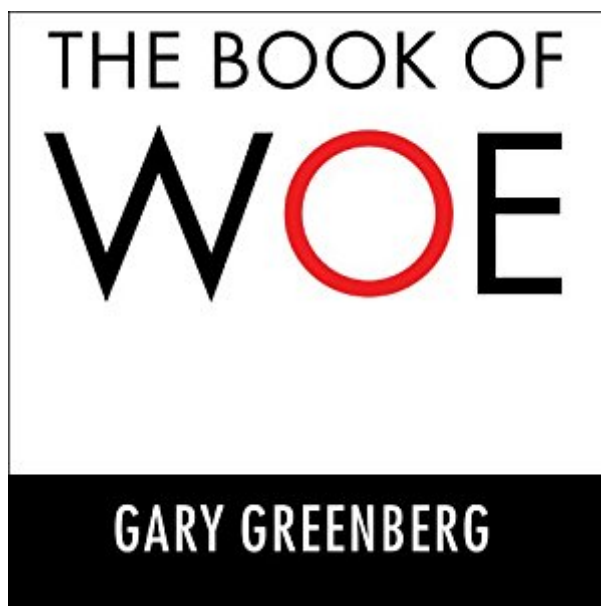


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# The Book Of Woe: The DSM And The Unmaking Of Psychiatry



## Synopsis

For more than two years, author and psychotherapist Gary Greenberg has embedded himself in the war that broke out over the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (the DSM) - the American Psychiatric Association's (APA) compendium of mental illnesses and what Greenberg calls "the book of woe". Since its debut in 1952, the book has been frequently revised, and with each revision, the "official" view on which psychological problems constitute mental illness has changed. Homosexuality, for instance, was a mental illness until 1973, and Asperger's gained recognition in 1994 only to see its status challenged nearly 20 years later. Each revision has created controversy, but the DSM-5, the newest iteration, has shaken psychiatry to its foundations. The APA has taken fire from patients, mental health practitioners, and former members for extending the reach of psychiatry into daily life by encouraging doctors to diagnose more illnesses and prescribe more therapies - often medications whose efficacy is unknown and whose side effects are severe. Critics - including Greenberg - argue that the APA should not have the naming rights to psychological pain or to the hundreds of millions of dollars the organization earns, especially when even the DSM's staunchest defenders acknowledge that the disorders listed in the book are not real illnesses. Greenberg's account of the history behind the DSM, which has grown from pamphlet-sized to encyclopedic since it was first published, and his behind-the-scenes reporting of the deeply flawed process by which the DSM-5 has been revised is both riveting and disturbing. Anyone who has received a diagnosis of mental disorder, filed a claim with an insurer, or just wondered whether daily troubles qualify as true illness should know how the DSM turns suffering into a commodity and the APA into its own biggest beneficiary. Invaluable and informative, *The Book of Woe* is bound to spark intense debate among expert and casual listeners alike.

## Book Information

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## Customer Reviews

Gary Greenberg gets it right and dishes it out on a sumptuous platter of history with a whole lotta gentle direct humor woven through his very exposing/disclosing book. In a down to earth readable style (not psychedelic, psychiatric, psycho, academic bureaucratic mumble jumble jargon) he's drawn the curtain back and exposed the Wizard of Id? Or maybe the Wizard of Ego? The Wizard of War? The DSM-5; a book written by committee; members who sit around a table every so many years and make up stuff, a book that has no scientific basis. We had to study the Diagnostic and Statistical Manual (DSM) when I was in graduate school (and who didn't like looking up what was wrong with their family members and self-diagnosing themselves?). It's merely a checklist of symptoms, not causation, not a mental health diagnosis, not a scientific diagnosis, not a medical diagnosis. "Check, check, check, check." "OK now this is who you are." Then a few years down the line: "Check, check, oh?" "OK now you're not that anymore". And it's very political. "Combat fatigue" was taken out at the height of the Vietnam War. It was veterans who studied then lobbied to get "post traumatic stress" in not only for themselves but also for children who were horribly abused. That is a label that at least speaks to causation. Then homosexuals lobbied to get "homosexuality" out, now "transgendered" want to be kept in. Greenberg lays out the history of the DSM, it's pioneering characters including its subsequent characters who now say "oops", but to his credit the author exposes the story and the behind the scenes of the story, treats the history in a respectful but direct way using humor; making them into people, not gurus who have the holy seeing as to who you are based on a checklist. I didn't know until reading Greenberg's book that out of the history of slavery came one of the first sort of DSM labels. That slaves running away was a mental disorder. If that doesn't say it all about so-called mental illness. If you don't accept the horrible conditions of your life you are mentally ill! "Now take these drugs!" In the new DSM book, in the DSM-5 if you grieve longer than two weeks for a loved one's death you are officially mentally ill. Greenberg lays out the money issue as to why now? Why now revamp the DSM? Why now? Because the American Psychiatric Association (APA) is in need of money. With all the criticism they were getting for drug money flowing into their coffers as well as the drug companies doing trainings for the APA, for drugging the hell out of our kids, the APA greatly reduced the drug money connection. The DSM is their best selling book. They need the money but as the reviews on the DSM-5 show anyone can

get the "diagnosis" and "code numbers" on line, free from which to do their insurance billing. DSM-5 not needed. Greenberg's description of the "committee work" I found hilarious and sad for it is exactly the same process I witnessed of the government re-writing the health, safety and well-being of children in day care regulations. It went on forever and the main folks advocating for no safety rules were some of the day care providers with the poor histories of providing care to children. Then like the DSM committee work it all went on line for public comment. The committee work Greenberg watched in action and the committee I watched in action were the similar dynamic although because a couple of us die hard advocates were on the committee the government did at least on paper a better job of keeping safety regulations. And yes, like Greenberg witnessed with his committee, the day care regulation committee also tried to keep their meetings secret and attempted to take away the first amendment rights of us advocates who spoke to the media. Where did this phenomenon start coalescing from in history? Once again it looks like from the Germans and a guy named Emil Kraepelin in the mid 1800s (which is where and when the whole public education system started) and by the end of the 1800s started the classification system, his "neat categories of mental illness". But it was really war that jumped the gun into providing a warm petri dish in which psychiatrists were grown and thrust out into the world to try to stop soldiers returning from war from having emotional reactions about their experiences, well maybe not stop the emotional reactions but to deny they had anything to do with war. 1952 the year the DSM first got published was the year that Dr. Ewan Cameron was the president of the APA. Working out of Canada for the C.I.A. he headed up the MKULTRA program up there where they experimented on children (see "The Franklin Cover Up"). 1952 was the year the USA got schizophrenia. Out of war sprang our modern mental health (cover up) systems. Lloyd de Mause and Alice Miller probably had the most direct diagnosis for our modern era in that "all war is about child abuse" but I don't think the author reviewed that aspect of our modern mental illness. Maybe his next book? A great read, a fun read, many laughing out loud moments. Laughing takes power and control away from those insisting that their way makes sense, only makes sense, it's the only way if you will only obey them. Please read and enjoy this book.

Mr Greenberg provides a very sober "apologia" on the DSM, with what I think are appropriate criticisms. I've been a therapist for seven years, and it is clear the DSM has severe limitations, as the author points out. In my way of thinking the DSM has mostly been a categorization of external symptoms. It is as if when we go to our PCP she would diagnose us with "cough disease" or "cut on the hand disorder". Medical science is wise enough to know that a cough is an external symptom

indicating an upper respiratory infection originating from a bacterial or viral source. In psychiatry the DSM does not have that kind of wisdom. If someone tells us they're depressed, we diagnose them with one of the depression disorders; with anxiety, the same thing. PTSD is one diagnosis from DSM-IV-TR that at least provides some intelligent etiology in past trauma. Sorry for the digression. Again, this is a well written, very thoughtful book worth the time of any practitioner in the field of psychology, and even therapy clients wanting the back stage, off screen look at what we're trying to do. As I tell my clients, now that we've come up with a diagnosis, let's put that aside and get on with the real work of healing in relationship.

Psychiatry is a mess and this book makes it worse -- even tho this outing is probable exaggerated its worth a read if the subject interests you. It is all part of the disastrous trend of "diseasing" of America

The Book of Woe digs deep into psychiatry's intellectual imbroglios, machinations, and power plays. Institutional politics, arbitrary distinctions, and bureaucratic fiat are shown to suffuse diagnostic standards that lurk beneath a surface image of objectivity through pure science. The author implies an assumption (but says little to elaborate on this assumption) that the general public takes psychiatric diagnosis as part and parcel of straight investigation and reference among science-minded experts who are clinicians and scholars in the helping fields of mental health and medicine. Faced with this book, one question that a general reader may ask is, why should I care to know all about this insider technical grist that it is the psychiatrists' job to grind and refine? My reaction to The Book of Woe is philosophical and sociological, and my appraisal overall is mostly positive. I don't agree with every point. I emerge from reading the book with a mixed reaction of philosophical stimulus, resonance, and difference; and I come away thinking about sociological concerns, some of which the book gets at, others it sidestepped. In some places I found the narrative getting a bit self-congratulatory, cavalier, and long-winded. Despite all that, however, the book really rocks and rolls with face-to-face interviews, participant-observation, and historical notes among psychiatric trend-setters. If it were written by a sociologist, The Book of Woe might earn praise for its piercing ethnographic portrayal of elites in a professional practice hard at work defining, adapting, and justifying a key toolkit that, by societal turn of events, has become theirs to promulgate, psychiatric standards and labels of diagnosis. People may debate the consequences, but in some greater or lesser measure, Greenberg argues that psychiatric diagnosis does influence peoples' identities and connects to insurance payments, treatment regimens, legal distinctions, and

research references. Whatever you may think of psychiatry, the profession does render some influence over a number of human lives. The author, Gary Greenberg, PhD, is not a sociologist but is a journalist and practicing psychotherapist. And *The Book of Woe*'s publication is well timed to coincide with the release of the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5(TM))*, surely enhancing the book's contribution to the public discourse. *The Book of Woe* describes and provokes on a topic that is pertinent to human well-being. The prose delivers erudite arguments laced with personalities and events told as stories, serving as anecdotal data and coating the subject for easier ingestion. Greenberg's arguments may pertain to several different communities of readers who might appreciate it: general interest about public health and mental difficulties; sociology of medicine and mind; and philosophy of science, medicine, and mind. I recommend it.

Being tangentially involved in mental health issues I felt obligated to give the book of woe a quick and superficial read as a professional curtesy. Wrong. This book was so fascinating I could not put it down. It is intensely interesting and well written.

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