

AT THE age of 25, Laura Delano decided to end her life. She had grown up in privilege – her father is related to former US President Franklin D. Roosevelt and she inhabited a world of boarding schools and debutante balls. Yet, despite these advantages, she felt she had been handed a life sentence. For the previous 11 years, she'd been on 19 different psychiatric drugs, including mood stabilisers, antidepressants and antipsychotics. The cocktail of medications had begun when she was first diagnosed with bipolar disorder at just 14 years old. Her suicide attempt was precipitated by a psychiatrist telling her that, after more than a decade of being medicated, she wasn't

By KATINKA BLACKFORD NEWMAN

getting better because her condition was 'treatment resistant'. 'I felt I was left facing this decision: keep going with this miserable, mentally ill life of hospital programmes, not being able to work [other than the odd part-time job], not able to have relationships, or end my life because I didn't think there was any other option,' says Laura. It was by chance that her father found her unconscious on rocks in woods near her

grandparents house in Maine, north east America. 'My parents were told: "If she survives, she'll likely be vegetative."' 'Everyone was resigned to the fact that I wasn't going to make it.' Two years after her suicide attempt and after more hospitalisations, changes in medication and further expert opinions, Laura began to question the story she had believed for more than a decade. 'I took it for granted that bipolar disorder is a biological disease, like diabetes, and that being bipolar meant my brain was defective and that I would have to take psychiatric drugs for the rest of my life just to stand a chance of living a normal life,' she says. 'I had this lifelong condition caused by a chemical imbalance, I was told.' (In fact, this chemical imbalance theory has never been scientifically proven.) But then I thought, what if my life was falling apart, not in spite of my treatment – but because of it?

Wrong diagnosis: Laura Delano

UK have a mental illness – but some experts challenge these numbers. Dr Suzanne O'Sullivan, a neurologist at the National Hospital for Neurology and Neurosurgery in London, and author of a new book, *The Age of Diagnosis: Sickness, Health And Why Medicine Has Gone Too Far*, argues that rather than more people getting sicker, we are 'attributing more to sickness' – so that millions are now classed as unwell, when previously they may have been considered healthy. She told Good Health: 'We're almost instructing people to worry about missing a night's sleep or feeling down for a few weeks. One in five people may have a mental

'Struggles part of growing up, not illness'

health condition, but are they really more ill than past generations?' Dr O'Sullivan highlights a crucial misconception: 'People assume mental health diagnoses are based on scientific discoveries, scans or genetic findings. In reality, a committee decides what counts as a disorder.' The global rule book for diagnosing mental health conditions, such as depression and bipolar, is known as the DSM (the Diagnostic and Statistical Manual of Mental Disorders). It is compiled by a committee of US psychiatrists who decide what is considered a mental disorder – and the criteria for diagnosing it. Since its first edition in 1952, the number of disorders has nearly tripled – from 106 to almost 300. Critics argue that this steady expansion of diagnoses is turning grief, shyness and childhood energy, for instance, into medical conditions. And Dr O'Sullivan warns of the dangers of the 'nocebo effect', where 'when you medicalise something, people start conforming to the label. If you're told you're depressed, bipolar or autistic, you start searching for symptoms in your self.'

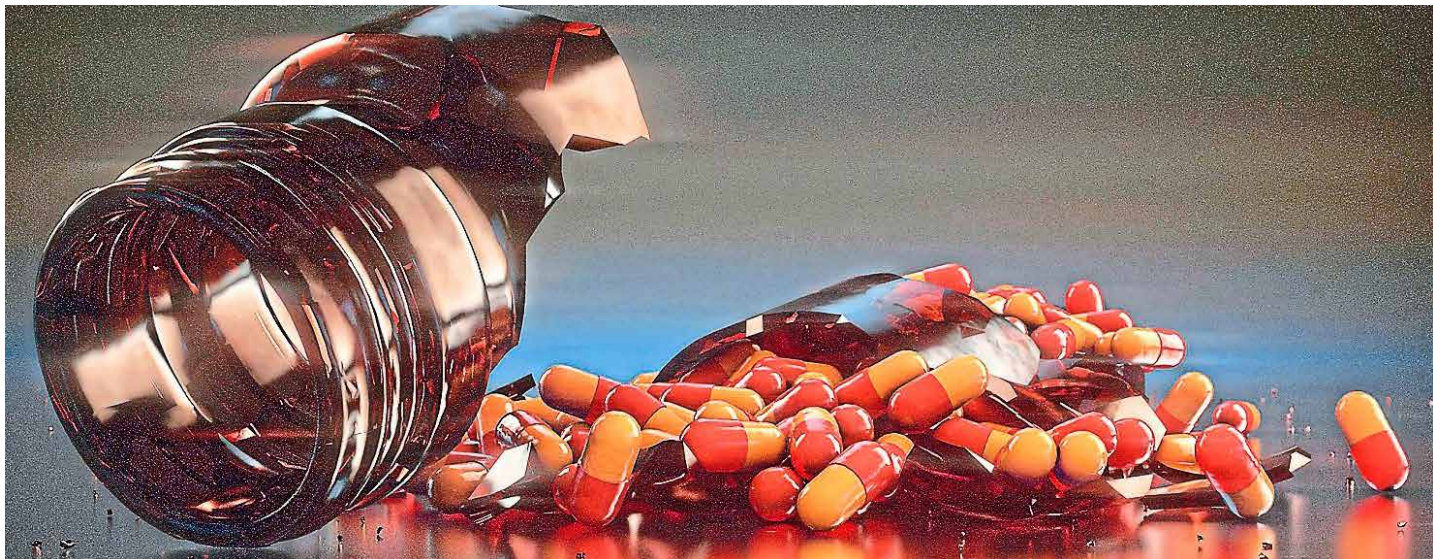
Told condition due to 'chemical imbalance'

eight weeks – and that a psychiatric diagnosis is a subjective opinion, not a biological fact. People deserve to know that.' She adds: 'And this idea that if you're struggling, you have a mental health condition – in many instances that label may not be helpful.' Laura's concerns mirror a wider debate over mental health overdiagnosis, with increasing numbers of people now labelled as having conditions such as bipolar disorder, autism, depression and ADHD. This is a problem mental health campaigners and some psychiatrists have long spoken about and now it's reached the political mainstream, with the Health Secretary Wes Streeting recently telling the BBC there is an 'overdiagnosis' of some mental health conditions. According to the NHS, one in five adults and one in ten children in the



Picture: Aaron and Whitney Photography

My life nearly fell apart because I was put on a cocktail of anti-depressants I didn't even need



Picture: Getty

Diagnosed at just 14 as bipolar, Laura spent 14 years on a potent mix of mood-altering drugs that made her feel so bad she even attempted suicide

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says Dr Timimi, author of *Searching for Normal: A New Approach to Understanding Mental Health, Distress and Neurodiversity*. 'I'm also seeing more young people who think they have a personality disorder, ADHD or autism.' 'We need to re-educate both the public and professionals, including doctors and psychiatrists, away from the culture of diagnosis and towards an understanding of emotional distress.' The underlying problem is that diagnosis inevitably leads to medication – and the drugs themselves can lead to symptoms that lead to more medication, as Laura says happened with her. Looking back, she believes her struggles were a normal part of

growing up and coming to terms with the world she was born into. 'I remember thinking: why is life all about getting good grades, being a good athlete, having good manners, being thin and all these superficial elements?' she says. 'I became obsessed with achieving to the point where I developed an eating disorder and was exercising six hours per day. As the eldest of three siblings, I felt pressure to be a role model.' She was 13 when her parents sent her to a therapist and, a year later, she was referred to a psychiatrist as she was self-harming. 'After a 15-minute consultation, the doctor explained that my irritability and outbursts were symptoms of mania [a psychiatric term

for elevated energy levels and heightened mood] and that my despair and self-injury were symptoms of depression. 'I was told I had a lifelong, incurable condition called bipolar disorder, which is characterised by patterns of intense ups and downs. But I was told not to worry – there were medications that could help me.' Laura was prescribed an antidepressant, Prozac, and a mood stabiliser, but, outraged by the diagnosis, she refused to take them. However her feelings of hopelessness continued, leading her to use ecstasy and alcohol. Despite her struggles, she got into Harvard University to study social anthropology but broke down in her first year, aged 18, after attending a debutante ball. 'There I was up on this stage, the culmination of this fake life that I couldn't escape,' she recalls. 'I thought, "I give up. That doctor must have been right four years earlier. Something must be wrong with my brain."' 'I told my parents I needed help

and they made an appointment with a psychiatrist who put me on bipolar meds.' From that moment, she fully embraced her diagnosis and began a regimen of increasing medication doses. Although she remained at Harvard, the next few years were a struggle, she says: 'That was when the prescription cascade started. First, it was an antidepressant, a sleep aid, then a downer like an antipsychotic and a mood stabiliser, along with benzodiazepines. 'When I started feeling anxious and jittery, they added more drugs. Over time, I was on up to five medications at once.' She managed to complete her degree and graduate from Harvard (although she took a year off, during which time she admitted herself to a psychiatric hospital). However, after leaving, without the structure of university her life spun out of control. Laura recalls: 'I was unable to hold down a job, I lost touch with all my friends, got into toxic

relationships. As well as taking my medication, I was drinking to blackout and taking cocaine.' Over the next few years, Laura was hospitalised three times – once after her overdose and the other times because she was suicidal, which she now sees as largely caused by adverse effects of the drugs she was taking. She saw countless experts and was given multiple diagnoses, including social anxiety disorder, substance use disorder, binge eating disorder and borderline personality disorder. It was a chance visit to a bookstore at 27 that changed her life. She picked up a copy of *Anatomy of an Epidemic*, by award-winning US journalist Robert Whitaker. The book challenges the idea that psychiatric medication fixes chemical imbalances and suggests they may actually create illnesses. 'It was terrifying and liberating,' says Laura. She decided to quit her medication against the recommendation of her specialist – and without realising the risks. 'I came off them in six months without a proper tapering plan,' she says. 'I had horrendous with-

'I have emotions and cognitive function back'

drawal symptoms – spontaneous vomiting, migraines, diarrhoea, cognitive fog, my skin broke out in boils. I could barely function.' Regaining her emotions after 14 years of medication was bitter-sweet. She says: 'When I started coming alive, it terrified me. But then I realised that this is what it feels like to be here. I just hadn't been here this whole time.' At 27, she had her first orgasm – until then, she hadn't known that sexual dysfunction can be a side effect of the drugs.

'I'd assumed my sexual problems were my fault. That first orgasm was the most extraordinary and beautiful experience but it also set off a grieving process: until then I didn't realise what I'd been missing for all those years.' A key moment in her recovery was meeting Robert Whitaker, who encouraged her to write a blog for his website, *Mad in America*. This led to hundreds of people reaching out with similar experiences – they had also believed in the medical model but now realised that in their case the drugs were harming them. That blog became the basis for her book *Unshrunk*. 'My life looks profoundly different now,' says Laura. 'I have my emotions, my cognitive function, my relationships back. 'It is such a gift to find my way back, post psychiatry. But I'm still the same intense, sensitive, insecure me as I was all the way back in the beginning – I'm just not afraid of it any more.' ■ *UNSHRUNK: How The Mental Health Industry Took Over My Life – And My Fight To Get It Back*, by Laura Delano, is published by Monoray (£22). Laura appears on *The Med Free Mental Fitness Podcast* with Katinka Blackford Newman, available on Apple podcasts, Spotify and YouTube. FOR confidential support, call the Samaritans on 116 123 or go to samaritans.org.

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