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Lou Dobbs
Lou Dobbs Tonight
5 Penn Plaza
New York, NY 10001

October 24, 2003

Re: Psychiatric Medications

Dear Mr. Dobbs:

I was so impressed with your Op-Ed piece, "Over-medication: a growing crisis," it has prompted me to write with some thoughts. It is quite clear from the research that our mental health system's virtual total reliance on neuroleptics (including the so-called "atypicals") for the treatment of schizophrenia is creating a huge class -- hundreds of thousands, if not millions -- of "zonked out" chronically mentally ill individuals who could otherwise fully recover and lead productive lives. *See*,
<http://psychrights.org/Research/Digest/Chronicity/NeurolepticResearch.htm>.

As additional background and in support of this striking statement I am enclosing:

1. "Mad in America: Bad Science, Bad Medicine and the Enduring Mistreatment of the Mentally Ill" by award winning medical/science writer, Robert Whitaker, and
2. "Empirical Correction of Seven Myths About Schizophrenia with Implications for Treatment," by Courtenay M. Harding, Ph.D., and James H. Zahniser

I urge you to read just the first half page of the Preface of "Mad in America" to the word "*worsened*," which I hope will impel you to (or have someone else) read the rest of this very important work. I can also provide additional documentation, such as the American Psychiatric Association's virtual admission it has been asserting as truth the totally unproven (and likely untrue) *hypothesis* that mental illness is caused by some sort of biologically-based brain disease, and will be happy to do so upon request.

By way of information on me, I have been engaged in the private practice of law here in Alaska since graduating from Harvard Law School in 1978. During the last 20 years I have also been involved in mental health issues here, including currently being a member of the Alaska Mental Health Board, which is the state's planning body for its mental health program. I am chair of its Budget Committee, which makes recommendations regarding the state's mental health program budget. Because of its importance, though, I have put my private practice on hold to address the shameful system this country has of dishonestly getting the courts to forcibly subject people diagnosed with serious mental illness to take these very dangerous, counterproductive and debilitating drugs:

[It is] a system in which (1) dishonest testimony is often regularly (and unthinkingly) accepted; (2) statutory and case law standards are frequently subverted; and (3) insurmountable barriers are raised . . . In short, the mental

disability law system often deprives individuals of liberty disingenuously and upon bases that have no relationship to case law or to statutes.¹

I have founded the Law Project for Psychiatric Rights (PsychRights) to mount a legal attack on the way the system dishonestly forcibly drugs people in this way. See, <http://psychrights.org/>.

Of course, the human rights violations based on these untruths is hugely important, but there is also the huge financial drain on the state and national governments that this situation has caused. Virtually every state currently has a mental health system budget crisis. Medication and other treatment costs have gone out of sight. In Alaska, as a budget strategy the state has come to rely almost exclusively on Medicaid funding because the bulk of it is paid by the Federal Treasury. The same is true in most other states as well. More and more people are being placed on disability income status and virtually no one ever comes off of it. This has led to the escalating mental health costs that has created the current fiscal crisis in mental health. The mental health system is broken and breaking the bank. The virtual exclusive reliance on psychiatric medications for treatment is a major cause.

The story you unearthed about the role of pharmaceutical company marketing claims of dubious veracity, at best, and promotion for the anti-depressants occurs as well in the other psychiatric medication arenas. In the case of the neuroleptics, there is also the horrendous use of force and the unnecessary consignment of hundreds of thousands, if not millions, of people to permanent disability and poverty on the public dole. The drugging of vast numbers of our children because our school system is not equipped to handle normal variations in children's ability to thrive in school, often due to problems in family life, is another face of this same phenomenon -- pharmaceutical industry dominance of mental health policy.

Your exposure of this situation with respect to the anti-depressants is very important and I hope you will look into the situation with respect to the neuroleptics and kid drugging. In many ways, the situation is much worse.

I would be pleased to discuss this with you or if there is any other way I might provide assistance, just let me know. I have a lot of additional information which I would be happy to provide and I can also refer you to a number of people who are intimately familiar with the situation.

Sincerely,



James B. Gottstein, Esq.

¹ "The ADA and Persons with Mental Disabilities: Can Sanist Attitudes Be Undone?" 1993/1994, 8 J.L. & Health 15.