

be thought to merit attention. For instance, there is a great reported difference between richer and poorer countries in mode of onset. Whereas only 28 per cent of subjects in the richer countries have a sudden, precipitous onset, the corresponding figure for the poorer countries is 51 per cent. The reverse is the case for "insidious" onset. This in itself would warrant a cautionary approach to the "uniformity" argument.

Also relevant, and overlooked, are the differences in reported "symptoms" in richer and poorer countries. The most commonly reported "symptom" in poor countries was "a voice speaking to the subject", reported in over half the cases. Yet this particular phenomenon did not even appear in the symptom top-ten for richer countries. Visual hallucinations (36 per cent) were frequent in poorer countries, but were not ranked highly in richer countries. In contrast, "depressed mood" (56 per cent) was the second most frequently reported in richer countries, but seemingly insignificant in poorer countries.

Could it just be that in spite of standardized assessment and assessors trained in the ways of the dominant psychiatric cultures of the richer countries, we are really seeing different phenomena in the two worlds? This possibility is not even entertained, but I have an uneasy feeling that if it were it could be reasoned away as follows: "There are differences in presentation; world regions have different genetic make-ups; therefore the differences are genetic".

This therefore is a study whose conclusions bear little relation to its findings. To derive conclusions from this data about the genetic basis of disordered conduct is about as valid as concluding that there is a gene for market-force philosophy because there's a lot of it around in the world. This is a study well worth the effort of fine combing, not because there is much to be learned about disordered conduct, but to have the opportunity to see for oneself just how little substance there can be in what becomes accepted as conventional wisdom.

Der Chemische Knebel (The Chemical Gag, why psychiatrist's give neuroleptics) by Peter Lehmann

Phoenix Rising, a Canadian Voice of the Psychiatrized, published the following comments on Peter Lehmann's book

From asthma to "schizophrenia", from bed-wetting to "neurosis", from skin-irritation to depression, there is scarcely a diagnosis that cannot result in the application of neuroleptics (including Haldol, Stelazine, Thorazine, Chlorpromazine, Modecate and many others).

Peter Lehmann's new book, the Chemical Gag - Why Psychiatrists Give Neuroleptics, is based on unpublished investigations conducted by psychiatrists and by companies that manufacture neuroleptics. His years of research have resulted in a vividly-written book that allows non-physicians to comprehend how neuroleptics work by paralyzing the transmission of nerve impulses. The book also details the severe physical, mental and psychic dam-

age caused by neuroleptics, which include parkinsonism (shaking palsy), disorders of the brain rhythm and of the hormonal glands, fatigue, apathy and confusion - even when neuroleptics are used briefly, and in low doses.

Lehmann shows that these "secondary effects" are in reality the main effects desired by psychiatrists, and argues that neuroleptics are poisonous agents, the use of which should be stopped immediately. Lehmann draws comparisons between the older psychiatric practices of sterilization (common during the German fascist dictatorship, and before) and the sterilizing effect of long-acting neuroleptics, and also between the mental and psychic consequences of lobotomy (surgical brain-mutilation) and those of neuroleptic treatment.

The book's extensive supplement includes an itemized catalogue of both North American and European neuroleptics, concrete proposals for a system of humane assistance to replace psychiatric treatment, an inventory of more than 150 shocking photographs of psychiatric practices, and an exhaustive reference list of essential research works. There is also a chapter especially dedicated to withdrawal from neuroleptics.

Do you know what malformations were found in babies of mothers treated with neuroleptics during pregnancy?

Do you know that neuroleptic-induced damage develops after even the shortest treatment, and regardless of dosage?

Do you know why neuroleptics can drive people into a state of despair and, especially together with certain external life-circumstances, even to suicide?

Do you know that psychiatrists are researching the possibility of implanting deposits of neuroleptics into people's internal organs to secure long-term, or even lifelong treatment?

If you are interested in these questions and understand some German, you should read the Chemical Gag - Why Psychiatrists give Neuroleptics (Der Chemische Knebel - Warum Psychiater Neuroleptika verabreichen). This hardcover book, 448 pages long, was published in Berlin in 1986 by Peter Lehmann Antipsychiatrieverlag, and costs DM 29,80. Your local bookstore can order The Chemical Gag by contacting Rotation at 1000 Berlin-West or at Sale, Mehringdamm 51. Or you can order it directly from the author (free of extra postal charges), by sending DM 29,80 to the Peter Lehmann Antipsychiatrieverlag Berlin, Postgironkonto 8929-104 Berlin (clearly indicating your address).

The most ambitious work which certainly deserves translation is "Statt Psychiatrie". (Instead of Psychiatry). A third of the book was written in English anyway and is itself therefore a translation. In our last edition we did draw attention to this internationally organized contribution to the debate between classical and antipsychiatry.

Two other books are both very interesting. I certainly thought this is true of *Teure Verstandnislosigkeit - Die Sprache der Verrucktheit und die Entgegnung der Psychiatrie* (Costly lack of understanding - The language of Madness and the response of psychiatry). The book in Kerstin Kempker's own words asks "What drives people mad? What's the reason why other people don't go mad? I am particularly interested in the second question less frequently asked". Kerstin Kempker illustrates psychiatrists' discourse at the points of contact with madmen,

their limit setting behaviour despite the border crossing behaviour of the mad. She metaphorically uses collage to allow the literary, philosophical psychiatric and antipsychiatric worlds to clash before our eyes. Those worlds are too often hermetically sealed. The voices from literature alone (Ingeborg Buchmann, Antonin Artaud, Sylvia Plath, Unica Zuern, Robert Walser, etc.) skillfully present unachronistic observations, perceptions and manifestations, experienced at a price but having nothing to do with illness. The price to be paid for madness is at least the risk of psychiatrisation, and the loss of the generally understandable language with which to communicate. The cost of adaptation though is one's own identity.

Peter Lehmann's press wrote: "The opponents in this book are not "the bad psychiatrists" and "the poor socially damaged victims", but - much more exciting - the psychiatric logic and the mad obstinacy. "Dear incomprehension, to you finally I shall owe being myself." This quotation of Samuel Beckett's "The Nameless" provided the title of the carefully designed book, and Kerstin Kempker recapitulates: As a dear good and a great value - the mad, the fool, the misunderstood doesn't want to be understood by everyone, at all costs. For proper reasons it is on its guard".

The text includes statements of inmates of mad-houses and of Franca Basaglia-Ongaro, David Cooper, Michel Foucault, Erving Goffman, Ronald D Laing, Thomas S Szasz and Paul Watzlawick, among others. It provokes lateral thinking and questions common sense; it doesn't want to deliver answers.