## **Submission To:**

# **Australian Government Productivity Commission**

## Subject:

# **Mental Health**

**Schizophrenia Dressed Up As Humor** 

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#### Schizophrenia Dressed Up As Humor

When people get schizophrenia we get 'em and neglect 'em,

We give 'em antipsychotics to chemically restrain and sedate 'em,

Meanwhile they're so needy and annoying it's an effort not to hit 'em.

Instead we must patiently wait for death to claim 'em,

And we keep on getting more customers so we do it all over again on 'em!

That's how much we love caring for 'em,

You can trust us to do a good job of looking after 'em.

- Junkie 1: I know a bloke who knows a girl who sells antipsychotics \$20 a tablet.
- Junkie 2: I see a guy who deals antipsychotics for \$10 a tablet.
- Junkie 3: I have a doctor who writes me antipsychotics scripts for the highest dose you can get.
- Junkie 1: You are so lucky.
- Junkie 2: No wonder you look stoned.
- Junkie 1: How can we get a doctor to write us scripts for antipsychotics?
- Junkie 3: You say you hear bad voices in your head and you got to give examples like say the voices tell you to go kill yourself or kill other people. Next thing is you make sure you say you been to jail, you're homeless, unemployed and a drug addict because they're all the ways the medical profession think many schizophrenics live.

Antipsychotics cut off parts of the brain from working so the brain can no longer do the things it needs to do. Psychiatrists have described antipsychotics as the ideal chemical lobotomies.

Nurse: Mr. Psychiatrist major tranquilizers are making the schizophrenia patients sick and many of them are dying before their time. What will we do?

Mr. Psychiatrist: Schizophrenia patients have psychosis. Major tranquilizers injure and kill when we give them to patients who are psychotic. I have the solution. I will change the name of major tranquilizers to antipsychotics.

Drug manufacturer: From now on we will call major tranquilizers antipsychotics.

Psychiatrist: I can see it now, antipsychotics raking in the money like antibiotics have. What will we do with the patients who get sick on the stuff?

Drug manufacturer: Schizophrenia patients have psychosis so everything they say is nonsense anyway. We'll put out information that the negative symptoms antipsychotics cause are in fact the symptoms of schizophrenia.

I didn't like how antipsychotics medication was causing trouble with my health. So I stopped taking it. I had no problems felt great and was happy but the police came, handcuffed me and I was taken to the mental hospital as an involuntary patient. There they gave me the highest dose of antipsychotics. "That will teach me."

Psychiatrists believe antipsychotics take schizophrenia out of schizophrenia patients.

Some people see the disease schizophrenia as a hallucination, conjured out of delusions which have for over a century been complimented with faulty scientific perceptions and disordered medical thinking. The symptoms of schizophrenia appear to make psychiatrists so paranoid they become unmotivated and have trouble thinking thus they interpret abnormally which has lead to their faulty perception that antipsychotics are the bee's knees for the management of schizophrenia.

I have no need to meet you.

I have been told about you.

I see you have schizophrenia.

I recommend antipsychotics 20 milligrams for you.

I hear you stopped taking your medication.

I send the police to apprehend you.

I see they took you by escort to the hospital.

I recommend antipsychotics 150 mg for you.

I hear you resisted taking your medication.

I send medical staff to restrain you for your injection.

I see you must be supervised to take your medication.

I recommend you do a Community Treatment Order.

I hear Medicare will pay the medical bills for you.

I recommend you stay on medication.

I see you need it for the rest of your life.

I recommend this is the best way to care for you.

I send you to a G.P.

I have better things to do than write antipsychotics scripts for you.

Steven: I know a psychiatrist who will diagnose anyone with ADHD if the person asks. He's very busy you have to wait about 2 years for an appointment.

Tom: I know a psychiatrist who diagnoses you with schizophrenia if you ask. You don't need to make an appointment there is never anyone around.

Anxiety, depression or schizophrenia it's all the same thing the only difference is respectable people don't have schizophrenia said one psychiatrist to another.

Gift antipsychotics to schizophrenia patients so they behave better.

Sell the myth that chemical imbalances in the brain cause mental illnesses.

Manipulate Mr. and Mrs. Normal to embrace antidepressants.

Diagnose children who do not live up to the expectations of adults with psychiatric disorders so they can have amphetamines, methamphetamines, antipsychotics, antidepressants and electrical brain stimulation.

95% of psychiatrists have anosognosia and 5% of psychiatrists do not have schizophrenia.

1950s psychiatrists say major tranquilizers stop schizophrenia symptoms.

1960s psychiatrists' error schizophrenia is caused by a brain dopamine chemical imbalance.

1970s psychiatrists understand major tranquilizers/antipsychotics side-effects injure and kill.

1980s psychiatrists insist all schizophrenia patients need to use antipsychotics.

1990s psychiatrists blame antipsychotics symptoms of injury and death on schizophrenia.

2000s psychiatrists believe if patients stop taking antipsychotics schizophrenia returns.

2010s psychiatrists recommend schizophrenia patients must use antipsychotics for life.

2020s psychiatrists blind to research establishing that antipsychotics cause brain atrophy.

2030s psychiatrists deaf to evidence that schizophrenia patients who do not use antipsychotics have better mental and physical health than patients who use antipsychotics.

2040s psychiatrists mute to antipsychotics only work for some schizophrenia patients and the patients antipsychotics don't work for are being poisoned when they are given up to 7-and-a-half times bigger doses.

2050s psychiatrists pat themselves on the back for prescribing schizophrenia patients antipsychotics for a century. An undercurrent sours their celebrations. There is a public outcry about the patients injured and dying prematurely because of their using antipsychotics. The authorities change the law to allow psychiatric patients the right to refuse medical treatment.

Schizophrenia patient: I'm having visions of going to Bali and I hear a voice in my head saying I will have a good time.

Psychiatrist: You're having delusions about travel and again you hear a voice in your head. I won't beat around the bush. I need to increase your medication.

Psychiatrists say, we believe in the psychiatric theory that,

Psychiatric disorders are caused by chemical imbalances in the brain.

So I ask you who are the idiots spreading the lie,

Psychiatric drugs cause a chemical imbalance in the brain?

Psychiatrist Smart: It is true psychiatric drugs cause a chemical imbalance in the brain by either decreasing or increasing the brain's chemical activity. This will result in the amount of communication that takes place in the brain decreasing or increasing. Altering the amount of communication that takes place in the brain is how psychiatric drugs change what the brain is communicating into a different set of instructions for how to operate the body and this will cause the body to work differently. When the body works differently you will feel different so your mood will change and this is how psychiatric drugs can work to stop patients' psychiatric disorder symptoms.

Mind altering drugs change how a person feels in their body because they change how the body works. When a person feels physical relief as a result of using a mind altering drug it is common for them to enter into moods that will generate positive attitudes.

Meth head 1: I am diagnosed with ADHD since I was 7 years old.

Meth head 2: What's it like never having to worry about how to get your next fix? Meth head 1: It's like all my wishes come true and having all my prayers answered.

Rat: Humans exterminate us using rat poison. It takes hours to die a slow painful death.

Bacteria: Humans have been exterminating us with antibiotics. In seconds millions die.

Schizophrenia patient: Humans have been exterminating us with antipsychotics. We are slowly poisoned over years often decades. If you don't kill yourself in despair you die a slow painful death and every second of your existence you feel like you are dying a million deaths.

Olden time psychiatrist: Schizophrenia is caused by dementia.

Old psychiatrist: Schizophrenia is caused by a chemical imbalance in the brain.

Young psychiatrist: Schizophrenia is caused by the schizophrenia gene.

Future psychiatrist: What the f\*\*\* causes schizophrenia?

Psychiatrists think schizophrenia is a fiend.

Psychiatrists are the ones, who will say,

Which psychiatric drug will manage the symptoms of each psychiatric disorder.

So I ask who are the idiots spreading the lie,

Any psychiatric drug can treat any psychiatric disorder?

Psychiatrist Smart: It's true any psychiatric drug can treat any psychiatric disorder on the condition that a patient likes how the psychiatric drug they are using makes them feel. If a patient likes how a drug makes them feel the drug works and if the patient doesn't like how the drug makes them feel then the drug is not good for them. When you say everyone with schizophrenia must take antipsychotics according to the law of averages maybe half the people will feel unwell. When the patients who react badly to antipsychotics are given access to different drugs in order to find one that they like then their mental health improves just the same as it does for the patients who like taking antipsychotics.

Each psychiatric drug will have its supporters and critics this is because when people take any type of mind altering drug some people will feel fantastic and others will feel unwell.

It is wrong to force a person to use a drug that causes them discomfort or to stop a person from using a drug that improves their wellbeing.

As the drug consumer a psychiatric patient is in the best position to know if a psychiatric drug is therapeutic for them.

Psychiatrist 1: There are 2 kinds of schizophrenia patients. One group takes their medication without making any fuss about it and loves us. The other group complains about the medication making them feel sick.

Psychiatrist 2: Clearly the medication works but some patients are more psychotic than others.

He could not think. He would stare into space and drool.

It was a mammoth effort just to stand up.

Every 3 or 4 weeks he would shower and clean up his room.

This was because he would skimp and save for these occasions,

When he could buy illegal methamphetamines.

The moral to the story is,

Antipsychotics reduce dopamine and serotonin in the brain and

Methamphetamines increase dopamine and serotonin in the brain.

Psychiatrist and schizophrenia patient are like water and oil they just don't mix.

Once a person is diagnosed with schizophrenia it's impossible for them to mount a defence against their diagnosis because they are treated as being irrational since it is believed that they have psychosis.

Schizophrenia patient: I tell you I don't have schizophrenia I have depression.

Psychiatrist: Any more of that kind of talk and I'm increasing your dose.

Schizophrenia patient: You have made a mistake.

Psychiatrist: How dare you. I'm tripling your dose.

Schizophrenia patient: You're insane.

Psychiatrist: How unfortunate we have come to the end of your visit. Here is your script. Goodbye.

Schizophrenia patient leaves and psychiatrist writes in patients file. Psychosis is so severe patient said I made a mistake. Patient was argumentative about schizophrenia diagnosis and had delusions about having depression. Patient was uncooperative, opinionated, noncompliant and difficult to manage. Patient has anosognosia. Medical treatment dose tripled now on 90 mg.

Staff is confident they are competent to compile clinical observations on patients.

Staff confuses patients' behaviors caused by being under the influence of psychiatric drugs with symptoms of psychiatric disorders.

Staff concludes patients are mental off medication and they are crazy on medication.

Psychiatrist ahead of his time: Do you want a sedative to make your brain communicate less or do you want a stimulant to make your brain communicate more?

Patient: Can I get both?

Psychiatrist ahead of his time: Of course.

You have a very low opinion of someone to think that giving them a lobotomy will help them.

Life chewed me up and spat me out,
No job, living with my parents and in my 50's,
I do not know the name of a psychiatrist I never met,
But they said that I have schizophrenia,
This changed my life forever,
My income has increased from the dole to getting the pension,
But I work hard for it,
I must be stoned on major tranquilizers every day. That's a high price to pay.

How do antipsychotics work for patients? (1) Dry mouth so teeth rot. (2) Dry eyes so they feel like there's sand in them and everything appears too bright. They make your vision blurry and your sight deteriorates. They cause glaucoma (the gradual loss of sight). (3) Dysphoria. (4) Unmotivated and fatigued. (5) Akathisia. (6) Body is overheating one minute and the next you cannot get warm enough. (7) Increased appetite. (8) Increased sensitivity to sunlight. (9) Insomnia. (10) Life threatening intestinal disorders. (11) Stroke. (12) Seizures. (13) Pain in muscles. (14) Physical deterioration - muscles atrophy. (15) Brain atrophy. (16) Brain damage. (17) Dead brain cells. (18) Decreased life expectancy. (19) Cardiovascular and pulmonary disease. (20) Neuroleptic Malignant Syndrome - affects the nervous system and results in death in up to 30% of cases. (21) The heart takes longer than normal to recharge between beats and the heart rhythm is irregular - this can be fatal. (22) Low white blood cell count - more likely to catch infections and less able to fight them - can be fatal. (23) Malaise. (24) Grey complexion. (25) Varicose veins and life threatening blood clots. (26) Obesity. (27) High sugar. (28) Diabetes. (29) High cholesterol. (30) Impairment of learning and memory. (31) Anxious. (32) Depressed. (33) Suicidal. (34) Movement disorders (tardive dyskinesia). (35) Severe psychotic symptoms (tardive psychosis). (36) Global cognitive decline (tardive dementia). (37) Different parts of your body shake and tremble uncontrollably. (38) Muscles feel like stone which is unbearable agony. (39) Blood pressure too high so it feels like your head is going to explode. (40) Blood pressure too low so you feel faint. (41) Pancreas, kidney, liver and abdominal damage each of which can be fatal. (42) Osteoporosis. (43) Parkinson's symptoms and disease. (44) Sexual dysfunctions: decreased libido, spontaneous ejaculation, persistent and painful erection of the penis. Impotence, sterile sperm, enlargement of man's breasts and an abnormal absence of menstruation. (44) Spontaneous flow of milk from the breast not associated with childbirth or nursing. (45) Inability or reduced ability to feel pleasure in normally pleasurable activities. (46) Rashes of red spots all over the body.

Victims are being held hostage by psychiatrists as schizophrenia patients who must live as antipsychotics consumers.

Antipsychotics cause brain atrophy. In 2005, studies using monkeys reveal when healthy animals are exposed to antipsychotics for 17 to 27 months, they lose an average of 8-11% of their brain volume. [1]

Mr. Psychiatrist,

I asked you if I could stop taking antipsychotics because they made me feel sick.

Your response was to give me a higher dose.

You overdosed me I was inebriated I told you the medication made me feel worse.

Your response was to give me a higher dose.

You made a zombie out of me and I told you so.

Your response was to give me a higher dose.

You turned me into an invalid zombie and I said nothing.

Your response was that the medication is working.

Psychiatrists are car salespeople who know something about how car motors work but do not know how to drive. You need to drive a car to understand how it works. You need to use psychiatric drugs to know how they work.

When antipsychotics make a patient unwell psychiatrist wrongly imagine patient's are acting psychotic and increase medication. This is like throwing a brick on the accelerator of a car the patient has said they are unable to drive. The patient ends up crashing and burning. These patients are known to stop taking their medication when they are able to manage it but then a psychiatrist will have them committed in order to force them to use higher doses of the very same medication that makes them ill. Psychiatrists don't comprehend what it feels like when a mind altering drug makes you sick - and then to be overdosed with it as well - that is sheer hell.

Methamphetamines user: I can think clearly and I have energy.

Antipsychotics user: I'm brainless and I have no energy.

Methamphetamines user: Now I got a job.
Antipsychotics user: Now I got the pension.
Methamphetamines user: I have ADHD.
Antipsychotics user: I have schizophrenia.

Methamphetamines user: You poor [redacted]. Antipsychotics are poison. Antipsychotics user: My doctor says antipsychotics are keeping me well.

Methamphetamines user: What sort of doctor is that?

Antipsychotics user: An ignoramus.

Drug user 1: I'm going to a psychiatrist and I'm going to tell them that I have ADHD. Drug user 2: Write meth head on your forehead it will get you the same reaction.

Psychiatrists never give addictive drugs to people who get addicted to drugs. Patients on psychiatric drugs do not get addicted to the medication because they are mentally ill.

How do psychiatrists so often end up providing medical treatments that harm patients? Because only psychiatric patients are not allowed to exercise their right to refuse medical treatment.

There are insane psychiatric patients and crazy psychiatric staff.

When mind altering drugs work:

Patient 1: Antipsychotics stop the voices in my head and they make me feel calm and relaxed.

Patient 2: I feel so much better since I use antidepressants I haven't been depressed.

Patient 3: Since I've been taking ADHD medication my mind works much better, I'm alert and awake and I feel great.

Recreational drug use: Ecstasy and dancing is a match made in heaven I feel great.

Drug user: Opioids made me feel so much better I'm never depressed any more.

Drug user: Cocaine is life enhancing and gives you energy to get things done in your life.

A think tank in a large public hospital comes up with a strategy for how to look after psychiatric patients on their budget:

Speaker 1: Nearly all the mental patients we see are on welfare so we don't rake in the big bucks. We need to figure out a way around this problem.

Speaker 2: I suggest we put a psychiatrist in charge of staff whose work duties involve access to patients and call them all the mental health care team. The staff gives the psychiatrist their observations of patients and with this information the psychiatrist can diagnose and monitor patients.

Speaker 3: I see what you're saying. The mental health care team sees the mental patients anyway so that doesn't cost the hospital any extra money but the psychiatrist doesn't need to waste time having consultations with patients. That's brilliant. It means one psychiatrist can take on many more patients than they ever could otherwise.

Speaker 1: This is such a good idea I propose we get more beds for the psychiatric ward. More patients are the solution to our budget crisis. Damn it we'll run this hospital like a mental health factory.

A psychiatrist looks after patients in a public hospital,

She has no consultations with psychiatric patients,

Patients never meet her or get told her name,

Instead a mental health care team made up of nurses and others who care for patients,

Give to the psychiatrist their patient observations,

This is how she diagnoses and monitors patients,

While all the time prescribing patients' psychiatric medications.

Psychiatrists believe you can't reason with someone who has schizophrenia. This is true when the person with schizophrenia also happens to be a psychiatrist.

Antipsychotics manufacturer 1: "This medication helps by correcting imbalances in the brain which may cause mental illness."

Antipsychotics manufacturer 2: "The mechanism of action of paliperidone, as with other drugs having efficacy in schizophrenia is unknown..."

Schizophrenia patients are like cockroaches they crawl around after you crush them.

The psychiatrist is a judge,
He sentenced me to schizophrenia,
The medication gets me too stoned,
No longer do I jive or get jolly,
I'm all out of hope,
I want to sit around all day and do nothing but mope,
My life has become a bad joke,
My doctor is the joker,
A member of the jury.

Schizophrenia patient with insight into his illness: So living on the dole for years is my fault because I have bad voices in my head. Taking major tranquilizers stops the voices so I need my medication because it makes my mind go blank.

Schizophrenia patient 1: They recommend only stop taking antipsychotics under medical supervision but I can't find anyone in the medical profession who will do this for me.

Schizophrenia patient 2: That's because they think people who have schizophrenia have something wrong with the way their brain works and the antipsychotics fix the problem.

Schizophrenia patient 1: What's wrong with our brains?

Schizophrenia patient 2: They haven't figured that part out yet.

In 2018 Australian investigators published that antipsychotics may cause brain atrophy in children. Psychiatrists have challenged this by insisting psychosis itself is responsible for brain atrophy and medications may protect the brain by reducing symptoms.

The populations of schizophrenia patients who have never been exposed to antipsychotics do not have brain atrophy.

Schizophrenia patient 1: They recommend only stop taking antipsychotics under medical supervision but I can't find anyone in the medical profession who will do this for me.

Schizophrenia patient 2: That's because psychiatrists think antipsychotics are like insulin and schizophrenia is like diabetes.

Schizophrenia patient 1: Just my luck. I would have no trouble getting off medication if they used the analogy that antipsychotics are like a plaster cast and schizophrenia is like a broken leg.

Schizophrenia patients are saying that antipsychotics make them feel sick. Psychiatrists cannot understand from this that antipsychotics make some people sick. The way psychiatrists interpret this scenario is that patients have psychosis so anything they say is nonsense. Patient is coherent psychiatrist is delusional.

I can see you're psychotic I have the vision of a psychiatrist.

Psychiatrists say,

Psychiatric drugs are not addictive.

So I ask who are the idiots spreading the lie,

Psychiatric drugs are addictive?

Psychiatrist Smart: It's true psychiatric drugs are addictive. When psychiatric drugs increase or decrease the amount of communication that takes place in the brain the brain responds by decreasing or increasing its own communication activities so that in partnership with the drug's chemical activity the brain is able to resume the same levels of communication as it had prior to medication. This occurs gradually over 3 to 6 days. A person is drug dependent or addicted once the brain is reliant on a drug's chemical activity to communicate the instructions that it wants to give. Addiction is not harmful when it makes a person feel better.

When patients are drug dependent the drug's euphoria usually stops and for some patients it is replaced with a general sense of wellbeing. Other patients once drug dependent find that the drug they are using is no longer giving them any therapeutic benefit because only the drug's euphoria associated with when one initially begins using a mind altering drug is medicinal for them. These patients may do well by rotating between two or more varieties of psychiatric drugs or they may benefit from having their dose varied for example: day 1 - dose strength 5 = euphoria; day 2 - dose strength 4 = feeling of wellbeing; day 3 - dose strength 3 = feeling of wellbeing; day 4 - dose strength 5 = euphoria; and so on.

Once a patient is drug dependent they will have drug withdrawal symptoms when they stop using medication except if they (1) switch straight from one mind altering drug to another mind altering drug or (2) have their dose slowly tapered down over a number of months or for up to a year in some cases.

Patient: I am worried about the bad side effects of using antipsychotics so I think you should stop prescribing them to me. (I need to at least try to get my point across.)

Clinician: You are doing so well on your medication. (She's delusional again.)

Patient: This medication is killing me.

Clinician: I see the medication is working for you. (She's hallucinating.)

Patient: I know when I stopped taking it I felt better. (Smug [redacted].)

Clinician: I am concerned about you. I'm going to increase your dose and we'll see if that helps. (Psychotic [redacted].)

Staff believes that patients' psychiatric drugs are stopping patients from behaving more insane than what they appear to be.

When antipsychotics make patients obese and give them high blood sugar and high cholesterol clinicians insist patients must keep taking medication. Why doesn't a patient's physical health take priority over mental health?

There is no-where a schizophrenia patient can escape from the caring arms of a psychiatrist.

Psychiatrists will say,

What patients' doses are to be and how many psychiatric drugs a patient needs to take. So I ask who are the idiots spreading the lie,

That some patients are on too high doses or being prescribed too many psychiatric drugs?

Psychiatrist Smart: It's true. Clinicians who lack knowledge that can only come from actually using psychiatric drugs can unknowingly prescribe mind altering drugs in ways that are harmful to patients. It is not unusual for patients to end up on (1) the wrong medication, and or (2) too many drugs, and or (3) too high doses, and (4) psychiatric drugs as mind control drugs to restrain patients hence the term chemical shackles.

When a psychiatric drug doesn't stop a patient's symptoms or makes them feel sick then increasing the dose is not the correct solution. It is more appropriate to try a different drug always with an open mind that the patient might not be a suitable candidate for using psychiatric drugs.

Different people have different drug tolerance levels some need small doses others bigger doses. Patients get inebriated or paralytic on doses that are too high for them and often when using 2 or more psychiatric drugs at the same time. If this continues for months or even years the body will show signs of drug poisoning in the form of mental and physical injuries and in almost every case the patient will die prematurely. All drugs are toxic.

Schizophrenia is the social construct of upper class privileged white men to explain that people who do not think like them have diseased brains which cause individuals to have delusions and hallucinate.

#### Delusions and hallucinations:

- (1) Are emotions like happy or sad.
- (2) Can be the culmination of disordered emotions or psychological processes.
- (3) Can be a spiritual experience.
- (4) Are behaviors' psychiatrist's attribute to patients they are critical of or unable to relate to.
- (5) Can be a defense mechanism used to cope with trauma.
- (6) Are personality traits like being introverted, gregarious or exhibitionism.
- (7) Can be caused by paranoia.
- (8) Are prolific among people who are experiencing hysteria.
- (9) Are typical for people who have opinions on issues they are fearful of or do not understand.
- (10) Is imagination in action.
- (11) Are symptoms of illnesses some of which may cause fevers or delirium.
- (12) Can be symptoms indicating that a person is in shock.
- (13) Can be symptoms of dementia.
- (14) Is what people are described as having when they have visions, see things or hear voices that no one else can see or hear.

Psychiatric drugs are mind altering drugs.

If you get addicted to mind altering drugs according to clinicians you have a substance abuse problem and you must stop using drugs you are addicted to. This rule does not apply when mind altering drugs are called psychiatric drugs and drug addicts are called psychiatric patients.

The psychiatrist saw the name Tania,
He thought that rhymes with schizophrenia,
In his heart knew this to be true,
Because he had never met her,
There was nothing about her to remember,
That's how Tania was diagnosed with schizophrenia.

In the 1950s doctors observed that hospital patients would appear calm after they were administered major tranquilizers so psychiatrists thought it was a good idea to give major tranquilizers to patients in mental hospitals who were thought of as disruptive to the routines of institutional living. Sedating mental patients this way was hailed a success and also resulted in psychiatrists announcing that they have discovered major tranquilizers stop schizophrenia patients' symptoms.

Patients whose schizophrenia symptoms do not reduce when medicated with major tranquilizers get diagnosed as being drug resistant or treatment-resistant and are prescribed larger doses. It is common for these patients to be tranquilized into symptom submission until they drool and shuffle. When doses are too high patients become paralytic. Clinicians have diagnosed this as the patient is deteriorating due to the progression of their mental illness. Sometimes even higher doses are prescribed to treat patients declining health.

A number of patients feel ill when they take major tranquilizers and some will attempt to have the medication stopped or at least reduced. Psychiatrists have mistakenly concluded that this is bad behavior and these patients are acting inappropriately because they are psychotic. Psychiatrists diagnose these patients schizophrenia symptoms are more chronic than what was first thought and in response psychiatrists will increase patients' medication.

Patients in hospitals used major tranquilizers for short periods however schizophrenia patients were being given much higher doses year after year. The outcome was that schizophrenia patients were becoming ill and many were dying. It was obvious that major tranquilizers were causing this. Instead of stopping the prescribing of major tranquilizers to schizophrenia patients in the 1970s it was decided that changing the name of major tranquilizers to antipsychotics would solve the problem.

Today it is common for clinicians and drug manufacturers to insist that the injuries caused by antipsychotics are in fact symptoms of psychosis, genetics, life-style choices, aging and disease. The harms antipsychotics cause are as invisible to clinicians and drug manufacturers as all the schizophrenia patients made sick and killed by antipsychotics.

Schizophrenia patient 1: Everyone hears voices in their heads it's called thinking. Schizophrenia patient 2: Yes but if a psychiatrist does not like what the voices are saying it means you have got schizophrenia.

What did the schizophrenia patient say to the laboratory rat? They won't let me refuse medical treatment either.

Mind altering drugs are like walking sticks for the mind. Some people use them just to go for a hike. Other people use them until their leg gets better and then there are people who need to use them for life.

Psychiatrists recommend,

Schizophrenia patients must use antipsychotics for the rest of their lives.

So I ask who are the idiots spreading the lie,

Schizophrenia patients do not need to use major tranquilizers until the day they die?

Psychiatrist Smart: It's true. Schizophrenia patients who are using antipsychotics and have no symptoms of psychosis will in most cases not have any schizophrenia symptoms when their antipsychotics medication is sensibly tapered down over a number of months. A majority of schizophrenia patients have good mental health when they are not using antipsychotics.

Too fast drug withdrawal from antipsychotics causes patients to experience psychosis. This psychosis is a symptom of drug withdrawal it is not the patient's schizophrenia returning.

Once someone in the medical profession labels a patient as psychotic this will be the reputation that precedes the patient everywhere they go.

Psychiatry has a solid track record of mistreating, torturing and killing its patients so how it is that psychiatry is so influential and respected in our culture? Because people who have psychiatric disorders are thought of as mentally incompetent and a burden on society they are human trash that is dumped into the maze of social control and injustices.

Don't go on with your paranoid delusions. I can confidently tell you that your health problems are not from using antipsychotics.

Schizophrenia patient: When will I be healed?

Psychiatrist: You're so delusional.

Schizophrenia patient: Why don't you listen to me?

Psychiatrist: Because you're psychotic it would be a waste of my time.

Schizophrenia patient: So then I guess you must also not waste your time listening to yourself.

The psychiatrist wrote I have schizophrenia on myhealthrecord.gov.au now I will not be able to find a doctor in Australia who doesn't think I have schizophrenia. That's the problem with electronic health record if one doctor makes a mistake all the rest repeat it.

I see visions of manufacturers of antipsychotic drugs and psychiatrists toasting to a job well done as the numbers of their schizophrenia detainees keeps on rising.

What do schizophrenia patients and laboratory rats have in common? They both give their lives for medicine.

As an involuntary patient every morning and evening for weeks I lined up to take my medication One day a nurse hopped at my heels.

To my horror I have to say she hissed a hex on me.

No hello her only hint was to heckle the words you have schizophrenia.

I hesitated and thought hey what the heck did that nurse I never saw before just say?

This hocus-pocus hit me hard.

Her words harmed they hammered me they were too harsh for my head to hear.

My mind couldn't think. I was in shock. Was this a hoax?

Was she heartless to hand me this heinous news and then hurriedly disappear?

She haunts me by the havoc her horrid words have hatched.

Schizophrenia medication is now my horrendous handicap.

I feel so horrible sedated and hopeless that hygiene is now a huge hassle.

My life has come to a humbling halt.

I hobble around like a hideous hobo.

Schizophrenia is a hostile heavy hardship.

I'm hapless I've been hoodwinked and hurled to hell.

Psychiatrists don't use psychiatric drugs themselves. They think using such drugs would cause them harm because they say that their brains are normal.

Myth 1: The brains of people with psychiatric disorders work differently to other people's brains.

Myth 2: Psychiatric drugs are harmful to people who do not have psychiatric disorders.

Drug manufacturers are the puppeteers and psychiatrists are their puppets.

Psychiatrists have made some manufacturers of psychiatric drugs so filthy rich that they have become more powerful and influential than the American Gun Lobby Group and governments of countries around the world.

According to psychiatrists schizophrenia is a brain disease so schizophrenia patients brains are different and do not work like normal people's brains. Every day for over 125 years psychiatrists have been saying that science is on the verge of proving this.

Illegal drugs make people feel, think and act differently.

Psychiatric drugs make people feel, think and act differently.

Psychiatry is founded on the ideology that the brain constructs personality so when the brain is not working correctly a person will behave inappropriately. Thus fix the problem in the brain and the patient will behave in ways that a psychiatrist perceives to be improved. This thinking originates from those who had privileged lifestyles in the nineteenth century as their effort to make sense of what they deemed to be undesirable behaviors of people in the lower classes.

The dog belongs to the breed called doctors.

The dog is owned by psychiatrists.

The dogs name is psychiatry.

The dog eats pseudoscience.

The dog [redacted] out psychiatric theories.

The dog lives in hospital psychiatric wards.

The dog is trained to do psychiatric tricks.

The dog digs psychiatric drugs.

The dog barks out psychiatric diagnoses.

The dog plays with psychiatric patients.

The dog hunts for psychiatric disorders.

The dog loves prescribing psychiatric drugs to psychiatric patients.

The dog sleeps in the loving arms of the manufacturers and suppliers of psychiatric drugs.

The dog obeys the commands of the bureaucracy that is the mental health industry.

The dog does not bite the hand that feeds him.

The dog fights and bites patients who complain about their medication.

The dog hates the anti psychiatry movement.

The dog has its critics it calls them flees.

The dog has got the mange. The mites are psychiatric survivors.

The dog has got some deadly ticks. Ticks are psychiatrists who listen to their patients.

People society recognizes as productive citizens are more often diagnosed with anxiety, depression and PTSD and people viewed as not contributing or a burden to society are more likely to be diagnosed with schizophrenia or bipolar.

The general public believes psychiatric drugs stop mental illnesses the same way they believe jails make society safer. So if you can't lock 'em up, stone 'em instead.

The symptoms of schizophrenia<sup>1</sup> are too vague. Psychiatrists are netting patients who are not psychotic. When these patients try to have their diagnosis withdrawn psychiatrists interpret this as psychotic behavior requiring the remedy of having their drug dose increased. Psychiatrists aren't finished asserting their authority over protesting patients until they have adequately overdosed them to the point where they stop mentioning that they have been misdiagnosed.

2. Hallucinations.

<sup>&</sup>lt;sup>1</sup> DSM-5 diagnostic criteria for schizophrenia: The patient has difficulties in one or more major areas of their life such as work, interpersonal relations, or self-care. The patient has two (or more) of the following [symptoms], each present for a significant portion of time during a 1-month period (or less if successfully treated). At least one of these must be 1, 2 or 3:

<sup>1.</sup> Delusions.

<sup>3.</sup> Disorganized speech (e.g., frequent derailment or incoherence).

<sup>4.</sup> Grossly disorganized or catonic behavior.

<sup>5.</sup> Negative symptoms (i.e., diminished emotional expression or avolition). [2]

Psychiatric drugs which do not cause patients to experience any drug euphoria only give the therapeutic benefits that come from using a placebo. The only difference is that these placebos cause patients to become drug dependent. Patients quickly discover that when they stop taking medication they get severe drug withdrawal symptoms. Currently it is almost impossible to find a clinician who will medically supervise a patient's gradual tapering down of psychiatric medication over time so that the patient does not suffer severe drug withdrawal symptoms. As a result it is common for patients to continue using these placebos for the rest of their life.

Psychiatrists recommend patients can manage psychiatric disorder symptoms if they use psychiatric medications for the rest of their life.

The majority of psychiatrists only see schizophrenia patients who are using antipsychotics and out of this they have come to the conclusion that patients' health deteriorates more quickly than what is normal for the general population. Psychiatrists want that schizophrenia is responsible for their schizophrenia patients health problems because they are the antipsychotics for schizophrenia patients cheer squad.

Schizophrenia patients who do not use antipsychotics or use them only for a short period of time - or have been using psychiatric medications for years but manage to find a way to stop - have recovered from schizophrenia and their physical and mental health is much better than the patients who continuously use antipsychotics for years.

Psychiatrists who put patients on too high doses of psychiatric drugs are in the business of turning patients into zombies.

A psychiatric technique for brainwashing patients:

- Step 1: Increase patient's dose. If patient's behavior does not improve;
- Step 2: Increase patient's dose again. If patient's behavior does not improve;
- Step 3: Give patient maximum dose. If patient's behavior is still unsatisfactory;
- Step 4: Prescribe an additional psychiatric drug. If patient's behavior is still unsatisfactory;
- Step 5: Repeat Steps 1, 2, 3 and 4 as it is deemed necessary.

When a psychiatrist gives a diagnosis to a patient they are passing moral judgments and what they think about the patient as a person will determine which mental disorder symptoms they are able to imagine the patient is displaying.

Through a set of circumstances the only psychiatrist who bulk bill Medicare in my area also works part-time at the hospital psychiatric unit where I was an involuntary patient. I asked him why I was diagnosed with schizophrenia. He answered because you did not have a job.

God doesn't make rubbish. So who made psychiatrists?

Psychiatrists say schizophrenia patients have psychosis. Many schizophrenia patients do not have psychosis but they are all treated as though they do. When psychiatrists call a patient psychotic they mean the patient has a mental disorder which causes abnormal thinking and perceptions manifest as delusions and hallucinations which may cause them to hurt themselves or others.

How psychiatrists, doctors and drug manufacturers portray people with schizophrenia is why people in our society think that they are dangerous. People have been wrongly led to believe that schizophrenia patients have a chemical imbalance in the brain and psychiatric drugs correct this problem.

Psychotic patients do not cause harm to themselves or others any more than the general population. Statistically schizophrenia patients are more likely to be victims not perpetrators of crime. The suicide rate for schizophrenia patients who use antipsychotics is higher than for the general population. Suicidal thoughts and suicide attempts are symptoms of antipsychotics use.

The word psychotic is psychiatric jargon for insane person. The word psychotic is a derogatory term. To call a patient psychotic is to infer the patient is a lost cause. When psychiatrists think this way they act out to fulfill their own prophecy.

Insanity is passing laws which dictate that it is illegal for adults to use certain types of mind altering drugs if they have been criminalized or not been lawfully prescribed to you and meanwhile it's a crime for schizophrenic patients not to use antipsychotics. One day common sense will prevail and adults will not be breaking laws when they use any mind altering drugs and psychiatric patients will have the same rights as all other people in society so when they refuse medical treatment a psychiatrist will no longer be able to force them to consume mind altering drugs.

Drug use is not evil, deviant or criminal. Evil deviants criminalize therapeutic drugs other people use but they do not make illegal any of the drugs they use themselves.

"Everything will kill you, if you take enough of it... But just like any drug, the difference between a poison and a cure is the dose." (Quote by neurosurgeon David Paulsen.)

When people have emotional problems they need to work through them to reach a logical conclusion but this is denied to people who are diagnosed with schizophrenia because they are tranquilized into silence.

Schizophrenia patients should not be heard and be seen only when under the influence of antipsychotics.

Psychiatrists are only people so personal biases will influence how they respond to each patient. When a psychiatrist does not spend time with a patient - and is unable to nurture a human connection with them - the psychiatrist's diagnosis is no more correct than giving someone an insult.

People have always taken mind altering drugs and drug prohibition is an effort to stop something that cannot be stopped - the will of the people - people are now visiting psychiatrists to get access to mind altering drugs.

As part of their training psychiatrists should be given the opportunity to use the psychiatric drugs they prescribe. Then they would understand how these drugs are affecting patients.

Recreational drug users learn that there are mind altering drugs which cause them to feel better than how they normally would feel. These people are not degenerate drug addicts, but they are people who have discovered drugs that improve their quality of life.

If someone is too mentally incompetent or disabled to be given access to their basic human right to refuse medication then they are too vulnerable and unfit to be exposed to mind altering drugs.

You get what you buy.

Psychiatrists' loyalties lie with those who are paying for their services.

They respect and protect the patients who pay them for their consultations.

They respect and champion drug companies who pay them for their services of expertise.

They respect and serve the politicians who allocate them public money to provide psychiatric care to the socioeconomically disadvantaged.

Politicians spread ignorance and hate when they insist that everyone in the community is safer when psychiatric patients are not allowed to stop using psychiatric drugs.

All that the general public hears is that all psychiatric patients are being helped by psychiatry.

Look around you and you will see people selling alcohol, tobacco and mind altering drugs.

If a clinician were able to prescribe only the psychiatric drugs which they have personally experienced using the prescribing of some psychiatric drugs would become a scarce commodity.

Manufacturers of psychiatric drugs are laughing all the way to the bank. Psychiatrists are giggling living their life-styles of the rich and famous. Mental health care workers are grinning they can afford to pay their bills. And at the bottom of the food chain psychiatric patients are frowning.

Psychiatrist: I'm told by people who know her that she had a hallucination in which she saw an angel who spoke to her and said she would have a son and that she is to name him Jesus. She is under the delusion that the Holy Spirit made her pregnant. I diagnose she has schizophrenia give her antipsychotics 10 mg every morning and night.

I was very depressed after a relationship breakup, not having a job and moving in with my parents. Mum seeking help found it in the form of getting me committed. I was prescribed 10 milligrams of antipsychotics every morning and evening. I did not see a psychiatrist days turned into weeks and then one day a nurse said you have schizophrenia.

The medication made me ill so I stopped taking it and I felt great. My mother was wound up to believe if I stop taking medication schizophrenia symptoms return. She had me committed a second time she has blind faith that a psychiatrist will help her daughter and I have a broken life that shows a psychiatrist has really [redacted] me over.

My release from a mental hospital was on the condition that I complete a Community Treatment Order (CTO) and have 150 mg of antipsychotics by injection every month. A year later a psychiatrist gradually reduced my dose to 50 mg. Two years later I was released from the CTO into the care of a G.P.

I found one psychiatrist who automatically bulk-billed Medicare. Once I asked him to reduce my dose from 50 mg to 25 mg. He said no. Another time I asked him to take me off antipsychotics all together he laughed at me like I was being funny and said this would be impossible. He also told me I could see another psychiatrist if I didn't like it. On the internet I found out that there is one psychiatrist in Australia who does not force patients to use psychiatric drugs but he lives in a different state.

For over 65 years schizophrenia patients have been recommended, coerced and forced to use antipsychotics. Schizophrenia patients die up to 25 years earlier than the general population. [3] This is primarily because antipsychotics are slow poisons particularly when doses are high. Repeated doses result in injures and continued use causes death. Physical health, age, dose size and length of time on medication will influence how soon death occurs. For example a person who starts using antipsychotics when they are young and healthy might live another 1 to 3 decades but an elderly person might die within a few months or 2 years from commencing medication.

Elderly people who use antipsychotics for dementia related psychosis are at increased risk of death compared to placebo.

Psychiatrist 1: Patients are looking for a drug that makes them feel good.

Psychiatrist 2: Over my dead body.

What did the laboratory rat say to the schizophrenia patient? To the medical profession we are just vermin.

Zebra: Veterinarian staff says we could harm ourselves or others so they tranquilize us when they have to care for us.

Schizophrenia patient: Psychiatrists say we could harm ourselves or others so they tranquilize us too when they have to care for us.

Psychiatric diagnosis is subjective not scientific. Often different psychiatrists will interpret the same symptoms in the same person with different diagnoses.

Every person who enjoys the right to use or refuse any drug they choose seriously is acting out of order when they deny this same right to other people.

Laboratory mouse: I live in a steel cage.

Schizophrenia patient: I live in a chemical straightjacket.

What did the psychiatrist say to the schizophrenia patient? Antipsychotics will manage your symptoms but as far as I'm concerned you'll always be psychotic.

Staff sees patients as mentally defective.

Staff sees the crisis is the patient's behavior and not their living conditions or circumstances.

Patients inebriated on psychiatric drugs roam the confines of the psychiatric ward.

Patients are trapped like rats in a cage.

Psychiatric drugs are prescribed using the trial-and-error approach. The idea is that the medication's therapeutic benefits will outweigh harmful drug side-effects.

Mrs. Respectable: How can I get someone incarcerated when they have committed no crime? Mrs. Busybody: You confide in someone who has some seniority in the mental health industry that there is a person you know who you have seen is behaving strangely and you have heard them talking aloud to themselves and you think they could be dangerous.

Clinicians believe patients using antipsychotics need to exercise to improve their health. People under the influence of major tranquilizers are always doing the exercise called it's too hard to move.

Antipsychotics are a class of pharmaceutical drugs that stop dopamine and serotonin to the brain. Antipsychotics are so popular amongst psychiatrists and doctors that they are now being used to treat schizophrenia, bipolar disorder, psychosis, irritability in people with autism, anxiety, depression, dementia, severe tension, severe excitement, severe agitation, hyperactivity, aggression in patients with mental or emotional illness, nausea, vomiting, prolonged hiccups, tetanus symptoms, tourette syndrome, anxiety and pain during surgery (neurolept anaesthesia), learning disability, insomnia, controlling behaviors in children (for example: hyper-excitable behavior, ADHD, mental retardation and mental illness).

There are two types of psychiatry. There is psychiatry for people who can afford to pay for it and there is psychiatry for people who are on low incomes or welfare. Psychiatrists whose patients can afford to pay for their services endeavor for their patients to not end up in a mental hospital. Psychiatrists who work with the socioeconomically less privileged look for reasons why to send their patients to a mental hospital.

Citizen captured by a psychiatrist. Oh calamity what a catastrophe.

Medical staff certainly coerced me into collaborating in their medication ceremony.

Confession I'm cactus on antipsychotics.

I crave clarity but all I get is confusion.

The cramped communal areas of the psychiatric ward make me feel claustrophobic.

Patients chat, collaborate communicatively and commingle with each other to pass the time.

I contemplate it is crucial I cooperate.

I chose to collapse in a chair and close my eyes.

Taking my medication uses all my concentration.

I have no capacity for conversation.

The biggest difference between being able to afford to pay for a psychiatrist and not being able to afford to pay for a psychiatrist:

If you have access to a good income you can shop for a psychiatrist who will (1) give you a diagnosis you can live with, (2) talk to you, and (3) not force you to take psychiatric drugs.

When you can't pay for a psychiatrist the psychiatrist you get will in 99% of cases be driven by an obsessive need to prescribe psychiatric drugs to you using the methodology of Chinese whispers.

### Dear psychiatrist,

I don't know who you are because I never met you or was told your name but you apparently had the liberty of knowing me well enough to diagnose me with schizophrenia. How do you justify yourself? You gutless wonder you ruined my life. Because of you I am being forced to use antipsychotics and these drugs are killing me slowly and painfully. You are not a psychiatrist you are an abuser. I am sure you wouldn't even know who I am if you laid your eyes on me. I know enough about you to know that what you did to me you have done to others and we are all just pawns in the sick games you play.

Person who has an emotional breakdown and has the money to pay for a psychiatrist: I have a great psychiatrist they saved my life.

Person who has an emotional breakdown and has no money to pay for a psychiatrist: I got committed as an involuntary patient and was prescribed antipsychotics. Eventually a nurse told me I had schizophrenia. One day a psychiatrist came to see me for two minutes. He asked if I was suicidal. I said no. Soon after that I was released from the mental hospital with schizophrenia tattooed to my life and a script for antipsychotics.

Schizophrenia patients have one job make money for antipsychotics manufacturers.

Antipsychotics manufacturers have a skeleton in the closet it's a big secret called we know that antipsychotics are injuring and killing schizophrenia patients.

Why don't we call people who use insulin junkies?

Because these people have a medical condition called diabetes and insulin keeps them alive.

Why don't we call psychiatric patients who use psychiatric drugs junkies?

Because psychiatrists theorize that psychiatric patients have medical conditions called psychiatric disorders which require psychiatric drugs in order to change each patient's behavior.

Why do people call people who use drugs not prescribed by doctors' junkies? Because some people feel good when they behave like a bum hole.

Opioids and antipsychotics are both psychotropic drugs, sedatives and addictive. At one time the management of schizophrenia symptoms using heroin was trialed and the outcome for patients were deemed favorable and as effective as using major tranquilizers but without the bad side-effects. Unfortunately community perception which demonizes heroin use prevailed so the positive findings were never pursued.

Mr. President it has come to our attention that we have not yet passed laws dictating what method citizens must use to wipe their bottom after they do a [redacted].

Laboratory rat: We're stuck in the same boat.

Schizophrenia patient: Yeah! The stinking boat of no hope that's sinking in the psychiatric ocean.

People who are of the ideology that all schizophrenia patients must use antipsychotics insist it is unethical to conduct a medical trial over a number of years in which half of a population of schizophrenia patients takes antipsychotics and the other half do not because it would be unethical to not give schizophrenia patient antipsychotics.

How can a psychiatrist not see when a medical treatment is causing harm to patients? Because there is something wrong with them mentally.

Psychiatric drugs are used by clinicians as mind control drugs and chemical restraints for individuals who do not fit into nursing homes, prisons, foster care and schools.

The money antipsychotics manufacturers are earning is the proceeds of crime. The crime is injuring and killing schizophrenia patients for economic gain.

To a schizophrenic patient who has chronic health from using antipsychotics,

Psychiatry is hell on earth,

Psychiatrists are demons and,

Antipsychotics manufacturers are the devil.

Schizophrenia Dressed Up As Humor

I'm so old I remember when cocaine was in Coke-a-Cola and chemists put heroin into their health tonics and cough medicines. No one died. Those were the good old days.

One person's medicine another person's poison.

I apologize if I have offended any psychiatrist no harm intended.

If you don't have a mental illness a psychiatrist can give you one.

#### Re:

- [1] www.breggin.com/td-resources/Dorph-Petersen2005-monkey-brain-damage-pdf
- [2] Source: Diagnostic Statistical Manual of Mental Disorders (DSM). Volume 5. Written by the American Psychiatric Association (APA). Published by the APA 2013.
- [3] https://jamanetwork.com/journals/jamapsychiatry/fullarticle/2466831

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Thank you drive.google.com and docs.google.com for the writing tools.