

in: Département de Psychiatrie des Hôpitaux Universitaires de Genève in collaboration with the Swiss Society of Psychiatry: "Manage or perish? Challenges of managed mental health care in Europe. Geneva, 7th-10th Octobre 1998, Centre Médical Universitaire, Final Program", lecture within the symposium "Patients neglected by managed care", led by Fritz A. Henn, abstract 091, 1998, p. 75

ORAL PRESENTATIONS

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PROBLEMS AT WITHDRAWAL FROM PSYCHIATRIC DRUGS

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Psychiatric workers deny vehemently that there is dependence from psycho-tropic drugs (neuroleptics, antidepressants, lithium, carbamazepin and tranquilizers). On the other side undoubtedly there are bodily and psychic withdrawal-symptoms, that may cause an – itself not necessary – continued psychopharmacological treatment. What consequences for users of psychiatry, for relatives and for psychiatric workers has the silence about withdrawal-symptoms, rebound-effects, supersensitivity-effects, receptor-changes and tardive psychoses? Is it useful and possible to care for the withdrawal of psychiatric drugs under the conditions as in-patients or out-patients? Which positive experiences are there at self-determined withdrawal?



AN INTERNATIONAL MEETING
SPONSORED BY THE
WORLD PSYCHIATRIC ASSOCIATION

MANAGE OR PERISH?

CHALLENGES OF MANAGED MENTAL HEALTH CARE IN EUROPE

GENEVA, 7TH-10TH OCTOBER 1998

CENTRE MÉDICAL UNIVERSITAIRE

ORGANIZED BY THE DÉPARTEMENT DE PSYCHIATRIE
DES HÔPITAUX UNIVERSITAIRES DE GENÈVE

IN COLLABORATION WITH THE
SWISS SOCIETY OF PSYCHIATRY



Hôpitaux Universitaires de Genève

FINAL PROGRAM

INCLUDING ABSTRACTS