

# Book Review

## **Deprescribing in Psychiatry**

*Swapnil Gupta, John Cahill and Rebecca Miller*

Oxford University Press, 2019, £32.99

ISBN: 978-0-19-065481-8

In their preface, the authors - three Assistant Professors from the Department of Psychiatry, Yale University School of Medicine - describe their approach to deprescribing psychiatric drugs. They want to offer a pragmatic starting point to stimulate and open a conversation between patient, prescriber, clinical team, friends and family. With this approach, they ignore the starting points for such a conversation published in the last quarter of a century about reducing and coming off psychiatric drugs. The authors see deprescribing as a process of shared decision-making - in other words, they overlook the fact that the main person who should decide about reducing and coming off psychiatric drugs is the patient whose human right of bodily integrity, under which the intake of psychiatric drugs falls, is indivisible. The UN convention on human rights supports this position. Further on, the authors accept the common biopsychosocial approach of drug treatment as a rational entity, which means they accept the mainstream-understanding of emotional distress in humans as a basic biological problem. The primary target of the authors is "overmedicalization",

not unwanted medicalization. It is not to show how to support patients who want help with full withdrawal of psychiatric drugs, but to ensure minimum-effective dosing of psychiatric drugs combined with therapeutic measures. I note these restrictions to protect the readers critical of psychiatry from disappointment.

To understand and appreciate the position of the authors and their approach, it is important to know their background. They reach their conclusions from geriatric practice, where it is known that, over the years, elderly people are prescribed and administered masses of drugs without considering which substances are better to discontinue after surviving problems and crises. One author, Swapnil Gupta, was educated in India - a country where psychiatric drug combinations are administered unrestrainedly, for example absurd combinations such as Dep 37 or Depof 37, which contain the neuroleptic trifluoperazine, the antidepressant imipramine, the benzodiazepine-tranquilizer chlordiazepoxide and the antiparkinsonian trihexyphenidyl. India is no exception; mainstream psychiatrists worldwide are administering massive combinations of psychiatric substances. In this respect - despite the criticism mentioned above - Deprescribing in Psychiatry is of great importance to mainstream psychiatrists worldwide. Here,

representatives of mainstream psychiatry argue that their colleagues should reduce prescriptions, they name anxieties of patients that oppose a reduction, they name withdrawal and discontinuation symptoms that make a reduction difficult, they name wellness supports that may be suggested by the prescriber but are essentially put in place by the patient to support a deprescribing process that improves the chances of success for the reduction.

In the practical part “The Intervention of Deprescribing” the authors recommend alternative strategies which might prevent or best manage an eventual increase in distress. They refer to the Wellness Recovery Action Plan (WRAP) (see, this issue) with the person’s own identified toolbox of self-management and nonpharmaceutical self-care strategies. They also recommend advance directives (although strangely, as an example, they mention psychiatric drugs and even electroshock as preferences in crises, but not their denial of human rights and prevention of additional burdens). Exercise, family support, various forms of psychotherapy, treatment of insomnia, peer support and online resources are other potential aspects of wellness strategies. Also, acceptance and commitment therapy is mentioned in this frame, but without considering the important risk factors for bodily dependence from psychiatric drugs when accepted by the patient for a longer period and for chronic diseases due to the drugs’ effects.

The section “The Process of Deprescribing” mainly deals with a seven-

step structured intervention for optimizing the collaborative reduction of psychiatric drugs. Step 1 is Assess the Timing and Context, step 2 Medication Reconciliation, step 3 Exploration of the Patient’s Experience, Attitudes, and Meaning About Medication, step 4 Frame Setting for the Deprescribing Intervention, step 5 Decision Which Medication to Deprescribe, step 6 Development of the Specific Deprescribing Plan, and step 7 Implementation, Monitoring and Adjustment of the Plan. In their last chapters, the authors consider special aspects in relation to antidepressants, neuroleptics, mood stabilizers, benzodiazepine-tranquilizers and Z-drugs, and psychostimulants. Using examples, the authors show procedures when patients want to reduce or discontinue psychiatric drugs: switching to other psychiatric drugs, psychoeducation (convincing patients that a relapse is imminent when they stop taking psychiatric drugs), discussion of the desire to stop, further discussion to reach a decision that both doctor and patient can agree on. Being under the influence of personality-altering and attenuating substances while having to convince their doctors is certainly not an optimal starting point for meeting a person’s wishes for a reduction in psychiatric drugs. However, this is the sad reality, unless the patients take the initiative and go ahead on their own.

Despite or rather because of the disastrous prescription practice in mainstream psychiatry and even more so because of its reserved, moderate style of argumentation, and with the above concerns, I can recommend the book as a

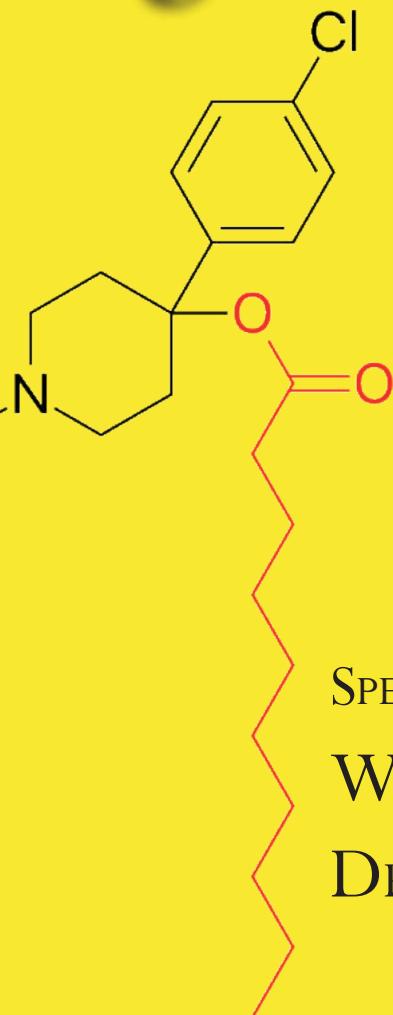
step in the right direction for psychiatrists.  
Especially for prescribers of psychiatric  
drugs.

**Peter Lehmann**

# JCP CP

**The Journal of Critical Psychology,  
Counselling and Psychotherapy**

Volume 20, Number 4, Winter 2020



**SPECIAL EDITION:  
WITHDRAWAL FROM PRESCRIBED  
DRUGS**

# The Journal of Critical Psychology, Counselling and Psychotherapy

Volume 20, Number 4, Winter 2020

## Special Edition: Withdrawal from Prescribed Drugs

*Edited by Peter Lehmann*

Dr. Caligari reflects back and looks forward <i>David L. Richman M.D.</i>	7
The patient voice: Antidepressant withdrawal, medically unexplained symptoms and functional neurological disorders <i>Marion Brown and Stevie Lewis</i>	14
Highlighting individuality requires tailored prescribing during recovery <i>Jann E. Schlimme and Michael A. Schwartz</i>	21
Minimum dosage and monitoring of neuroleptics <i>Volkmar Aderhold</i>	31
The Observatory for Mental Health Rights: Cooperative support in withdrawal <i>Anna Emmanouelidou</i>	51
Attitudes of researchers about discontinuation of psychopharmacological treatment <i>Fernando Freitas, Fábio Mota, Luiza Amara Maciel Braga and Camila Motta</i>	55
Discontinuing psychotropic drugs? And if so, how? <i>Volkmar Aderhold, Peter Lehmann, Marc Rufer and Josef Zehentbauer</i>	66
Using the Wellness Recovery Action Plan to withdraw from psychiatric medications <i>Mary Ellen Copeland</i>	76
Do antipsychotics reduce the risk of relapse? <i>Robert Whitaker</i>	87
The prospect of recovering compensation for psychiatric withdrawal harm through litigation because of missing or misleading information <i>James B. Gottstein</i>	98
And finally atypically careful <i>Susanne Cortez</i>	107
Book Review	112

**Edited by Craig Newnes (craignewnes76@gmail.com)**

**Editorial Board**

Jacob van Belzen, Amsterdam, Holland  
Abigail Bray, Lamalou-les-Bains, France  
Erica Burman, Manchester, UK  
Jan Burns, Southborough, UK  
Catherine Butler, Bath, UK  
David Fryer, Brisbane, Australia  
Laura Golding, Liverpool, UK  
Peter Kinderman, Liverpool, UK  
Peter Lehmann, Berlin, Germany  
Lyn Mahboub, Perth, Australia  
Annie Mitchell, Plymouth, UK  
Nimisha Patel, London, UK  
Dave Pilgrim, Southampton, UK  
Sim Roy-Chowdhury, London, UK  
Janet Sayers, Canterbury, UK  
Biza Stenfert Kroese, Birmingham, UK  
Sara Tai, Manchester, UK  
Lauren Tenney, New York, USA  
Keith Tudor, Auckland, New Zealand  
Dwight Turner, London, UK  
Carl Walker, Brighton, UK

**Production Editor**

Ben Donner

**Book Review Editor**

Anne Cooke, Clinical Psychology Training Scheme, Salomons Centre, Broomhill Road, Southborough, Tunbridge Wells, Kent, TN3 0TG, UK. Please contact Anne if you wish to review books. Books for review should be sent directly to Anne (anne.cooke@canterbury.ac.uk).

**Aims and Scope**

JCPCP is a peer-reviewed journal which values personal experience above professional boundaries and doctrinal jargon. It provides a forum for ideas, experience and views of people working in the psychological world and those who use psychotherapy or receive psychiatric services. The journal encourages a critical, reflexive view of psychology and counselling and is a constant challenge to orthodoxy. Our contributors reflect on their work and experiences in therapy, in relationships and in institutions. The journal embraces philosophical, radical and scientific perspectives in its analysis of psychological, psychiatric and psychotherapeutic systems. With a following wind, it will sometimes make you laugh out loud.

**Contributions**

Critiques, in the form of short articles and letters on any aspect of psychological or psychotherapeutic theory or practice, are always welcome. They will be peer reviewed. Articles should not normally exceed 4,000 words. Brief author details, key words and a short abstract should be included. All submissions should be in Microsoft Word format. Full guidelines are available from the Editor directly or via the website. All

previous contributors can be contacted through the editor, Craig Newnes. **Please submit all material to the editor directly via email ([craignewnes76@gmail.com](mailto:craignewnes76@gmail.com)).**

#### **Disclaimer**

Statements and opinions expressed in the articles and communications are those of the individual contributors and not the statements and opinions of the editor or Egalitarian Publishing Ltd. Egalitarian Publishing Ltd expressly disclaims any implied warranties of merchantability or fitness for a particular purpose. If expert assistance is required, the services of a competent professional, or a good friend, should be sought.

#### **How to subscribe**

For more information on how to subscribe, please go to: [egalitarianpublishing.com/JCPCP/howtosubscribe.html](http://egalitarianpublishing.com/JCPCP/howtosubscribe.html)

Rates stated below are for four issues of JCPCP. The print and digital subscription includes free postage worldwide:

Personal (Print and Digital): 50 GBP

Personal (Digital only): 20 GBP

Organisational: Please contact us

Please note that a subscription also includes full text access to JCPCP's recent back catalogue. Please contact the editor for access to individual print copies of previous issues.

#### **Production Information**

JCPCP is printed and bound by Lemonade Print Group, Edward House, Marchants Way, Shedingdean Business Park, Burgess Hill, West Sussex, RH15 8QY. The Journal uses *Perpetua* Font type.

#### **Advertising**

We do not generally advocate advertising. Please contact the editor directly for any queries relating to this.

#### **Back Issues**

We will provide free access to full text papers published in JCPCP (2015 and older), for anyone with an internet connection via the link:

[egalitarianpublishing.com/JCPCP/issuenavigation.html](http://egalitarianpublishing.com/JCPCP/issuenavigation.html)

We will also provide abstracts for issues post 2015 and a search function (in development) for all published papers in JCPCP here: [egalitarianpublishing.com/JCPCP/search.html](http://egalitarianpublishing.com/JCPCP/search.html).

Please note, the back issue facility is a work in progress so do contact us directly for more information.

#### **Copyright**

The copyright for the written text in articles and reviews lies with the authors. Should you wish to use text from these, please contact the author direct or via the editor of JCPCP, Craig Newnes.

The copyright for the typeset version of the text as published in the journal volume lies with Egalitarian Publishing Ltd.

Authors are free to use the JCPCP version of their text as they please. This includes uploading the paper to web repositories. Should anyone else wish to use the JCPCP version of a paper, they should seek permission from the editor of JCPCP and the author of the paper in the first instance.

#### **Contact for all queries**

Craig Newnes, Editor of JCPCP  
[craignewnes76@gmail.com](mailto:craignewnes76@gmail.com)

JCPCP (ISSN 1471-7646) is published in the UK by Egalitarian Publishing Ltd. Company number 12501497.

# **JCPCP is seeking submissions on all matters psy**



We would especially welcome critical pieces including service-related research, doctoral theses, literature reviews, book reviews and reflective articles.

Critiques of orthodoxy and institutions  
particularly welcomed.

**Unlike other academic publications,  
authors retain full copyright**

*Please see [egalitarianpublishing.com/jcpcp.html](http://egalitarianpublishing.com/jcpcp.html) for more information about the submissions process or email the Editor direct: [craignewnes76@gmail.com](mailto:craignewnes76@gmail.com)*