

# Government Panel Decision Against Screening for Eating Disorders Consistent with Other Anti-Screening Research Findings

*Finding of no health benefit from eating disorders screening is consistent with research finding risks of harm, no benefit from any mental health screening.*

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/EINPresswire.com/ -- A new [recommendation](#) from the U.S. Preventive Services Task Force (USPSTF) advises that there is no direct evidence that screening adults and teens for eating disorders results in any actual health benefits or that any treatment given as a result of screening would result in improved health.

The USPSTF states: "There is no direct evidence that screening for eating disorders in adolescents and adults improves health outcomes."

What's more, the treatment given as a result of the screening to those deemed to have an eating disorder may not have any benefit to the patient. "There is inadequate evidence on the effectiveness of interventions for improving health outcomes in screen-detected adolescents and adults with eating disorders," according to the USPSTF.

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*U.S. Preventive Services Task Force*



The national medical guideline organizations in Canada and the U.K. have advised against any questionnaire-based mental health screening because of the lack of any direct evidence of benefit to patients.

The USPSTF's list of potential harms from screening includes false-positive results stemming from the subjective nature of the questionnaires used for screening. This leads to unnecessary referrals to mental health practitioners for further evaluation and the likelihood of a prescription

for a psychiatric drug.

The USPSTF notes the potential harm coming from the psychiatric drugs typically prescribed for eating disorders. These adverse effects include anxiety, insomnia, nausea, tremors, sexual dysfunction and, in the case of SSRI antidepressants, the impulsivity or mania that can lead to violence and suicide.

With implications for another harm from screening, a 2006 study found that simply [asking questions](#) about unhealthy behavior can increase that behavior. Researcher Patti Williams, professor of marketing at the University of Pennsylvania, and colleagues, reporting in *Social Influence*, wrote: "Of more concern, we demonstrate that when a question is asked about a socially non-normative health behavior (i.e., illegal drug use), instead of decreases in the behavior we see increased rates of the non-normative behavior." This means screening for a problem behavior actually increases the likelihood of that behavior occurring.



Research has found that asking questions about problem behavior, as in a mental health screening, can actually increase that behavior.



The false-positive results stemming from the subjective nature of the questionnaires used for screening leads to unnecessary referrals to mental health practitioners and the increased likelihood of being prescribed psychiatric drugs.

The USPSTF's counterparts in the U.K. and Canada, the U.K. National Screening Committee and the Canadian Task Force on Preventive Health Care, have recommended against all questionnaire-based psychological screening because of the lack of any direct evidence of benefit to patients, along with the potential for harm and wasted resources.

Researchers led by medical researcher Brett Thombs, Ph.D., professor in the department of psychiatry at McGill University, [reviewed](#) the recommendations on screening from the three major national guideline organizations. Their findings, published in 2017 in the British medical journal, *The BMJ*, noted that "recommendations for screening should ideally be based on direct evidence from high-quality randomized controlled trials (RCTs) that show a sufficiently large benefit to justify the costs and harms involved in screening," but that there were no RCTs with any direct evidence of improved health outcomes from mental health screening in any screening

recommendation.

The late Karen Effrem, M.D., a widely-known pediatrician and researcher, was outspoken and unequivocal about the harm to children and teens of mental health screening, writing: "Increased screening will result in the increased psychiatric drugging of children and adolescents."

"There is evidence of overuse of psychotropic medication in children and adolescents, with no evidence of effectiveness, and significant evidence of harmful, if not fatal side effects, including suicide, violence, psychosis, hallucinations, diabetes, and movement disorders," she wrote.

Allen Frances, M.D., also expressed concern about screening children. A psychiatrist and Professor Emeritus of Psychiatry and Behavioral Sciences at Duke University, he chaired the task force on the 4th edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders.

Writing in the Wall Street Journal in 2016 about depression screening for adolescents, Frances stated that no screening method can differentiate between the sadness which is very common in teens and deeper depression requiring treatment. He said that teens are "especially tough to diagnose" because their symptoms are fluid and highly responsive in the short run to pressures from family, friends and school.

He warned that "mislabeling a teen as mentally ill changes the way they see themselves and can ruin their lives." Concerning the psychiatric drugging of teens, he wrote: "Medical efficacy in adolescence is questionable and medications may increase the risk of agitation, impulsivity, suicide and/or violent behavior."

**WARNING:** Anyone wishing to discontinue or change the dose of a psychiatric drug is cautioned to do so only under the supervision of a physician because of potentially dangerous withdrawal symptoms.

The Citizens Commission on Human Rights (CCHR) was co-founded in 1969 by members of the Church of Scientology and the late psychiatrist and humanitarian Thomas Szasz, M.D., recognized by many academics as modern psychiatry's most authoritative critic, to eradicate abuses and restore human rights and dignity to the field of mental health.

The CCHR National Affairs Office in Washington, DC, has advocated for mental health rights and protections at the state and federal level. The CCHR traveling exhibit, which has toured 441 major cities worldwide and educated over 800,000 people on the history to the present day of abusive psychiatric practices, has been displayed at the Congressional Black Caucus Foundation Annual Legislative Conference in Washington, DC, and at other locations.

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