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Humanistic Psychiatry Declaration

We, a doctor and a lawyer, have grave concerns about the damaging physical and mental health impacts of the prevailing biological paradigm in psychiatry. We recommend an approach we call humanistic psychiatry.

Humanistic psychiatry focuses on the patients' troubles, and on how they can best be helped, respecting their experiences, values, preferences, and autonomy. Coercion is not an option.

Biological psychiatry assumes that mental health issues are caused by abnormalities in the brain and that psychiatric drugs can help normalise these abnormalities. No reliable research exists in support of this idea.

Mental health issues are not medical issues, and psychiatry should not be seen as a medical specialty but as a humanistic enterprise.

Psychiatric diagnoses within the current biological paradigm are unreliable and the interobserver variation is high. They are based on symptoms, and a diagnosis is made when the number of diverse symptoms exceed an arbitrary number. The qualifying symptoms overlap for several diagnostic categories, and they also overlap with many of the adverse effects patients experience when treated with psychiatric drugs.

Therefore, many patients who come in contract with psychiatry end up with multiple diagnoses and drugs, which make it hard or impossible for them to come back to a normal life. This is aggravated by the fact that many drugs cause drug dependence, and it can be very difficult to come off them again.

The claimed positive effects of the major drug classes, e.g. drugs against depression and psychosis, have been shown in placebo-controlled trials to be considerably lower than what psychiatrists have determined are the least clinically relevant effects.

It is clear that the current widespread usage of psychiatric diagnoses and corresponding drugs is harmful. As just one example, in all countries where this relationship has been examined, the number of disability payments has increased when the usage of psychiatric drugs has increased.

It is very difficult, if not impossible, for patients to get rid of a psychiatric diagnosis, even when it was obviously wrong. This is stigmatising and can have substantial consequences, e.g. for job opportunities, custody of children in case of divorce, or for keeping a driver's licence.

In a humanistic psychiatry, the traditional diagnostic systems as described in DSM-5 and ICD-11 will not be used. Instead of labelling the patients, the focus will be on describing their problems and how they prevent them from living a full life.

Psychiatric drugs will be used very little or not at all. All patients will be offered - without delay, as they are offered psychiatric drugs without delay in the current system - psychosocial interventions such as psychotherapy that have better outcomes than drugs and are also cheaper in the long run. Electroshock will not be used, as the clinical benefit is doubtful, and its harms include death and irreversible memory loss.

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