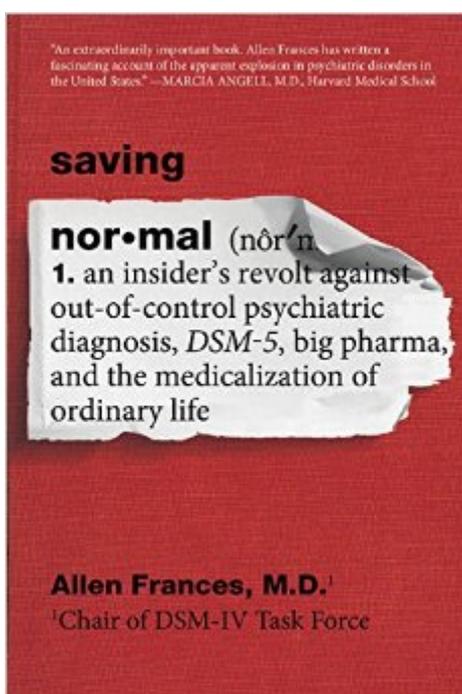


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Saving Normal: An Insider's Revolt Against Out-of-Control Psychiatric Diagnosis, DSM-5, Big Pharma, And The Medicalization Of Ordinary Life



Synopsis

International Bestseller A deeply fascinating and urgently important critique of the widespread medicalization of normality Anyone living a full, rich life experiences ups and downs, stresses, disappointments, sorrows, and setbacks. Today, however, millions of people who are really no more than "worried well" are being diagnosed as having a mental disorder and receiving unnecessary treatment. In *Saving Normal*, Allen Frances, one of the world's most influential psychiatrists, explains why stigmatizing a healthy person as mentally ill leads to unnecessary, harmful medications, the narrowing of horizons, the misallocation of medical resources, and the draining of the budgets of families and the nation. We also shift responsibility for our mental well-being away from our own naturally resilient brains and into the hands of "Big Pharma," who are reaping multi-billion-dollar profits. Frances cautions that the newest edition of the "bible of psychiatry," the *Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5)*, is turning our current diagnostic inflation into hyperinflation by converting millions of "normal" people into "mental patients." *Saving Normal* is a call to all of us to reclaim the full measure of our humanity.

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Customer Reviews

Saving Normal, written by Allen Frances, Chair of the DSM-IV Task Force should be bundled and sold with every edition of the DSM V. Dr Frances, who has worked for 20 years on the updated editions of the DSM, including DSM-III, DSM-III-R and DSM-IV is not an outsider. He knows what he is talking about. And he is sounding the alarm. He believes that those who desperately need psychiatric help are being neglected while others who don't need it are given diagnoses when

there's nothing 'wrong' with them and their issues are transitory. Saving Normal should be required reading for every therapist who diagnoses clients and for every client or potential client/patient who plans on using their health insurance benefits for mental health concerns or treatment. In Saving Normal, Dr. Frances warns about the mislabeling and diagnosing of normal problems and issues in daily living, as mental illness; he cautions about false diagnoses and potentially harmful and unnecessary prescriptions of psychotropic medications. 'Loose diagnosis' he says, 'is causing a national drug overdose of medication.' This diagnostic inflation impacts millions of people who are receiving unnecessary treatment and who believe they are suffering with a mental illness, when they are not. Dr. Frances explores the creation of the first DSM, what's normal and what's not, psychiatric fads of the past and present (notably Attention Deficit Disorder, Childhood Bipolar Disorder, Autism, Bipolar II and shyness, diagnosed as 'Social Phobia.') and the impact and influence of drug manufacturers on doctors and diagnoses. Dr. Frances talks about how labels have changed.

This is a topic that I find quite interesting as a BA psychology graduate with plans for PhD work. I don't think we give nearly enough attention to the classification and diagnosis of psychopathology, but rather accept the status quo. For that I credit Dr. Frances for writing this book. It is usually easier to say what one doesn't like about something, and I do have a few criticisms. For one, I would have liked more detailed criticisms of specific disorders, and perhaps an expounding on alternative methods of classification (dimensional vs categorical, etc). Instead Dr. Frances tends to pretty much say the same things over and over again in slightly different ways; "over diagnosis is harmful, certain disorders are being over diagnosed more than others, the drug companies are in need of reform, and most people don't need to have a diagnosis." Most of which I actually agree with, at least somewhat. But I think Dr. Frances could have expanded on topics of interest more instead of carving the book in to MANY little sections saying the same thing. My second criticism is that he focuses on psychiatry (which makes sense, since he is a psychiatrist) and tends to either misrepresent or undervalue other mental health professionals and researchers. At one point he equates psychologists to being people that give out IQ tests and epidemiological research methods as being done by clueless undergraduates. This is a bit silly, I think, since clinical psychologists often have much more training in diagnosis than psychiatrists, and diagnosis in general is done by many different health professionals. But I understand we all have our biases based on our experiences, including me. What I did like about the book is that it at least attempts to broach a needed subject.

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