## Methods of Modifying Schizophrenia: Antipsychotic Medication and Evaluation

### Ethical Implications

**Side effects:**
One major issue with both antipsychotics is that they have side effects, such as tardive dyskinesia, Parkinsonianism and seizures. As a result, psychiatrists have to consider if the benefits offered to each individual are worth the potential cost of the side effects.

When an individual is first diagnosed with schizophrenia antipsychotics are administered without their valid consent, meaning the resultant side effects are not of their choosing.

**Chemical straitjackets:**
The antipsychiatry movement claims that antipsychotics are more than chemical straitjackets in other words they are simply a means of keeping people quiet and under control.

Thomas Szasz (1960) argues that physical treatments for mental disorder are no more sophisticated that believing in demonology. He suggested that the concept of mental illness was simply a way of excluding conformists from society.

This highlights an important ethical dilemma. Are antipsychotics administered to alleviate suffering or to increase compliance? On the other hand, if we offer the right to refuse antipsychotic medication, we need to be aware of the possible consequences (e.g. self-harm).

### Social Implications

**Asylums or care in the community:**
“Antipsychotic drugs revolutionised the care of schizophrenia from being an incurable condition to one that could be treated in the community” – Stephen Lawrie.

This emphasises the social revolution which took place with the introduction of antipsychotics – which was beneficial for patients as they could lead more normal lives and beneficial for society because of the cost of lifetime hospitalisation.

**Risk of violence:**
One very serious consequence on an individual who does not take their medication correctly may pose a threat to themselves or others. Jari Tiihonen et al (2006) noted a 37-fold increase in suicide I patients who stopped taking their medication.

The NCISH (2015) report that 346 homicides had been committed in England by people with a history of schizophrenia between 2003 and 2013 (6% of the total homicide rate); they also reported 29% of these individuals had been non-adherent with drug treatment in the month before the homicide.

Although we cannot be sure that lack of compliance to antipsychotic medication caused this 29% to commit homicide, it may most definitely be a risk factor.