



NETWORK AGAINST PSYCHIATRIC ASSAULT

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Professor Eli Wiesel
Andrew W. Mellon Professor of Humanities
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745 Commonwealth Ave.
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Dear Professor Wiesel:

The Network Against Psychiatric Assault is part of the psychiatric inmates liberation movement. I am writing you on behalf of seven members of this movement, myself included, who are scheduled to participate in the American Psychiatric Association's Annual Meeting in Dallas, May 20-24.

We very recently found out that you will be speaking at this meeting on May 22 and want to bring to your attention in advance some of the concerns we have about psychiatry, its nature and practice.

We, ourselves, are certainly going to present, discuss and debate these concerns at the meeting. Regarding you as a natural ally in the struggle against all forms of inhumanity, we invite you to join us as an active opponent of psychiatric inhumanity.

I refer here to psychiatry's long and continuing history of controlling and torturing people in the name of "curing" them of "mental illness."

The practice of incarcerating people labeled insane goes back at least 400 years. Psychiatrists have subjected these people to various techniques from what they themselves sometimes speak of as their "armamentarium." Until recent times, these methods included bloodletting, blistering, the "gyrator" (a chair that would spin its hapless occupant around at 100 revolutions per minute in order to induce vomiting and terror), the "surprise bath," hosing, hysterectomy, ice packs, and a host of misery-inducing drugs.

Over the last several decades, psychiatrists have developed new and more sophisticated forms of punishment, some of which are even more terrorizing and damaging than the older techniques. Psychoactive drugs, shock, and psychosurgery make up the psychiatric trinity of modern "treatments." These methods have caused the deaths of many thousands of individuals. Moreover, there are literally tens of millions of people whose quality of life has been significantly reduced as a direct result of brain and other neurologic damage suffered from these procedures.

For instance, one category of psychoactive drug, the neuroleptics (such as Haldol, Prolixin, and Thorazine), produces a neurological disorder called tardive dyskinesia in 20 to 70 percent of regular users. This muscle disorder manifests itself in grotesque, continuous, rhythmical movements, usually involving the face, mouth, tongue, neck and/or extremities. It is an extremely disabling condition for which there is no treatment. Nonetheless, the vast majority of psychiatrists pass off tardive dyskinesia as a small price to pay for the supposed benefits of these drugs. In our view, the only "benefit" these drugs have is to make those who take or are forced to take them easier to control. A psychiatrist who disagrees with the prevailing view among his colleagues is Peter Breggin, M.D. In his 1983 book, PSYCHIATRIC DRUGS: HAZARDS TO THE BRAIN, he wrote:

"Psychiatry has unleashed an epidemic of neurologic disease on the world. Even if tardive dyskinesia were the only permanent disability produced by these drugs, by itself, this would be among the worst medically-induced disasters in history."

The case against electroshock, also known as electroconvulsive therapy or ECT, is at least as compelling. Neurological reports, brain wave studies, clinical observations, and autopsy studies demonstrate that electroshock disables the brain. But one doesn't have to have a medical degree to know the inherent destructiveness of passing 150 volts of electricity through the human brain. This should be clear to anyone with a modicum of common sense. After all, the same amount of current used to produce a seizure in ECT would be fatal if applied directly to the heart.

The strongest arguments against electroshock, however, come from those who have experienced it. I've been electroshocked myself. I've also spoken and corresponded with hundreds of other ECT survivors. There is practically universal agreement among us that electroshock produces memory loss, learning disability, loss of creativity, debilitation, pain, fear and humiliation. These effects are often severe and lasting, facts which psychiatrists consistently deny. These effects are also evidence of brain damage, another fact psychiatrists deny. But corroboration of this position sometimes comes from surprising places. For instance, these are the words spoken at a 1948 conference by a leading ECT proponent, Paul Hoch, M.D., a former director of New York State's Department of Mental Hygiene:

"This brings us for a moment to a discussion of the brain damage produced by electroshock....Is a certain amount of brain damage not necessary in this type of treatment. Frontal lobotomy indicates that improvement takes place by a definite damage of certain parts of the brain."

Incredibly enough, lobotomy itself is still in current use. It is one of a number of psychosurgical procedures introduced since the mid-thirties. Most people believe that psychiatrists long ago abandoned these clearly brain-mutilating procedures. But in its December 1982 issue the AMERICAN JOURNAL OF PSYCHIATRY, the "Official Journal of the American Psychiatric Association," published an article titled "Modified Leukotomy [another term for lobotomy] in the Treatment of Intractable Obsessional Neurosis." In their concluding paragraph, the authors wrote:

"Our experience with psychosurgery has not shown it to be a 'mutilation of the brain and the mind,' as suggested by some opponents, but rather a safe and effective treatment for an obsessional neurosis that has become debilitating."

Our concerns are not limited to psychiatry's use of psychoactive drugs, electroshock, psychosurgery, and other techniques like solitary confinement, mechanical restraints, and "behavior modification." We are also concerned about the circumstances in which people are subjected to these procedures. Both in and out of institutions, psychiatrists rarely obtain genuine informed consent from their subjects. Moreover, the inherent coerciveness of locked psychiatric facilities makes a mockery of the very notion of informed consent. Psychiatric inmates know only too well that their refusal to accept "treatment" may be used against them to justify the "diagnosis" of a more severe "mental disorder." This in turn often leads to even more intensive treatment than had been originally proposed. In addition, the use of blatant force is still commonplace in psychiatry. The practice of staff members wrestling inmates to the ground and injecting them with powerful mind-controlling drugs is not just something out of a 1940s film. That practice is a reality in hundreds of psychiatric facilities throughout the United States today.

And all of this is going on with the support of the American Psychiatric Association.

To bring home to you our charges against psychiatry, let me remind you of the role psychiatrists played in the Holocaust. It is well established that psychiatrists in Germany's state hospitals developed the techniques of mass killing that were used later in the death camps, although nothing of this subject is mentioned in any psychiatric history book. The first gassings took place in these hospitals in 1939. And the first victims were psychiatric inmates. It was all part of psychiatry's "euthanasia" program for those labeled mentally ill and retarded. The program ended in 1945, sometime after Germany surrendered, but not before psychiatrists gassed, beat, starved and drugged to death 270,000 institutionalized people. It was the psychiatrists who did the "selections" at the state hospitals. Later, with their medical colleagues, they made the selections in the death camps.

It was from the psychiatrists that the infamous Dr. Josef Mengele and his accomplices got the idea of electroshocking Auschwitz inmates. In a March 6th NEW YORK TIMES op-ed essay Ernest W. Michel, chairman of the 1981 world gathering of Jewish Holocaust survivors in Jerusalem, told about the use at Auschwitz of "electric-shock experimentation" on "six to eight women in various states of despair." As an inmate assigned to Dr. Mengele's prison hospital, Mr. Michel was ordered to escort these women from a truck to the barrack, during the course of which he saw Dr. Mengele with several other SS officers. When he returned to bring the women back to the truck, he saw one woman still connected to "an electrical machine." Two others were dead, two in coma, and two breathing irregularly. Mr. Michel wrote, "the teeth of those still alive were clenched and...wads of papers were placed in their mouths."

Psychiatric ideology and Nazi ideology stem from the same root. The Nazis had the Jews as their scapegoats. The psychiatrists have those labeled "mentally ill" as theirs. In the victimizer's mind, the victim's label justifies any treatment, no matter how dehumanizing and barbaric.

Thomas Szasz, M.D., professor of psychiatry at the Upstate Medical Center of the State University of New York in Syracuse, is an Hungarian-born American who came here in 1938. In a 1969 interview, he spoke with understanding on this subject:

"'Schizophrenia' is a strategic label, like 'Jew' was in Nazi Germany. If you want to exclude people from the social order, you must justify this to others, but especially to yourself. So you invent a justificatory rhetoric. That's what the really nasty psychiatric words are all about: they are justificatory rhetoric, labeling a package 'garbage': it means: 'take it away!' 'get it out of my sight!' etc. That's what the word 'Jew' meant in Nazi Germany; it did not mean a person with a certain kind of religious belief. It meant 'vermin,' 'gas him!' I am afraid that 'schizophrenia' and 'sociopathic personality'; and many other psychiatric diagnostic terms mean exactly the same thing; they mean 'human garbage,' 'take him away!' 'get him out of my sight!'"

We are asking you to address these issues in your talk at this year's APA Annual Meeting. Your speaking out could make a major difference for those who are or who in the future may be incarcerated in a psychiatric facility.

Most of our APA-Meeting contingent will have arrived in Dallas by Monday evening. We are staying at the Downtown Holiday Inn. We would welcome the chance to discuss these and related issues with you anytime during your stay in Dallas, preferably before your Wednesday morning talk.

What benefit can we derive from remembering the inhumanities of the past, if we fail to recognize and take action against those of the present?

Sincerely yours,



Leonard Roy Frank

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WIESEL/FRANK ENCOUNTER

Author Eli Wiesel, chairman of the U.S. President's Commission on the Holocaust, addressed more than 1000 members and guests of the American Psychiatric Association at its Annual Meeting in Dallas on May 22, 1985. In his talk, which was entitled "Temptation of Madness," he made this statement:

"There are systems in the world that turn your vocation into an offense. When they use psychiatry to torture free human spirits, to mutilate their soul, and to imprison their imagination, and to curtail their life and the freedom of that life, you cannot but protest, and protest vigorously, with whatever means you have at your disposal. Whether it is in Russia or in other right-wing fascist countries, we have learned one thing today, that torture and torment are no longer limited to one system. It is on both extremes of the social and political rainbow."

Professor Wiesel made these concluding remarks:

"The enemy is not evil for evil has a name, and evil has a function, and evil has an identity. The enemy for you, as well as for me, is the indifference in the other person. You cannot do anything with her or with him, and therefore your task and mine is to fight that indifference. And if you do...one day the ice will break and you will begin to smile...and then you will shake yourself and the shadows will fall away from you as the fever leaves a sick person."

During the question and comment period following his lecture, this exchange took place between Professor Wiesel and Leonard Roy Frank, a psychiatric inmates' rights activist.

FRANK: My name is Leonard Roy Frank. I'm from San Francisco, California. I recently wrote you a letter regarding this American Psychiatric Association conference. I myself am a former psychiatric inmate, and I'm here representing and working with a number of former psychiatric inmates. I heard you say that they use torture on the souls of political dissidents in the Soviet Union, and you admitted also that there is torture going on by psychiatric means in right-wing countries. I wanted to, to have your comment on the use of torture, psychiatric torture, in the form of psychiatric drugging without the consent of the individual, holding people down and assaulting them with these very, very powerful mind-control drugs that affect people in the United States of America the very same way that they do in the Soviet Union and in eastern Europe. That right here in the United State of America there are 100,000 people every year who are being assaulted with electroshock. You spoke about memory and the importance of memory, and we know from our Jewish background that the very secret of redemption lies in memory. What do you think electroshock does to human memory? How does it reduce their chances of redemption? That these psychiatrists are using on people indiscriminantly and in violation of their most essential human rights. Now...

MODERATOR: Would, would you...

FRANK: Just a second, I'm going to finish this...

MODERATOR: Would you give Professor Wiesel a chance to answer you question?

FRANK: Yes, but I want to conclude with this comment. I heard you very eloquently reproach President Reagan for visiting Bitburg for what that represented, because that is the graveyard of the dead SS. How can I feel as a former psychiatric inmate, who was personally assaulted with electroshock and drugs, when you come here to this convention and you lightly touch upon the German "euthanasia" program, German psychiatry's euthanasia program, and [at this point Frank began speaking in an increasingly loud voice and with much feeling] fail to reproach these psychiatrists for their ongoing crimes. These people are the living SS. But what are you doing? You're just here to tell them nice little stories. What about the suffering human beings, the millions of us who've had to endure their tortures? Who will speak for us?

MODERATOR: Okay, if you could give...

FRANK: I would just like a comment from Professor Wiesel.

MODERATOR: Yes, [to Professor Wiesel] do you want to comment on that?

WIESEL: Sure, I got your letter. I read it. If I were a psychiatrist, I think I surely would have spoken intelligently about it. But it's not, I don't know. If I don't know, how can I speak? I think you should speak, and you speak very eloquently. What do I know about electroshock? I never, I've never seen it. I believe you, and I think the question that you are raising, that's why I, I, I touched on it in, in as humanly as I can without trespassing the authority, which is not mine. I do believe...

FRANK: What authority do you need? You're a human being.

WIESEL: I, I cannot...

FRANK: What authority do you need to speak on these subjects?...

WIESEL: To know, knowledge...

FRANK: These horrors are going on...

WIESEL: I don't have the knowledge...

FRANK: Why don't...

WIESEL: I have no authority...

FRANK: Why don't you consult, why don't you consult? Don't you have a responsibility to find out. Here you are addressing...

WIESEL: Sir, I am, I am ready to... [many shouts of "no, no" from the audience, in response to Frank's previous comment]. No listen. I am ready to listen. I am ready to listen. But this is, this, what you are asking, the question that you are asking you are asking your friends, not me. I can only tell you that if I know, if I were a psychiatrist, I can swear to you that I would do whatever I can to, to study and to see what is happening, and, if it's true what you say, I would surely protest. What do you, I cannot believe that there are here people that you call SS, that I heard what I what you say. I cannot believe that.

Because even if what you say is true... [applause]... I cannot believe that... [loud applause]. If I, I, again, I am not a psychiatrist and therefore cannot answer you. Only I can tell you, I try to be responsible with my words, and to call an, an assembly of people who I am convinced are trying to help the best they can. Even if you say they're methods are wrong, what do I know? I, I'm ready to study it, but to call them SS, my God, that means there is such a corruption of language that we better study the phenomenon, why such corruption occurs... [applause]. No, I, I am not trying to put you down, I hope you believe me. I simply explain to you my ignorance. If I knew more, I would surely take sides on it, but I do not know. You must ask, you must ask your colleagues, I am sure you will have a session here. If not, you should have a session. You must have a session here and have your accusations come out and then professional psychiatrists, and probably, I, I also received a letter, a moving letter, from a man who, whose books I've read, but I don't know much about it, Thomas Szasz. And he wrote the same thing that you say. Again, that means that the problem exists, and all I, as a man who is not part of it, can ask all of you is to have an open debate and go to the depths of the accusations and see whether it is true. If it is true, then something must be done about it. But you want me to come and accuse people just like that, because you wrote me that, really.

FRANK: Well, we also invited you to discuss it with us, and we would be willing to do that at some point.

WIESEL: I would, I would do that.

MODERATOR: Well we, in fairness we should give other people a chance to ask their questions [applause].

For 50 years he's resisted the seducer — madness

By Scott Winokur
Examiner staff writer

DALLAS — "The enemy is not evil. The enemy is indifference. Your task and mine is to fight that indifference. "One day the ice will break. And you will smile."

With those words, author Elie Wiesel ended a stirring presentation yesterday to some 1,000 psychiatrists at one of the largest gatherings of the 138th annual meeting of the American Psychiatric Association.

His address, "The Temptation of Madness," explored his encounters — real and imaginary — with insanity over the last 50 years. He portrayed madness as an intellectual and emotional seducer — an escape from intolerable reality.

Wiesel recalled a Hasidic Jew in his native Hungary inviting him, as a child, to go crazy. "Come with me," the older man had said, "to the other side."

And he remembered the death camps of Nazi Germany, where it seemed as though "unreal reality was

behind divine design."

Noting that many millions of people have died in wars since World War II and that 41 wars are being waged now, Wiesel asked whether the world today was not yielding to the temptation of madness. He said he sensed a strong desire for mass destruction and speculated that this apocalyptic drive has been with us for generations.

Turning his attention to the psychiatric profession, the author — who said he studied psychiatry for two years in Paris — challenged his audi-

ence to examine its relations with patience, to face up to the grim fact that Nazi psychiatrists were responsible for atrocities and to speak out against psychiatric abuses in the Soviet Union.

"They use psychiatry to torture free human spirits, to mutilate souls, to imprison minds," he said.

Wiesel got standing ovations before and after his address, in part because of his leading role in questioning President Reagan's visit early this month to a military cemetery in Bit-

burg, West Germany. The cemetery contains 49 graves of SS members, the Third Reich's elite troops.

"I still don't know why the incident occurred," Wiesel said.

In a dramatic and highly ironic conclusion to his appearance, Wiesel was confronted from the floor by Leonard Frank of Berkeley, an ex-mental patient and a leading spokesman for patients' rights.

Frank likened the psychiatric torture Wiesel had condemned in the Soviet Union to the use of powerful

drugs and electroshock by the American psychiatric community.

Pointing to Wiesel's large audience, Frank, a gaunt, bearded man with a distinctly Messianic appearance, shouted: "These people are the living SS."

Some psychiatrists in the audience yelled angrily at Frank, but Wiesel responded kindly and calmly.

"I cannot believe that there are here people you call SS. I cannot believe that. I am convinced that they are trying to help the best they can."

SAN FRANCISCO EXAMINER May 23, 1985