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Gary Greenberg knows depression.

He once lay on the floor for hours watching dust drift through the sunbeams – for no other reason than getting up and looking "into my own black insides would just take too much effort."

But in his new book, *Manufacturing Depression: the Secret History of a Modern Disease*, the psychotherapist argues that identifying depression as a disease, as has become accepted practice among doctors and drug companies, is not only wrong, it's dangerous.

"The immediate effect is a kind of impoverishment of our understanding of ourselves and our suffering," says Greenberg in a telephone interview from Connecticut, where he lives and works.

By treating depression as a disease like any other – such as diabetes – as one drug company ad does, the expectation arises that there is one prescribed treatment that does not require getting to know the patients, their hopes or their fears.

"It turns patients into a kind of McNugget to be processed through the system," Greenberg says.

"Here's your drugs and your cognitive therapy and you come out a nice, shiny, happy guy."

While depression has become a huge business, with drug companies selling billions of dollars worth of antidepressants a year, Greenberg warns against conspiracy theories that Big Pharma invented depression as a way to sell more drugs.

Instead, he says, they capitalized on a movement in the mental health field to view depression as a disease. From there, he says, the drug companies, armed with well-paid ad men, stepped in with a "cure" in the form of anti-depressants.

"They certainly didn't make it up out of whole cloth, and they didn't make it up with evil intent," he says. "They're just doing what companies do."

Greenberg's book is a history of depression, marking its transition from a hushed-up affliction with patients hidden away in asylums to the subject of mass-marketing campaigns selling the idea that the only shame in depression is doing nothing about it.

Along the way, he says, much of the nuance of the mental health profession was lost.

Perhaps the patient, like Greenberg, grew up in a dysfunctional home with two parents who probably never should have married in the first place (or who, also like Greenberg, repeated the pattern with his own bad marriage).

At one point in the book, Greenberg enrolls in a drug trial, just to see what it's like. The doctors ask Greenberg a series of formulaic questions, such as, "Have you been sad for two weeks?" – in order to diagnose him.

Turns out, Greenberg was more depressed than he realized, and was admitted to the trial. There were no questions about what was going on in his life that might account for his melancholy, and the doctors couldn't even get his name right.

They kept calling him "Greg." At first, it bothered Greenberg, but in the end he decided it didn't matter. The doctors weren't interested in him as an individual because it had no bearing on their diagnosis.

For that, all they needed were his answers to standardized questions.

"The industry is working hard to eliminate the human element from psychiatry," he writes. "But for now the best they can do is to circle the answers in a notebook and train practitioners to ignore what's in front of their faces."

And that, Greenberg says, tells you just about all you need to know about what's wrong with the way depression is diagnosed and treated today.

When depression is a disease, Greenberg says, the compulsion becomes to find a way to cure it – to find some way to fix the chemical imbalance that science says is causing the problem.

But that, Greenberg says, ignores the possibility that some people have good reason to be sad – a streak of bad luck, a traumatic event or unresolved issues with their families.

To call such people diseased is to miss the opportunity to genuinely help them, Greenberg says, through therapy and empathy.

In the end, however, he does not come down completely against medication as a way to treat depression, as long as the patients don't think they're "curing" a disease.

"There are lots of people who are taking these drugs, not because they really believe they were depressed, but because whatever transformation they bring helps them in their lives," he says.

"I don't have any problem with that."