Towards zombie psychiatry

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In the West, from the 1950s through to the 1990s, psychotropic drugs, like antidepressants, antipsychotics and benzodiazepines, were endorsed by medical, political and religious establishments, while Freud and social approaches to mental disorders were a badge of honour for the Liberal Left, bioethicists, and philosophers, who viewed the pharmaceutical industry with suspicion.

In 1997, Edward Shorter’s A History of Psychiatry: From the Era of the Asylum to the Age of Prozac appeared [1]. Written with a verve not usually linked to the establishment, Shorter’s book wrote off Freud in unequivocal fashion, and celebrated Prozac and the Selective Serotonin Reuptake Inhibitors (SSRIs) and psychopharmacology. He scandalised the Liberals but was in tune with the people. Over the next two decades, the Liberals have migrated over to where Shorter was in 1997. They now designate themselves as Bioliberal and have embraced the idea of creating the new man, or trans man, through pharmacology or genetic modification [2]. They contrast themselves with stick in the mud Bioconservatives who are wary about the promises of biology and industry.

With The Rise and Fall of the Age of Psychopharmacology, Shorter has vacated the spot he was in in 1997. He doesn’t entirely disown his past life – he makes it clear in the first section of this book that there was a rise to psychopharmacology that was based on drugs that worked and on solid work in neuroscience to elucidate some of their mechanisms of action. There was enough around 1990 to say that psychiatry had established itself as more substantial than it had been. That psychopharmacology had dragged it out of a backwater in which it had been marooned for over a century.

In recanting his past life, Shorter has not turned to antipsychiatry. He remains committed to science and the idea of progress, but finds that psychiatry has lost its moorings in science and progress.

In writing this book, he draws heavily on the observations of others who lived through these times in clinics and laboratories and, indeed, companies – Mickey Nardo, Max Fink, Barney Carroll, Jay Amsterdam, Mark Kramer and Tom Ban. Not all of these agree with each other or with Shorter himself, but it’s difficult to think of a better group of observers, given to trenchant observations. They have provided him with the juiciest of details to make his point – in addition to a wealth of archival material. He couldn’t have a better set of sources.

He has also been blessed in the “villains” he has been able to put in the frame – from the Boss of Bosses, Charlie Nemeroft*, to the ghostwriters who greased the Boss’s path. The book is full of scenes to chuckle over if you’re an insider, likely to be jaw-dropping if you’re not.

Ultimately, Shorter paints a scathing picture of puffed-up Key Opinion Leaders whom industry regards with contempt and a process that is scripted to the last punctuation mark, where once key conversations happened on the beach among colleagues puzzling at inconsistencies, who welcomed adverse events for the light they shed on the way drugs often revealed individuality rather than eternal truths.

But there is a big problem with the book. Its title, The Rise and Fall... inevitably conjures up The Third Reich. And we breathe a sigh of relief because we know the Reich is no more. Not so with psychopharmacology. Despite being hollowed out to the point where continued life is impossible, psychopharmacology today has a zombie existence that is increasingly threatening and dangerous. Like a plot from Star Trek, it’s life, but not as we know it.

Psychopharmacology blazed a path for the concealment of trial data and ghostwriting, which now infects all of medicine, including the vaccine trials. It’s not just mental healthcare that has been taken over by zombies – it’s all of healthcare.

We’ll have to see if the Covid pandemic is the moment where psychopharmacology finally swallows its tail. What do I mean? Well, the vaccines have been approved on the basis of surrogate markers. The trials have been ghostwritten. Substitute the use of tropes like anti-vaxxers for scientologists and you have the beginnings of a
disinformation playbook that originated with Lilly and Prozac [3], and was turbocharged by Lilly with Zyprexa [4].

The Covid epidemic, and vaccines for it, came too late for this book; but Shorter makes it very clear that medicine is no longer about treating illnesses. In the case of psychopharmacology, it’s about numbing emotions and abolishing negative ideas. The SSRIs and related antidepressants offer a crowning glory of zombiology: we have 45 randomised control trials (RCTs) done in depressed children – all negative, with no relationship between the claims made in published articles and the underlying data when we get to see it [5].

In the 1990s, there were almost no depressed children. Companies had to scour the world to get children into trials. Now every child is depressed and antidepressants are the second most commonly taken drugs by teenage girls [6].

This is a more lethal virus than Covid. With Covid and its vaccines, we see a culmination of the dance in which Shorter and those opposed to him have participated. Bioliberalism has embraced and been embraced by the medical, political and religious establishments, while Shorter and others have moved to another position.

Towards the end of this book, Shorter states his position – we can’t get much more bizarre than this or tolerate much more of this sham. He knows of course that we can, and our efforts to manage the pandemic appear increasingly bizarre. How exactly zombiology will develop from here isn’t clear. When even Edward Shorter ends on the note that perhaps Freud wasn’t so bad after all, you realise that things are very strange indeed.

*Note: Charles Nemeroff was the Chair of Psychiatry at Emory University, and was prominent among the researchers whose conflicts of interest led to the passing of The Physicians Payments Sunshine Act in the United States in 2010, which made it mandatory for pharma companies to disclose all payments to doctors in a database called Open Payments.

References

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BOOK REVIEW

Transparency unveiled

BARBARA MINTZES


From a public interest perspective, the most important policy shift in the regulation of medicines in the 21st century is improved transparency. Until recently, the scientific evidence that companies provided to regulators to support approval of medicines for marketing was largely considered “confidential business information”; kept secret from researchers, clinicians, patients, and the public. This confidential information has included full reports of clinical trials testing treatment effectiveness. Policy shifts to open this body of scientific evidence to public scrutiny are a major advance, allowing independent researchers to re-analyse trials based on full unfiltered reports. Several of these re-analyses have led to profound shifts in the understanding of benefits and harmful effects of medicines. A second major win for public interests has been in uncovering not just the science but also the financial links between pharmaceutical companies and clinicians, through legally mandated company reporting in the United States (US) and in several European countries. Other countries, including the UK, are considering similar legislation [1], and self-regulatory industry reporting systems exist throughout the European Union and in Australia and the UK.

*Transparency, Power, and Influence in the Pharmaceutical...*