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22 August 2003

James H. Scully, Jr., M.D., Medical Director American Psychiatric Association 1000 Wilson Boulevard, Suite 1825 Arlington, VA 22209-3901

Dear Dr. Scully:

David Oaks, Executive Director of MindFreedom, has forwarded to us your reply dated 12 August 2003 to the hunger strikers involved in a "Fast for Freedom in Mental Health." We are a panel of 14 academics and clinicians who have agreed to review any such reply for scientific validity.

The hunger strikers asked your organization, as well as the Surgeon General of the United States, and the National Alliance for the Mentally III, to provide:

1. evidence

that establishes the validity of "schizophrenia," "depression" or other "major mental illnesses" as "biologically-based brain diseases";

2. evidence

for a physical diagnostic exam that can reliably distinguish individuals with these diagnoses (prior to treatment with psychiatric drugs) from individuals without these diagnoses;

3. evidence for a baseline standard of a neurochemically-balanced "normal" individual, against which a neurochemical "imbalance" can be measured;

4. evidence

that any psychotropic drug can correct any "chemical imbalance" attributed to a psychiatric diagnosis;

5. evidence

that any psychotropic drug can reliably decrease the likelihood of violence or suicide.

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In your reply, no specific studies of any kind were cited with reference to any of the questions

above. You cited three general sources, including the recent Surgeon General's report on mental health and two textbooks of psychiatry.

In examining each of these sources, we found numerous statements that invalidate suggestions that behaviors referred to as "mental illnesses" have specific biological bases:

Mental Health: A Report of the Surgeon General (1999) is explicit about the absence of any findings of specific pathophysiology:

p. 44: "The diagnosis of mental disorders is often believed to be more difficult than diagnosis of somatic,

or general medical, disorders, since there is no definitive lesion, laboratory test, or abnormality in brain tissue that can identify the illness."

p. 48: "It is not always easy to establish a threshold for a mental disorder, particularly in light of how common symptoms of mental distress are and the lack of objective, physical symptoms."

p. 49: "The precise causes (etiology) of mental disorders are not known."

p. 51: "All too frequently a biological change in the brain (a lesion) is purported to be the 'cause' of a mental disorder ... [but] The fact is that any simple association – or correlation – cannot and does not, by itself, mean causation."

p. 102: "Few lesions or physiologic abnormalities define the mental disorders, and for the most part their causes remain unknown."

In the third edition of *Textbook of Clinical Psychiatry* (1999), we find similar statements:

p. 43: "Although reliable criteria have been constructed for many psychiatric disorders, validation of the diagnostic categories as specific entities has not been established."

p. 51: Most of these [genetic studies] examine candidate genes in the serotonergic pathways, and have not found convincing evidence of an association."

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In Andreasen and Black's (2001) Introductory Textbook of Psychiatry, we find, in the chapter on schizophrenia:

p. 23. "In the areas of pathophysiology and etiology, psychiatry has more uncharted territory than the rest of medicine...Much of the current investigative research in psychiatry is directed toward the goal of identifying the pathophysiology and etiology of major mental illnesses, but this goal has been achieved for only a few disorders (Alzheimer's disease, multi-infarct dementia, Huntington's disease, and substance-induced syndromes such as amphetamine-related psychosis or Wernicke-Korsakoff syndrome)."

p. 231: "In the absence of visible lesions and known pathogens, investigators have turned to the exploration of models that could explain the diversity of symptoms through a single cognitive mechanism."

p. 450: "Many candidate regions [of the brain] have been explored [for schizophrenia] but none have been confirmed."

As you are no doubt familiar with these textbooks you cited, you will agree that such statements invalidate claims for specific, reliable biological causes or signs of "mental illnesses." In the judgment of the panel members, your reply fails to produce or cite any specific evidence of any specific pathophysiology underlying any "mental disorder."

You have also referred us to 60 volumes of *Archives of General Psychiatry* and 160 volumes of *The American Journal of Psychiatry*. The 28 July 2003 cover letter from the hunger strikers and panelists that they sent to you by certified mail stated:

"We are aware that research studies can run to thousands of pages. Therefore, please respond only with those studies that you consider the best available in support of your claims and theories in a timely way. When responding with evidence, please send citations for the original publications or copies of the publications you are citing."

Like you, we are familiar with the material found in these journals. It is understandable why you did not provide any citations. There is not a single study that provides valid and reliable evidence for the "biological basis of mental illness."

The members of the panel wish to make some further observations which we hope will assist the American Psychiatric Association to present an honest scientific stance with respect to the hunger strikers' questions.

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In the panel's view, the questions posed by the hunger strikers are serious and fair. These questions are legitimate questions that any patient or family member or interested person might ask of any psychiatrist, or a student might ask of a professor. The panel was therefore quite dismayed that you, as Medical Director of the world's largest, wealthiest, and most resourceful psychiatric association, could not provide a more specific or substantial response than the equivalent of, "See our textbook."

If, as you state in your letter, "the answers to [the above] questions are widely available in the scientific literature, and have been for years," then it behooves your organization to make these answers and their specific sources – if they differ from the quotes we present in this letter – available promptly.

The panel members could not help but notice the contrast between the hunger strikers, who ask clear questions about the science of psychiatry and consciously take risks in the name of protecting the well-being of users of psychiatry, and the American Psychiatric Association, which evades revealing what actual scientific evidence justifies its authority. By not giving specific answers to the questions posed by the hunger strikers, you appear to be affirming the very reason for the hunger strike.

Sincerely,

Fred Baughman, MD Mary Boyle, PhD Peter Breggin, MD David Cohen, PhD Ty Colbert, PhD Pat Deegan, PhD Al Galves, PhD Thomas Greening, PhD David Jacobs, PhD Jay Joseph, PhD Jonathan Leo, PhD Bruce Levine, PhD Loren Mosher, MD Stuart Shipko, MD

The hunger strikers endorse the scientific panel's statement. www.MindFreedom.org.

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