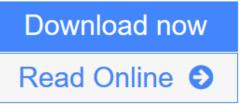


Unhinged: The Trouble with Psychiatry - A Doctor's Revelations about a Profession in Crisis

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IN THIS STIRRING AND BEAUTIFULLY WRITTEN WAKE-UP CALL, psychiatrist Daniel Carlat exposes deeply disturbing problems plaguing his profession, revealing the ways it has abandoned its essential purpose: to understand the mind, so that psychiatrists can heal mental illness and not just treat symptoms. As he did in his hard-hitting and widely read *New York Times Magazine* article "Dr. Drug Rep," and as he continues to do in his popular watchdog newsletter, *The Carlat Psychiatry Report*, he writes with bracing honesty about how psychiatry has so largely forsaken the practice of talk therapy for the seductive—and more lucrative—practice of simply prescribing drugs, with a host of deeply troubling consequences.

Psychiatrists have settled for treating symptoms rather than causes, embracing the apparent medical rigor of DSM diagnoses and prescription in place of learning the more challenging craft of therapeutic counseling, gaining only limited understanding of their patients' lives. Talk therapy takes time, whereas the fifteenminute "med check" allows for more patients and more insurance company reimbursement. Yet DSM diagnoses, he shows, are premised on a good deal less science than we would think.

Writing from an insider's perspective, with refreshing forthrightness about his own daily struggles as a practitioner, Dr. Carlat shares a wealth of stories from his own practice and those of others that demonstrate the glaring shortcomings of the standard fifteen-minute patient visit. He also reveals the dangers of rampant diagnoses of bipolar disorder, ADHD, and other "popular" psychiatric disorders, and exposes the risks of the cocktails of medications so many patients are put on. Especially disturbing are the terrible consequences of overprescription of drugs to children of ever younger ages. Taking us on a tour of the world of pharmaceutical marketing, he also reveals the inner workings of collusion between psychiatrists and drug companies.

Concluding with a road map for exactly how the profession should be reformed, *Unhinged* is vital reading for all those in treatment or considering it, as well as a stirring call to action for the large community of psychiatrists themselves. As physicians and drug companies continue to work together in disquieting and harmful ways, and as diagnoses—and misdiagnoses—of mental disorders skyrocket, it's essential that Dr. Carlat's bold call for reform is heeded.

Unhinged: The Trouble with Psychiatry - A Doctor's Revelations about a Profession in Crisis Details

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jen8998 says

Author reviews fairly familiar critiques of psychiatry today (i.e. overuse of antidepressants, little research basis for same, etc). He ends with the conclusion that psychotherapy is underutilized which is a point I very much agree with.

Eric_W says

Excellent review of this and three other books dealing with the crisis in psychiatry in the NYRB

Part 1: http://www.nybooks.com/articles/archi...

Part 2: http://www.nybooks.com/articles/archi...

Qwerty says

I feel that I learned a great deal about psychiatry from reading this book. Why do psychiatrists only spend 20 minutes with each patient? Insurance reimbursement answers that question. More importantly, the book describes how psychiatry differs from other medical fields insofar as the biological causes of mental illness are not well understood. The author notes that finding the right prescription "cocktail" for any individual patient is really a trial and error process that is unfortunately influenced by drug reps and hired gun doctors payed to push certain drugs over others.

This isn't a jeremiad against psychiatry or even the role of prescription drugs in treating mental illness, but rather a thoughtful and reasoned critique of the modern day practice of psychiatry. The author suggests that psychiatrists should incorporate traditional psychotherapies into their practices and also questions whether psychiatrists really need to be trained as medical doctors. I would especially recommend this book to anyone undergoing treatment or with family members in treatment.

Real Supergirl says

This book should be required reading for any mental health professional - therapists, nurses, psychologists, psychiatrists. I discovered Dr. Carlat via his blog, and the book gives a thorough analysis of the mental halth field and how it has "gone astray" in his words. It has become corrupted by pharm companies and the medical world, and gotten away from its roots, which is about healing people. I appreciate Dr. Carlat's frank and honest account, including of his own experience being a "hired gun" for the company that makes Effexor, until he started being too even-handed about his experiences with antidepressants (they all work about the same as each other and placebos, and we don't really know why they work when they do work)

Eva says

I think that if I were not myself a psychiatrist, and privy to much of the information Dr. Carlat is, as well as having had similar experiences, I might have found this book more engaging. As it was, it felt like reading a guidebook to your hometown written by a another townie who is equally aware of the terrain, the locals, and the pros and cons of the place. There was little in this book I hadn't already contemplated myself. I do take issue with the idea that all psychiatrists are on the same page, or should be, regarding attending medical school. I specifically choose to work with very medically ill/fragile patients, and collaborate with other physicians closely in their care. I am frequently ruling out medical contributors to diagnoses, performing neurological exams on patients, and check for drug-drug interactions. I am also interested in palliative care, and might consider working as a medical director of a hospice (which is a role a psychiatrist can take). Given all that, my view of what the role of a psychiatrist is and how to best train for that is decidedly different than Dr. Carlat's. Also, perhaps because he trained earlier than I did, he is more pessimistic than I am about the profession. I know physicians in my town who earn a reasonable living doing medication management and psychotherapy with one hour long visits, and I think residents at my training institution are trained to be highly skeptical of medical literature, as well as leery of linking themselves to Big Pharma (commonly regarded as selling your soul to industry). Many challenges await all fields of medicine at this juncture in our society, not just psychiatry. Anyway, an easy read and good food for thought.

Sandy says

Quick and informative read leaving me with a dilemma - how can I recommend to my son that he follow a career in psychiatry when the training lasts 12 years, 6 of which seem unnecessary and wasteful? And when the training is complete, psychotherapy is not a major part of the day because prescription writing is the only way to make a profitable living and pay for college loans! A conundrum.

Really enjoyed Carlat's simple explanation of transference and its usage in therapy, "The patient eventually brings his whole world into my office. It's not what he tells me that's so important-that's the least accurate information I have. It's how he treats me, and how he feels I'm treating him. I know how he acts with his girlfriend because he acts that way with me some of the time. And I know what goes on with his boss or his kids the same way...The well-known term for this is "transference" from the fact that the patient transfers habitual ways of perceiving people onto the person of the therapist. The height of the psychoanalyst's art is to be able to perceive transference, and then point it out to the patient in a nonthreatening and productive way. (p. 191). A psychiatrist with simple, coherent sentences - wonderful!

Now, the solution is to have psychiatrists spend less time being trained as surgeons and obs, etc. and have them learn more psychotherapeutic skills so they can offer medication and psychotherapy to their patients. An Excellent idea, but its coming is decades in the future.

David Teachout says

I'm not a psychiatrist, but I am a therapist and involved in integrated care so psychotropics are rather common. I wasn't so much surprised by the information here as I was impressed with the honesty and lack of alarmist language. Rather than calling out the doom of an industry, there was thoughtful critique and

recognition of layers being involved including a desire to help, personalities, politics and other social influences. The result is certainly not a resounding chorus of hallelujah, but as a starting point for reflection it's excellent.

Elaine says

In the U.S., there is growing concern that doctors are overprescribing medicine as the answer for patients with mental health and behavior problems. Feelings of sadness, behaviors like restlessness, which were once seen as normal aspects of being a human being, are now diagnosed as health problems like depression or attention deficit hyperactivity disorder, the argument goes, and treated away with prescription drugs.

Psychiatrist Daniel Carlat does not necessarily endorse this, but he does offer reasons from his own personal experience as a psychiatrist--as to why medications are so commonly prescribed and advances a compelling argument for a more holistic approach that emphasizes talk therapy equally if not more than medicine. Medication does work, Dr. Carlat says, but it should not be the only answer, and part of the reason why medication is so often prescribed is because of the commercial power of pharmaceutical companies and the reimbursement practices of insurance companies. Dr. Carlat says he and his colleagues are reimbursed better if they see patients for 15-minute medication management programs than 45-minute talk therapy programs-even though therapy works as well if not better than med management for treating depression.

Dr. Carlat gives us a firsthand account of his own experiences as a paid shill for a drug company, as well as a review of the evidence on what research says about the efficacy of psychiatric medication. He offers some very constructive suggestions for how to balance the system so that there is not an over-reliance on prescribing. He argues that psychiatrists should re-integrate talk therapy in their practices and talks about his own experiences struggling to help patients who he can only see for 15-minute medication sessions. This focus on his experience gives the reader a very tangible picture of what the problem is and what the solution could look like. To his credit, he does not dismiss psychologists, licensed social workers, and nurse practitioners but rather encourages psychiatrists to extend an olive branch to them.

What might surprise some people is how little is actually known about behavioral and psychiatric disorders compared to just about any other kind of health problem, like cardiovascular disease, cancer, asthma, etc. There is no clear scientific explanation for WHY antidepressants work either, which people might find hard to believe. This doesn't mean we shouldn't do anything if we do suffer from mental health problems or that they aren't real, it just means that we shouldn't trust anyone who promises a silver bullet for these complex issues. Really recommend this book for anyone who is wondering how to deal with a mental health issuetheir own or family and friends.

Noer says

This book is one psychiatrist's perspective on the industry, how it developed, where it is now, and how to proceed. Apparently there is a huge emphasis by most psychiatrists on prescribing medication as opposed to any form of real psychotherapy. No surprise there, since there's a lot of financial incentive for them to do so.

The main takeaway I got from this book is that the therapy industry is a business, like any other. And people love money. Another takeaway is that most people who go to therapy don't need any psychoactive drugs in

order to get mentally healthy. They just need to learn about their mind and learn useful strategies to deal with pain and suffering.

Sally says

A mainstream psychiatrist, Carlat gives an inside view of the many problems and pitfalls in current psychiatry. He emphasizes that the causes of psychiatric conditions are not understood, that the "chemical imbalance" theory is unconfirmed, that no one understands why psychological drugs work at all or why they work for one patient and not another, and admits that the choice of which drug to prescribe is largely arbitrary. He also makes plain the tremendous and unwholesome influence of drug companies on drug testing, doctors' prescription choices, overprescription, and the material published about treatments in the professional journals and newsletters, as well as the harm of the common practice of direct payments to psychiatrists to help promote a company's products to other doctors. He also comments on the role of insurance company reimbursement policies and psychiatrists' economic self-interest in promoting drug-oriented treatment that discourage other types of therapy or getting to know patients as people, and suggests how psychiatrists might deal with this situation constructively.

Terry Lynch says

As books written by mainstream psychiatrists go, this is one one of the best and most honest that I have read. Daniel Carlat has had the courage to express his major concerns about psychiatry. He has also discussed what he sees as his own inadequacies, that arise as a consequence of psychiatry's limited training. He acknowledges that he does not practice psychotherapy because he "cannot", ie, he doesnt really know how. He admits telling patients that antidepressants correct chemical imbalances not because he believes it, but because patients want to think their doctors know what they are doing. It seemed to me that Carlat really does this for his own benefit, not wanting to admit to his patients that, as he wrote, he really has no idea how these substances act in the brain.

The limited thinking characteristic of mainstream psychiatry surfaces frequently in the text. For example, he wonders, what else other that biology could cause psychiatric "illnesses". The very real possibility that a biologically-dominated understanding might not actually be necessary does not appear to strike him; all psychiatric diagnoses can be deeply understood - far deeper than through the medical lens - under the themes, trauma/woundedness; distress its many forms; defence mechanisms; and choice-making, which is influenced by the previous three.

Nevertheless, this is a worthwhile book, written by a psychiatrist courageous enough to speak his mind.

Doreen Petersen says

To me this was by far one of the better books written on mental health from a psychiatrist's perspective. It helped you understand what is good as well as what is lacking in the mental health field. Well worth checking out!

Bookworm007 says

Ok, so to be honest, I did not finish this book. I read a few chapters and it was written interestingly but I've heard these complaints about psychiatry before. I should have skipped ahead to the Solutions chapter before I returned it to the library but I hope it had some realistic ones. I get kind of annoyed when people point out the flaws in psychiatry without offering real solutions. It is a complicated field, trying to help people when we still have little knowledge of the source of mental illness. If there were no Solutions chapter I would have thought it was just a cheap way to make money while also instilling distrust in psychiatrists, which helps no one. So hopefully the Solutions chapter redeemed this book, otherwise, if you have studied psychology/psychiatry to any sort of length, you already know what this book is going to say.

Kaethe says

I don't want or need to read a book about the wonders of talk therapy. In my considered opinion, the idea that listening to what people say will tell you anything about how their brain is working is just as strange as checking the color of someone's blood to see how their heart is working.

Emily Crow says

Written by a practicing psychiatrist, *Unhinged* discusses many of the problems in that field, such as rampant marketing and deceptive information from drug companies, the limitations (and benefits) of the DSM, that few psychiatrists actually practice any form to talk therapy, etc. The book was well-written and engaging, and I liked the fact that the author isn't anti-medication (from his discussion, it sounds like he reaches for his prescription pad quite often), even when discussing what is problematic about psychiatric medications-namely, that we don't even know what causes mental health problems or the actual mechanisms by which these drugs work, if/when they do. I found that refreshing, as a lot of books on the topic take such an all-ornothing stance that it's hard to take them seriously.