

Editorial

Schizophrenic Patients: A Historical View

Are chronic schizophrenic patients better off today than they were in 1950? Read the *New York Times* report for April 28, 2002, the Sunday Edition and decide for yourself. In my opinion they are no better off, in fact, they are probably worse off because so many live in the “modern mental wards” which are the community, its streets, run down homes and other inadequate care facilities. The pictures that accompany this report remind me of what I saw in 1950 when I first began to work in mental hospitals, which were totally degrading, inhuman, over-crowded, inadequately staffed and the only treatment provided—the only treatment available—was shelter, food and some care from nurses and a few doctors. The shelter could not possibly have been therapeutic, the food was probably as good as it is today with its major emphasis on the cheap carbohydrates and the care was minimal. It was so minimal in fact that in Weyburn, Saskatchewan, where Dr. Osmond took over as Superintendent, a thorough survey of the patients revealed that there were a number that should never have been admitted and a number that had recovered spontaneously and should have been discharged. These hospitals had only one main advantage: they did keep the patients off the streets which protected the communities from the hazards of chronic psychotic patients wandering about and they did provide a minimum amount of nursing and medical care. The discharge rate in 1950 was almost zero. An admission to any mental hospital in 1950 was a life sentence.

Modern psychiatric care provides inadequate shelter. When admitted to decent wards in hospital it is only for short periods of time, not enough time for patients to benefit from the improved shelter. The food is no better than it was and maybe worse due to modern food technology. Care is minimal since patients are kept in these institutions for short periods of time, just

long enough to pump them up with the modern tranquilizing addictive drugs. They are not treated with respect or human dignity, but the medication permits them to be discharged to the community and the streets. These drugs were not available in 1950 and hospitals could not discharge patients who were still psychotic. The modern drugs are a mixed blessing since they are effective in controlling psychotic behavior but are not effective in restoring to full health these unfortunate patients.

The discharge rate in 1850 in the best hospitals was close to 50%. Today, with modern medication the discharge rate is almost 100% but the recovery rate is certainly less than 10%. By recovery I mean freedom from symptoms, ability to get on well with the community and family, and ability to work, to pay income tax. The report in the *New York Times* is very complete and details the suicides, the homicides and other causes of the increased death rate, such as appendicitis, and excessive heat and cold during weather changes. The report states “The analysis shows that some residents died roasting in their rooms during heat waves.” Psychiatric drugs reduce the sensitivity to heat and the ability to sweat. There was no air conditioning.

In New York, about 15,000 mentally ill patients live in more than 100 adult homes. Some of these homes are larger than most psychiatric hospitals in the United States. State investigators describe these homes as flophouses. In one of these homes, a resident patient was put in charge of the entire institution one evening. That reminds me of the mental hospital in Weyburn, when a patient eventually became the superintendent of that hospital. One worker described these homes as no more than warehouses. Yet the amount of money spent works out to \$40,000 per patient per year, or \$600 million for the State of New York.

There is a solution to this problem. In 2000, the treatment of the schizophrenic

patients could have been superb if the psychiatric profession had adopted the practices and principles of orthomolecular psychiatry. The flow of acute patients in to the ranks of the chronic patients would have been substantially decreased, the hospitals could have been slowly renovated with the need for fewer beds, the communities would not have been damaged and families of these patients would not have had to suffer as they have with the present situation. I have not even mentioned the intense suffering and degradation of these unfortunate patients caught in the web of modern psychiatry.

The *New York Times* report blames the

state for the situation and it does deserve a lot of blame. But the report does not say anything about the quality of treatment that the state psychiatrists have been providing with their modern drugs. Perhaps New York ought to learn about King County in the state of Washington, which has legislated accountability for psychiatry. For until psychiatrists are made accountable for the lack of improvement of their patients, they will have no incentive to seek treatments that work, and will continue to depend upon the drugs whose company's advertisements fill more than half the pages of all the modern psychiatric and medical journals, except of course, this one.