

'Dogma on mental illness is a threat to progress'

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A man with an approaching depression, represented by encroaching devils. Credit: Wellcome Library, London.

It is commonplace for people to hold very firm views about the nature and causes of mental illness, based on hunch, ideological perspective and anecdote. For example, some believe all mental illness is explained by adverse social circumstances; others think that it simply reflects a lack of ability to cope with life's stresses.

While many people are very supportive of the need for better understanding of mental health, even highly intelligent and otherwise open-minded individuals not infrequently hold dogmatic but ill-informed views about mental illness.

This thinking extends to biological scientists, Nobel Prize winners and even members of grants panels. Many naive views seem to be based on extrapolation of knowledge of situations of relatively mild mental distress. However, this extrapolation does not work. Consider the



common assumption that all depression is the result of inability to deal with life, a character weakness. While this view might be of value for mild depression, it is woefully inadequate for severe depression accompanied by stupor or delusions - situations that can be lifethreatening. In contrast, few people would be comfortable making similar generalising assumptions about the causes and management of severe cardiovascular disease (for example myocardial infarction) based only on their observations of people who get breathless on exercise.

Within the scientific and lay press, psychiatric illnesses are discussed in a more heated, opinionated and less helpful way than non-psychiatric illnesses. An example was the media furore surrounding the report that rare structural genomic variants are more common in cases of attention deficit hyperactivity disorder (ADHD) than controls. Despite voicing of all the caveats about the complexity of causation and importance of environmental factors, there was great disquiet voiced from some commentators that ADHD was referred to as a "genetic disorder". Had similar wording been used about heart disease or diabetes, there would not have been such inflammatory debate. And yet the evidence for genetic influence on ADHD is as strong as for these physical illnesses. All involve a complex mixture of genes and environment.

An increasing understanding of basic neuroscience, together with human investigative tools such as molecular genetics and multimodal brain imaging, provide the opportunity for a revolution in diagnosis and management of mental illness over the coming two to three decades. However, realising this opportunity will require us all to be open-minded and guided by evidence rather than prejudice. This includes politicians, the public, professionals, funders and grants panels, as well as researchers.

For the sake of the many people whose lives are affected by severe mental illness we need to walk the walk and not just talk the talk.



Provided by Wellcome Trust

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