

## **Iatrogenic disorders in psychiatry are common and neglected**

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In a paper published in the current issue of *Psychotherapy and Psychosomatics*, Giovanni Fava and Chiara Rafanelli analyze the literature concerned with iatrogenic disorders in psychiatry, which may be due to medications or psychotherapy.

The <u>side effects</u> and risks associated with the <u>medical intervention</u> are defined as iatrogenesis. In psychiatry, iatrogenesis has traditionally been concerned with medical complications of psychotropic <u>drug treatment</u>. As it happened with medical therapy, side effects of psychiatric



treatments have been conceptualized as the unavoidable drawbacks of any form of <u>medical therapy</u>. Little attention has been paid to the adverse psychological and behavioral effects of psychiatric treatment on psychopathology and illness course.

Current classification systems in psychiatry fail to consider the iatrogenic components of psychopathology related to behavioral toxicity. Affective disturbances caused by medical drugs, as well as paradoxical effects, manifestations of tolerance (loss of clinical effect, refractoriness), withdrawal and post-withdrawal disorders, are increasingly common due to the widespread use of psychotropic drugs in the general population. Such neglect is serious, since manifestations of behavioral toxicity are unlikely to respond to standard psychiatric treatments and may be responsible for the wide spectrum of disturbances subsumed under the generic rubric of treatment resistance. The term "iatrogenic comorbidity" refers to the unfavorable modifications in the course, characteristics, and responsiveness to treatment of an illness that may be related to previously administered therapies. Such modifications may also lead to a serial development of multiple medical and psychiatric complications (cascade iatrogenesis).

The notion of psychiatric disease is no longer in line with the changed spectrum of health and the complex interplay of biological, iatrogenic and psychosocial factors. Consideration of iatrogenic factors challenges most of the current practices of prescription of psychotropic drugs. Currently, the prescribing physician is driven by evidence-based medicine and guidelines, the marketing arm of pharmaceutical industry, to an overestimated consideration of potential benefits, little attention to the likelihood of responsiveness and neglect of potential vulnerabilities to the adverse effects of treatment.

Authors concluded pointing out that long-term outcomes of psychiatric disorders may be unsatisfactory not because technical interventions are



missing, but because our conceptual models that ignore iatrogenic forms of psychopathology are inadequate.

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