Non-Fiction on Mental Illness & Treatment

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Books

Let Them Eat Prozac
by David Healy

Prozac. Paxil. Zoloft. Turn on your television and you are likely to see a commercial for one of the many selective serotonin reuptake inhibitors (SSRIs) on the market. We hear a lot about them, but do we really understand how these drugs work and what risks are involved for anyone who uses them?
Let Them Eat Prozac explores the history of SSRIs—from their early development to their latest marketing campaigns—and the controversies that surround them. Initially, they seemed like wonder drugs for those with mild to moderate depression—patients take just one daily dose, and unlike the tranquilizers that were popular in the 1960s, they supposedly did not lead to addiction. When Prozac was released in the late 1980s, David Healy was among the psychiatrists who prescribed it. But he soon observed that some of these patients became agitated and even attempted suicide. Studies were soon published, citing numerous cases in which patients became anxious and reported increased suicidal thoughts while taking Prozac. Could the new wonder drug actually be making patients worse?
Healy draws on his own research and expertise to demonstrate the potential hazards associated with these drugs. He intersperses case histories with insider accounts of the research leading to the development and approval of SSRIs as a treatment for depression. Let Them Eat Prozac clearly demonstrates that the problems go much deeper than a disturbing side-effect of a particular drug. Current FDA regulations encourage drug companies to patent a specific compound and market it effectively to a large population on the basis of minimal effectiveness in a handful of trials.
The pharmaceutical industry would like us to believe that SSRIs can safely treat depression, anxiety, and a host of other mental problems. But as Let Them Eat Prozac reveals, this "cure" may be worse than the disease.

Understanding Biological Psychiatry
by Robert J. Hedaya

Beginning with a tour of the brain, Dr. Hedaya explains how the brain works and how brain function relates to physical symptoms and cognitive and emotional well-being. He explains how biological psychiatrists consider the biology of the individual as an integral part of the whole picture and demonstrates a new way of conceptualizing clinical problems. Understanding Biological Psychiatry provides information in three basic areas: Chapters 1 and 2 outline basic scientific foundations and core concepts in biological psychiatry; chapters 3 and 4 review biological theories and medical mimics of the major psychiatric disorders; chapters 5 and 6 discuss medication and practical issues, including the basics of psychotropic medications and their role in the biopsychosocial approach. At the heart of this book is the author's proposal for a working alliance between therapists and psychiatrists - an important goal in today's growing managed care environment. The book has a practical bent, discussing, for example, when and how to refer to a psychiatrist, even describing how to explain this new perspective to a patient. The author's conversational style, as well as many figures, tables, and case illustrations, makes Understanding Biological Psychiatry a guide that is sure to be well-read and often referred to by therapists and physicians, as well as psychiatrists wanting to brush up on the biology of the mind.

The Loss of Sadness: How Psychiatry Transformed Normal Sorrow into Depressive Disorder
by Allan V. Horwitz

Depression has become the single most commonly treated mental disorder, amid claims that one out of ten Americans suffer from this disorder every year and 25% succumb at some point in their lives. Warnings that depressive disorder is a leading cause of worldwide disability have been accompanied by a massive upsurge in the consumption of antidepressant medication, widespread screening for depression in clinics and schools, and a push to diagnose depression early, on the basis of just a few symptoms, in order to prevent more severe conditions from developing.
In The Loss of Sadness, Allan V. Horwitz and Jerome C. Wakefield argue that, while depressive disorder certainly exists and can be a devastating condition warranting medical attention, the apparent epidemic in fact reflects the way the psychiatric profession has understood and reclassified normal human sadness as largely an abnormal experience. With the 1980 publication of the landmark third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III), mental health professionals began diagnosing depression based on symptoms—such as depressed mood, loss of appetite, and fatigue—that lasted for at least two weeks. This system is fundamentally flawed, the authors maintain, because it fails to take into account the context in which the symptoms occur. They stress the importance of distinguishing between abnormal reactions due to internal dysfunction and normal sadness brought on by external circumstances. Under the current DSM classification system, however, this distinction is impossible to make, so the expected emotional distress caused by upsetting events-for example, the loss of a job or the end of a relationship- could lead to a mistaken diagnosis of depressive disorder. Indeed, it is this very mistake that lies at the root of the presumed epidemic of major depression in our midst.
In telling the story behind this phenomenon, the authors draw on the 2,500-year history of writing about depression, including studies in both the medical and social sciences, to demonstrate why the DSM's diagnosis is so flawed. They also explore why it has achieved almost unshakable currency despite its limitations. Framed within an evolutionary account of human health and disease, The Loss of Sadness presents a fascinating dissection of depression as both a normal and disordered human emotion and a sweeping critique of current psychiatric diagnostic practices. The result is a potent challenge to the diagnostic revolution that began almost thirty years ago in psychiatry and a provocative analysis of one of the most significant mental health issues today.

Rethinking Psychiatric Drugs: Rethinking Informed Consent
by Grace E. Jackson

Are patients aware of the fact that pharmacological therapies stress the brain in ways which may prevent or postpone symptomatic and functional recovery?
Rethinking Psychiatric Drugs: A Guide for Informed Consent is a critical appraisal of the medications which an estimated 20% of Americans consume on a regular (and sometimes involuntary) basis.
It is the philosophically, epidemiologically, and scientifically supported revelation of how and why psychiatry's drug therapies have contributed to a standard of care which frequently does more to harm than to cure.
Extensively researched and documented, the book addresses:
• the process by which psychiatric drugs reach the market
• the history and philosophy of Evidence Based Medicine
• the common flaws in research methodologies which negate the validity of the psychiatric RCT (Randomized Controlled Trial)
• the problem of allostatic load (how drugs stress the body)
• the history, long term effects, and utility of the drugs used to suppress symptoms of depression, psychosis, inattention and hyperactivity
• the effectiveness of alternatives to medication
Rethinking Psychiatric Drugs: A Guide for Informed Consent exposes the current crisis in medical ethics and epistemology, and attempts to restore to psychiatry an authentically informed consent to care.

Touched with Fire: Manic-Depressive Illness and the Artistic Temperament
by Kay Redfield Jamison

The anguished, volatile intensity we associate with the artistic temperament, often described as "a fine madness," has been thought of as a defining aspect of much artistic genius. Now, Kay Jamison's brilliant work, based on years of studies as a clinical psychologist and prominent researcher in mood disorders, reveals that many artists who were subject to alternatingly exultant and then melancholic moods were, in fact, engaged in a lifelong struggle with manic-depressive illness. Drawing on extraordinary recent advances in genetics, neuroscience, and psychopharmacology, Jamison presents the now incontrovertible proof of the biological foundations of this frequently misunderstood disease, and applies what is known about the illness, and its closely related temperaments, to the lives of some of the world's greatest artists - Byron, van Gogh, Shelley, Poe, Melville, Schumann, Coleridge, Virginia Woolf, Burns, and many others. Byron's life, discussed in considerable detail, is used as a particularly fascinating example of the complex interaction among heredity, mood, temperament, and poetic work. Jamison reviews the substantial, rapidly accumulating, and remarkably consistent findings from biographic and scientific studies that demonstrate a markedly increased rate of severe mood disorders and suicide in artists, writers, and composers. She then discusses reasons why this link between mania, depression, and artistic creativity might exist. Manic-depressive illness, a surprisingly common disease, is genetically transmitted. For the first time, the extensive family histories of psychiatric illness and suicide in many writers, artists, and composers are presented. In some instances - for example, Tennyson and Byron - these psychiatric pedigrees are traced back more than 150 years. Jamison discusses the complex ethical and cultural consequences of recent research in genetics, especially as they apply to manic-depressive illness.

Night Falls Fast: Understanding Suicide
by Kay Redfield Jamison

From the best-selling author of An Unquiet Mind: the first major book in a quarter century on suicide, with a particular focus on its terrible pull on the young. Night Falls Fast is both compelling and timely: in the United States and across the world there has been a frightening surge in suicides committed by children, adolescents and young adults. It is the third major cause of death in 19- to 24-year-olds, and the second in college students. Dr. Kay Redfield Jamison, an internationally recognized authority on depressive illnesses and their treatment, knows this subject firsthand. At the age of 28, after years of struggling with manic-depression, she attempted to kill herself. Her survival marked the beginning of a life's work to investigate both mental illness and self-inflicted death.
Weaving together a psychological and scientific exploration of the subject with personal essays about individual suicides, Dr. Jamison in this book brings not only her compassion and literary skill, but all of her knowledge, research and clinical experience to bear on this devastating problem. In tracing the network of reasons that underlie suicide, Dr. Jamison gives us astonishing examples of the methods and places people have chosen to kill themselves, and a startling look at their journals, drawings and farewell notes. She also brings us vivid insight into the most recent findings from hospitals and laboratories across the world; the critical biological and psychological factors that interact to cause suicide; the new strategies being evolved to combat them; and the powerful, but insufficiently used treatments from modern medicine.
Night Falls Fast dispels the silence and shame that too often surround suicide; it helps us to understand the suicidal mind, to better recognize the person at risk, and to comprehend the profound and disturbing loss created in those left behind.

Against Depression
by Peter D. Kramer

Against Depression is an assessment of the science of mood disorder - a field that has taken leaps forward in the past decade. Walking the reader through the full range of new research, Kramer shows how depression endangers nerve cells, disrupts brain functioning, damages the heart and the blood vessels, alters personal perspective and judgment, and interferes with parenting and family life. As the evidence mounts, there is no denying the obvious - that depression now qualifies fully as a disease, one of the most devastating known to humankind. And yet, says Kramer, "we do not approach depression as a disease, not in our daily thinking." Depression, linked in our culture to a long tradition of "heroic melancholy," is often understood as ennobling - a source of creativity, integrity, insight, and even sensuality. Tracing these beliefs from Aristotle to the Romantics to Picasso, and to present-day memoirs of mood disorder, Kramer suggests that the pervasiveness of the illness has distorted our impression of what it is to be human. He shows how a head-on look at depression as we now know it will change our sense of self, our tastes in art and in love, and our account of what it is to live a good life.

Should You Leave?: A Psychiatrist Explores Intimacy and Autonomy--and the Nature of Advice
by Peter D. Kramer

In his phenomenal bestseller Listening to Prozac, Peter Kramer explored the makeup of the modern self. Now, in his superbly written new book, he focuses his intelligent, compassionate eye on the complexities of partnerships and why intimacy is so difficult for us. With the art of a novelist and the skill of a brilliant psychiatrist, Kramer addresses advice seekers struggling with such complex questions as: How do we choose our partners? How well do we know them? How do mood states affect our assessment of them and theirs of us? What does "working on a relationship" truly entail? When should we try to improve a relationship, and when should we leave? Equally at home with Shakespeare, Emerson, and Kierkegaard as it is with Freud and Jung, Should You Leave? is a literary tour de force from a uniquely insightful observer and a profoundly resonant and helpful approach to resolving dilemmas of the heart.

Lincoln's Melancholy: How Depression Challenged a President and Fueled His Greatness
by Joshua Wolf Shenk

Drawing on seven years of his own research and the work of other esteemed Lincoln scholars, Shenk reveals how the sixteenth president harnessed his depression to fuel his astonishing success. Lincoln found the solace and tactics he needed to deal with the nation's worst crisis in the "coping strategies" he had developed over a lifetime of persevering through depressive episodes and personal tragedies.
With empathy and authority gained from his own experience with depression, Shenk crafts a nuanced, revelatory account of Lincoln and his legacy. Based on careful, intrepid research, Lincoln's Melancholy unveils a wholly new perspective on how our greatest president brought America through its greatest turmoil.
Shenk relates Lincoln's symptoms, including mood swings and at least two major breakdowns, and offers compelling evidence of the evolution of his disease, from "major depression" in his twenties and thirties to "chronic depression" later on. Shenk reveals the treatments Lincoln endured and his efforts to come to terms with his melancholy, including a poem he published on suicide and his unpublished writings on the value of personal--and national--suffering. By consciously shifting his goal away from personal contentment (which he realized he could not attain) and toward universal justice, Lincoln gained the strength and insight that he, and America, required to transcend profound darkness.

Before Prozac: The Troubled History of Mood Disorders in Psychiatry
by Edward Shorter

Psychiatry today is a barren tundra, writes medical historian Edward Shorter, where drugs that don't work are used to treat diseases that don't exist. In this provocative volume, Shorter illuminates this dismal landscape, in a revealing account of why psychiatry is "losing ground" in the struggle to treat depression.
Naturally, the book looks at such culprits as the pharmaceutical industry, which is not inclined to market drugs once the patent expires, leading to the endless introduction of new—but not necessarily better—drugs. But the heart of the book focuses on an unexpected villain: the FDA, the very agency charged with ensuring drug safety and effectiveness. Shorter describes how the FDA permits companies to test new products only against placebo. If you can beat sugar pills, you get your drug licensed, whether or not it is actually better than (or even as good as) current medications, thus sweeping from the shelves drugs that may be superior but have lost patent protection. The book also examines the FDA's early power struggles against the drug industry, an influence-grab that had little to do with science, and which left barbiturates, opiates, and amphetamines all underprescribed, despite the fact that under careful supervision they are better at treating depression, with fewer side effects, than the newer drugs in the Prozac family. Shorter also castigates academia, showing how two forms of depression, melancholia and nonmelancholia—"as different from each other as chalk and cheese"—became squeezed into one dubious classification, major depression, which was essentially a political artifact born of academic infighting.
An astonishingand troubling look at modern psychiatry, Losing Ground is a book that is sure to spark controversy for years to come.

Blaming The Brain: The Truth About Drugs and Mental Health
by Elliot Valenstein

Over the last thirty years, there has been a radical shift in thinking about the causes of mental illness. The psychiatric establishment and the health care industry have shifted 180 degrees from blaming mother to blaming the brain as the source of mental disorders. Whereas experience and environment were long viewed as the root causes of most emotional problems, now it is common to believe that mental disturbances — from depression and anxiety to schizophrenia — are determined by brain chemistry. And many people have come to accept the broader notion that their very personalities are determined by brain chemistry as well.
In his award-winning, meticulously researched, and elegantly written history of psychosurgery, Great and Desperate Cures, Elliot Valenstein exposed the great injury to thousands of lives that resulted when the medical establishment embraced an unproven approach to mental illness. Now, in Blaming the Brain he exposes the many weaknesses inherent in the scientific arguments supporting the widely accepted theory that biochemical imbalances are the main cause of mental illness. Valenstein reveals how, beginning in the 1950s, the accidental discovery of a few mood-altering drugs stimulated an enormous interest in psychopharmacology, resulting in staggering growth and profits for the pharmaceutical industry. He lays bare the commercial motives of drug companies and their huge stake in expanding their markets. Prozac, Thorazine, and Zoloft are just a few of the psychoactive drugs that have dramatically changed practice in the mental health profession. Physicians today prescribe them in huge numbers even though, as several major studies reveal,their effectiveness and safety have been greatly exaggerated.
Part history, part science, part exposé, and part solution, Blaming the Brain sounds a clarion call throughout our culture of quick-fix pharmacology and our increasing reliance on drugs as a cure-all for mental illness. This brilliant, provocative book will force patients, practitioners, and prescribers alike to rethink the causes of mental illness and the methods by which we treat it.

Anatomy of an Epidemic: Magic Bullets, Psychiatric Drugs, and the Astonishing Rise of Mental Illness in America
by Robert Whitaker

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? Every day, 1,100 adults and children are added to the government disability rolls because they have become newly disabled by mental illness, with this epidemic spreading most rapidly among our nation's children. What is going on?
Anatomy of an Epidemic challenges readers to think through that question themselves. First, Whitaker investigates what is known today about the biological causes of mental disorders. Do psychiatric medications fix "chemical imbalances" in the brain, or do they, in fact, create them? Researchers spent decades studying that question, and by the late 1980s, they had their answer. Readers will be startled—and dismayed—to discover what was reported in the scientific journals.
Then comes the scientific query at the heart of this book: During the past fifty years, when investigators looked at how psychiatric drugs affected long-term outcomes, what did they find? Did they discover that the drugs help people stay well? Function better? Enjoy good physical health? Or did they find that these medications, for some paradoxical reason, increase the likelihood that people will become chronically ill, less able to function well, more prone to physical illness?
This is the first book to look at the merits of psychiatric medications through the prism of long-term results. Are long-term recovery rates higher for medicated orunmedicated schizophrenia patients? Does taking an antidepressant decrease or increase the risk that a depressed person will become disabled by the disorder? Do bipolar patients fare better today than they did forty years ago, or much worse? When the National Institute of Mental Health (NIMH) studied the long-term outcomes of children with ADHD, did they determine that stimulants provide any benefit?
By the end of this review of the outcomes literature, readers are certain to have a haunting question of their own: Why have the results from these long-term studies—all of which point to the same startling conclusion—been kept from the public?
In this compelling history, Whitaker also tells the personal stories of children and adults swept up in this epidemic. Finally, he reports on innovative programs of psychiatric care in Europe and the United States that are producing good long-term outcomes. 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.

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