

Every now and then, we attend conferences in our respective disciplines to gain new knowledge while being exposed to “emerging” practices and developments in our disciplines. Recently, my participation at the World Psychiatric Congress in Buenos Aires left me perplexed regarding the intimate and troubling relationship between the pharmaceutical industry and the psychiatric “enterprise”. The experience was beyond my understanding: pharmaceutical companies rivalled with one other in the attempt to grab the attention of conference attendees, the result being a large number of health care professionals, mostly psychiatrists, parading from one booth to another, accumulating aesthetically designed and glossy bags of drug samples. Anyone looking at this from the outside – that is, anyone who is unaware of the venue – could have mistaken the event for a local shopping spree. There was an unwelcomed consumerist undertone to the whole experience, where one was left wondering whether it was the patients or their providers who were the actual targets of these drugs.

It comes to no surprise that bio-psychiatry has become an important determinant in the way research and clinical practice are developed around the notion of mental disorder. What is disturbing, however, is the way pharmaceutical companies are enmeshed in the psychiatric culture; that is, the production of knowledge in psychiatry and the promotion of new classification schemes or diagnostic criteria that are directly linked to the production of new molecules. From a pharmaceutical standpoint, the fluid and ever-changing boundaries of what constitutes a mental disorder, as well as the key symptoms that need to be targeted by health care professionals, represent fertile grounds for financial gain.

Accordingly, the decision-making processes, through which behavioural problems are identified and targeted for intervention, are profoundly entangled in a capitalist market. One can easily see the unhealthy association between pharmaceutical companies’ involvement in the promotion and development of psychiatric research—a situation which encourages the development of additional psychiatric labels from which large financial benefits can be derived. It is almost unconceivable at this point to dissociate psychiatry from pharmacy. Yet, what is difficult to understand is the seemingly uncritical response from attendees regarding the ethical tensions at play in this venue. I could not have been the only person who experienced this situation.

However, while I stood immersed in this twilight zone, just a few of us seemed to notice the conflict and tension inherent in an almost exclusively pharmaceutically driven psychiatric conference.

Jean Daniel Jacob, RN, Ph.D.

Assistant Professor
University of Ottawa
Faculty of Health Sciences
School of Nursing