SPEAK OUT against PSYCHIATRIC ABUSE

"[Psychiatry] is the only profession that can as a matter of course utterly take away the freedom of people who have committed no crime."

- Bonnie Burstow Psychiatry and the Business of Madness

The truth about mainstream psychiatry

The purpose of this leaflet is twofold:

- 1. to increase awareness of the dangers of mainstream psychiatry, and
- 2. to express **solidarity** with the people whose lives it has damaged or destroyed.

Many people have a vague realization that psychiatry has a dark and dubious past – lobotomies, eugenics, insulin comas, *etc.*. They may mistakenly believe that its grotesque practices were abandoned a long time ago. Unfortunately that is not the case. (Mainstream) psychiatry is – in several respects – just as dangerous and shameful as it was several decades ago; its methods and instruments have merely become more sophisticated.

The harm and suffering caused by this institution – with its nonsensical 'chemical imbalance' theories, its fraudulent drug trials, and its obscene practice of involuntary incarceration – are incalculable.

It is impossible to do justice to this topic in a short leaflet. What follows are just key important points. Follow the links / suggestions for more information if you want to learn more.

Why speak up about this?

Because you or someone you love could very easily become a **victim of psychiatric abuse**. Consider one sequence of events via which this can happen.

When some people attempt to withdraw from **anti-depressants** they experience **emotional spirals**, which – if they escalate – may result in what is construed as 'psychosis'. This, in turn, can be claimed



by a psychiatrist as evidence of underlying 'schizophrenia' – leading to the prescription of an anti-psychotic drug. Thus the unfortunate person ends up trapped in a cycle, as a 'revolving door' patient.

This is only one way in which many people end up 'in the system' – a seemingly innocuous prescription for anti-depressants when their guard is down. And this could happen to *anyone* – even the most sure-footed and ostensibly 'normal' individuals (including possibly you).

"For many reasons now, going to a psychiatrist is probably the most dangerous thing you can do in the Western world"

 Peter Breggin https://youtu.be/u3K-CojzvzQ

The chemical imbalance myth

A core contention of mainstream psychiatry is that mental disturbance is due to a 'chemical imbalance' (e.g. serotonin in the case of depression or dopamine in the case of psychosis). This is scientifically unfounded and ethically appalling.



To tell people that their sorrow or despondency is due to a 'chemical imbalance' is a travesty. It completely evades the real issues underlying their emotional (and / or spiritual) distress, and wholly undermines their ability to confront their circumstances head on.

"The hunt goes on for these elusive imbalances; but their existence is pure speculation, inspired by those who advocate drugs."

- Breggin & Cohen Your drug may be your problem

The dangers of psychiatric drugs

It has been known for many years that **SSRIs** can lead to increased risk of **suicidal ideation** and **aggressive behaviour** [1][2]. Psychiatrists continue to turn a blind eye to this fact, however, and continue prescribing SSRIs and other anti-depressants recklessly.

Antipsychotic drugs, on the other hand, can lead to disorders such as tardive dyskinesia (uncontrollable body movements), Parkinson's disease like symptoms, dramatic weight gain, and diabetes [3][4][5].

Outspoken psychiatrists such as David Healy and Jon Jureidini have tried to take drug companies to task on these issues – revealing that many of the drug trials on which FDA approval was based were fraudulent [6]. See, for example, the Study 329 website (https://study329.org/).

If you find this difficult to believe, listen to the testimony of Leonie Fennell on Youtube regarding her son's death – as just one of countless examples of lives which were turned upside down by psychiatric drugs.

Link: https://youtu.be/OxiZA FgS-0

Disclaimer

Despite the many serious problems associated with psychiatric drugs, trying to stop them *suddenly* can be extremely dangerous. **Withdrawing from** psychiatric drugs should ideally be done under the watchful eye of trusted loved ones or caregivers who are fully informed of and understand the dangers.

Gradual withdrawal – or 'tapering' – is typically recommended. For more information on drug withdrawal refer to the Inner Compass website, the Surviving Antidepressants website or Peter Breggin's books on the topic.

The problem of coercion

If you are undergoing psychiatric treatment and believe it is benefitting you the purpose of this leaflet is not to belittle your experience or testimony. If, for example, you are taking psychiatric drugs and wish to continue doing so that is your decision to make. A large part of the problem is coercion.

Countless people have testified (and amply demonstrated) that they are *not* benefitting from the 'treatment' they receive - but are nonetheless coerced in to receiving it. Many of these people were urged to start psychiatric drugs by GPs or psychiatrists who failed to adequately inform them of the grave harm risks.

You may believe that you have benefitted from psychiatry, but you are not justified in disregarding the testimony of others whose lives it has damaged.

The role of the state and the law

"The bottom line is that psychiatry is sanctioned by the state, is funded by the state, is authorized to act by the state."

- Bonnie Burstow

Psychiatry and the Business of Madness

Via the Mental Health Act 2001 the state sanctions and endorses psychiatric abuses. This fact alone illustrates how morally and spiritually bankrupt the legal and political institutions of this country have become - that it rubber stamps these abonimations and allows the people responsible to operate more or less freely.

We should repudiate this phony 'mental health' system and almost everything that goes with it - and instead acknowledge that depression is a natural (and even healthy) response to an often difficult and sometimes overwhelming social environment. Its antidote lies in rebuilding our relationships (and even entire communities) around different values, and in providing ourselves with sufficient opportunities for personal growth and fulfillment. The solution will rarely if ever be found in a medical prescription – or any sort of coercive 'treatment'.

Mental health is important, but the state mental health *system* is founded on entirely wrong premises, and is largely a front for pharmaceutical companies and unrestrained medical and legal lobbies. In other words, it's a *racket*.



To be continued ...

This leaflet has not even touched on psychiatric abuses such as involuntary 'shock therapy'. There is not enough space. Mainstream psychiatry is a breathtakingly violent institution with strong ties to the **eugenics** movement [7][8]. It has few or no redeeming characteristics. We

should speak out and oppose it whenever possible.

In summary ... We need to be much less gullible when it comes to the proclamations and advice of so-called 'experts', and we need to **protect ourselves and our loved ones** from people who parade as do-gooders but whose motives are anything but benign.

Let's be more circumspect. And let's **speak out against psychiatry** and its ongoing violation of fundamental human rights.

"Madness is clearly afoot in ... psychiatry, and bad science – as so often has been the case in mad medicine – has helped it on its way."

Robert Whitaker
Mad In America

More information

- MindFreedom Ireland website: http://www.mindfreedomireland.com/
- Mad in America website: https://www.madinamerica.com/
- Psychiatric survivors: Ted Chabasinski, Mary Maddock, Jill Kesti, David Oaks, Jim Gottstein
- Others: Peter Breggin (psychiatrist), Robert Whitaker (journalist), Bonnie Burstow (psychotherapist), David Healy (psychiatrist), Sami Timimi (psychiatrist)
- The Inner Compass Initiative: https://www.theinnercompass.org/
- Surving antidepressants website: https://www.survivingantidepressants.org/
- Peter Breggin's videos on the dangers of psychiatric drugs and safe withdrawal
- Facebook groups
 - Speak Out against Psychiatry
 - MindFreedom Ireland

References

- 1: Bielefeldt AØ, Danborg PB, Gøtzsche PC, Precursors to suicidality and violence on antidepressants: systematic review of trials in adult healthy volunteer, 2016
- 2: Peter Breggin, Medication Madness, 2008
- 3: Koller EA, Doraiswamy PM, Olanzapine-associated diabetes mellitus, 2002
- 4: Lord CC, Wyler SC, Wan R, Castorena CM, Ahmed N, Mathew D, Lee S, Liu C, Elmquist JK, The atypical antipsychotic olanzapine causes weight gain by targeting serotonin receptor 2C, 2017
- 5: Chyou TY, Nishtala R, Nishtala PS., Comparative risk of Parkinsonism associated with olanzapine, risperidone and quetiapine in older adults-a propensity score matched cohort study., 2020
- 6: Healy, David, et al., Children of the Cure: Missing Data, Lost Lives and Antidepressants, 2020
- 7: Luty, J., Psychiatry and the dark side: Eugenics, Nazi and Soviet psychiatry., 2014
- 8: Whitaker, Robert, Mad in America. Bad Science, Bad Medicine, and the enduring mistreatment of the mentally ill, 2019