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Depression drugs profit from loss

You've had a road traffic accident. Your foot is on the wrong way round. The flesh on your leg has been peeled like a banana. You may have internal injuries. This isn't the time to be insisting on alternative therapies like homeopathy and aromatherapy.

Modern medicines, surgery and pain management clearly have a place and trauma care must be an obvious one. Everything the surgeon takes out of the wrapper has been sold for a profit. However, whilst orthopaedic and plastic surgeons are best at saving smashed limbs, much less debilitating conditions can usually be reliably dealt with by the body itself.

The body is incredibly resilient. So, why do we reach for pills so readily? And why the latest media sensation rather than remedies tried and tested over generations? Why not St John's Wort rather than Prozac?

The recent history of prescriptions for depression, detailed at length by the authors Medawar and Hardon in their book Medicines out of Control? certainly gives us pause for thought.

We should do some research before ingesting drugs. Here's why:

1) The results we desire may require behavioural change
Getting the benefits we're seeking may simply require us to start
doing something good for our health or conversely *stop* doing
something that's bad for our health. For example, if we eat fewer
calories and dance more our body mass will drop without drugs. And
if we quit smoking our body will repair faster because fast repair
requires a good circulation of blood. No additional drugs required - in
fact, just one less.

2) Your prognosis may be wrong

If your complaint is misdiagnosed your medication might simply complicate matters. Studies suggest GPs are unable to give a firm diagnosis in 20 - 60% of cases (p196). But all drugs have side effects. In the 1930s bromides were included in 4 out of 10 GP prescriptions in Britain. Come the 1950s, 'bromism' accounted for an estimated 10% of all admissions to UK psychiatric institutions (p22).

3) A drug's side effects may be worse than the problem it treats
The last 150 years of prescriptions for fear and worry is a catalogue of treatments with withdrawal symptoms so unpleasant the patients became hooked. These include opium, morphine, cocaine, bromides, heroin, barbiturates and tranquillisers. My grandmother took Mogadon or similar until the day she died. Prescribed for trouble sleeping, it later became apparent that stopping it abruptly could be



life threatening.

4) The drug trials may have missed something serious

Pressures to get a return on investment mean drugs are frequently on sale before the longterm consequences of their use are fully understood. Thalidomide was purposely sold to women as a safer sleeping aid as it was found to be 'safe' in overdose. Worldwide, some 10,000 deformed babies were born to users before it was withdrawn in 1961.

Heroin was developed in 1898. It was originally promoted as a "non-addicting cough suppressant" for infants (p17-18). More recently trials have shown that anti-depressants can actually increase suicidal tendencies in young people. Trials of Seroxat suggested young users were more liable to self-harm than those taking a placebo (p201).

5) A placebo may be just as good if not better

A sugar pill can be just as effective. In tests about 1 in 3 people respond as well to a placebo as to an active drug (p177). By one expert estimate 80% or more of depressed patients will in time recover without any treatment (Byck 1975) p47.

6) We give drugs far too much credit

Before the 1850s men were lucky to live beyond 40. Since then human life expectancy has been on an upward trend in the UK. But prescription drugs didn't start the trend. General improvements in water, sanitation, education, accommodation, diet and working conditions made the real difference. Typhoid collapsed as a major killer between 1860 and 1880 following the installation of sewage treatment in London. Cheap tea may also have helped by encouraging people to drink boiled water.

7) Many of the most effective drugs are old ones

We've scoured the planet for useful plants to resynthesize and repackage - so much so that many of the most effective drugs are long established and now out of patent protection.

8) Dependence is where the biggest profits are made

Endless fantasies have been peddled to get young people over the hurdle of those first few foul tasting cigarettes to the state of nicotine addiction. Dr Batty's Asthma Cigarettes even claimed to effectively treat asthma. There is profit in cigarettes, profit in caffeine and profit in alcohol. The profits to be made from illegal drugs like opium and thus heroin are stupendous. Patients also become dependent on certain prescription drugs.

9) Spend on drug research is declining relative to marketing GlaxoSmithKline invested just \$14 million in R&D for every \$1 billion in sales growth between 1997 and 2001 (p91). Does that give you confidence they're comprehensively testing and reporting post-launch

reactions to drugs?

So what conclusions should we draw from all this?

Prescription only drug manufacturers are far from being alone in pushing for profit. Supposed health food stores push body building supplements to the front of their shop window for exactly the same reason.

As with any other transaction today, the profit motive means we won't necessarily NEED the drug we're sold and what we're sold may very well be celebrated by the producers for the wrong reasons - more for its ability to produce repeat sales than its ability to deliver an effective remedy.

So, in the one hand we end up with the best-selling double cheeseburger - this provides double the recommended daily intake of fat. In the other hand we have the World's No1 best-selling prescribed drug, Lipitor - this promises to take care of the surplus cholesterol produced by the double cheeseburger.

But sadly the prescribed drug has side effects including muscle pain and tiredness, which means some users will be less inclined to exercise and perhaps more prone to comfort eating. It seems that if we just keep taking what we are offered we are doomed to keep going round in circles.

Health and drugs profits aren't natural bedfellows. This is true for one very simple reason - healthy people don't take drugs.

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Essential Reading:

My nervous breakdown, broken down

Medicines out of control? Antidepressants and the Conspiracy of Goodwill by Charles Medawar & Anita Hardon

The book 'Medicines out of control?', from which many of the factual references in the above article are drawn, warns of the risk of dependence on drugs prescribed to treat depression. It is too tempting for manufacturers to explain away serious withdrawal symptoms when people stop taking these drugs as relapse into depression or symptoms of a different complaint.

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Extra:

The reason why the UK's GPs haven't been able to prescribe herbal remedies like St John's Wort surely has more to do with drug companies seeking to maximise profits than it does to do with the relative efficacy of the treatment.

The risk of becoming physically dependent on painkillers is well known. NHS staff take considerable care not to get patients into bad drug taking habits in the aftermath of severe trauma by, for example, limiting how long morphine is offered.

Looking at behaviour as the possible root of a complaint has to make sense. Talking cures make sense. Faith, whether it be in the curative power of homeopathy, one's own mental powers or the power of love, have to make sense. An holistic approach treating mind and body makes sense. Well documented remedies and approaches that have been used successfully for centuries are unlikely to suddenly present unexpected problems.

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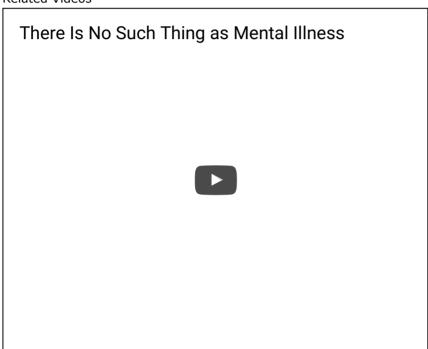
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MOGADON

The problem with many prescription drugs is that coming off them is as HELLISH as the circumstances which moved the patient to seek help in the first place. After using benzodiazepines like Mogadon at ever higher doses (because of your increasing tolerance), you risk getting these side effects...

When you reduce the dose following prolonged use:

Anxiety, possible terror and panic attacks[17][36]

Agitation and restlessness[17]

Hypochondriasis[17]

Dilated pupils[4]

Impaired concentration[36]

Nightmares[37]

Insomnia[37]

Muscular spasms, cramps or fasciculations[38]

Electric shock sensations[3][39]

Blurred vision[17]

Dizziness[17]

Dry mouth[17]

Aches and pains[17]

Hearing impairment[17]

Taste and smell disturbances[17]

Chest pain[17]

Flu like symptoms[17]

Impaired memory and concentration[17]

Increased sensitivity to touch[40]

Increased sensitivity to sound[17]

Sounds louder than usual[40]

Objects moving[40]

Increased urinary frequency[17]

Numbness and tingling[17]

Hot and cold flushes[17]

Headache[36]

Rebound REM sleep[41]

Stiffness[17]

Fatigue and weakness[17]

Hyperosmia[42]

Restless legs syndrome[11]

Metallic taste[42]

Photophobia[42]

Paranoia[42]

Hypnagogia-hallucinations[6]

Nausea and vomiting[37]

Elevation in blood pressure[43]

Tachycardia[44]

Hypertension[45]

Postural hypotension[37]

Depression (can be severe),[46] possible suicidal ideation

Tremor[47][48]

Perspiration[36]

Loss of appetite and weight loss[49]

Dysphoria[50][51]

Depersonalization[52][53]

Derealisation (Feelings of unreality)[40]

Obsessive compulsive disorder[54][55]

Tinnitus[56]

Paraesthesia[40][42][53]

Visual disturbances[53]

Mood swings[17]

Indecision[17]

Gastronintestinal problems (Irritable bowel syndrome) [57][58][59]

When you stop taking it suddenly you may also get:

Convulsions, which may result in death[60][61]

Catatonia, which may result in death[62][63][64]

Coma[65] (rare)

Suicide[5][66][67]

Attempted suicide[53]

Suicidal ideation[68]

Self harm[53]

Hyperthermia[37]

Delusions[69]

Homicide ideations[70]

Urges to shout, throw, break things or to harm someone[17]

Violence[71]

Post Traumatic Stress Disorder[11]

Organic brain syndrome[72]

Psychosis[73][74]

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Neuroleptic malignant syndrome like event[77][78] (rare)

Delirium tremens[79][80][81]

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