry, Volume 6, Number I Spring 2004

The point is that every treatment, apart from the Quakers' Moral Treatment Movement, caused gross suffering. Today's neuroleptic treatment causes a silent chemical lobotomy – a physical aggressive assault. The suffering, although invisible, still applies to day. And there is no need for it.

Useful websites for further relevant information:

Law Project for Psychiatric Rights:

<http://psychrights.org/index.htm>

AHRP Alliance for Human Research Protection

www.ahrp.org

The Center for the Study of Empathic Therapy, Education and Living.

<http://www.empathictherapy.org/>

CCHR Citizen's Commission on Human Rights

www.cchr.org

MindFreedom International: 26 Years of Human Rights Activism in Mental Health

<http://www.mindfreedom.org/>

A critical bibliography of the Biopsychiatric Model. Loren.R.Mosher MD

<http://www.moshersoteria.com/articles/biopsychiatric-model/>

Psychiatric Drug Facts with Dr. Peter Breggin

<http://www.breggin.com/>

Contributors:

Catherine Clarke SRN, SCM, MSSCH, MBChA

Jan Evans MCSP. Grad Dip Phys

March 2012