

CCHR Lauds Study Disproving “Chemical Imbalance” Causes Depression; It’s a Myth

Landmark study disproves that a “chemical imbalance” causes depression—a scientifically meaningless theory that has misled consumers

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/EINPresswire.com/ -- The mental health industry watchdog, [Citizens Commission on Human Rights International](#), has lauded a landmark study which debunks the theory that a “chemical imbalance in the brain causes depression” requiring antidepressants to correct it. Scientists at the University College London reviewed 17 major studies published over several decades and found no convincing evidence to support the theory.[1] The research confirms what CCHR has been exposing since the late 1980’s: the chemical imbalance theory has always been a marketing campaign with no basis in science. Jan Eastgate, president of CCHR, says the “chemical imbalance” myth is one of “the biggest mental healthcare marketing scams in modern history” that has helped drive \$15.6 billion-a-year in global antidepressant sales. In light of the study’s findings, media dubbed this the “\$15 billion hustle.”[2]



Landmark study disproves that a “chemical imbalance” causes depression—a scientifically meaningless theory that has misled consumers, while driving up antidepressant sales to \$15 billion a year.

Lead author of the study, Professor Joanna Moncrieff said: “The popularity of the ‘chemical imbalance’ theory has coincided with a huge increase in the use of antidepressants.”[3]

In the U.S. today, an astonishing 45 million Americans of all ages take antidepressants, of which 2.1 million are aged 0-17, per statistics CCHR obtained from IQ Via data tracking.

The study, published in *Molecular Psychiatry*, says the general public has been falsely led to believe that abnormalities in serotonin or other biochemical abnormalities are responsible for their moods. The idea that depression is the result of a chemical imbalance has influenced

people's decisions about whether to take or continue antidepressants and "may discourage people from discontinuing treatment, potentially leading to lifelong dependence on these drugs." [4]

The researchers warn: "In particular, the idea that antidepressants work in the same way as insulin for diabetes is completely misleading. We do not understand what antidepressants are doing to the brain exactly, and giving people this sort of misinformation prevents them from making an informed decision about whether to take antidepressants or not." [5]

Moncrieff and colleagues add, "Thousands suffer from side effects of antidepressants, including severe withdrawal effects that can occur when people try to stop them, yet prescription rates continue to rise."

The disinformation given consumers is also addressed in another study of which Prof. Moncrieff is one of its researchers. Published in April 2022 in *SSM-Mental Health*, researchers looked at highly cited reviews of the causes of depression, academic papers, and several textbooks published between 1990 and 2012. All of the textbooks and nearly all academic papers supported the chemical imbalance theory despite the lack of evidence: "The findings suggest that the serotonin theory was endorsed by the professional and academic community," the authors wrote, for which "the profession bears some responsibility." [6]

The "chemical imbalance" theory has potentially spawned other dangerous ideas such as that a "serotonin deficiency hypothesis" could be responsible for violent behavior. However, substantial studies link antidepressants and other psychotropics that could be prescribed to treat this to inducing violent behavior leading to the [commission of senseless violence](#). The British Medical Journal published: "Perpetrators of school shootings and similar events have often been reported to be users of antidepressants...." [7]

In 2005, *People* magazine asked the American Psychiatric Association (APA) what tests psychiatrists relied upon to confirm a chemical imbalance to which the APA president admitted: "We do not have a clean-cut lab test" to determine a chemical imbalance in the brain. [8] The APA Chair of Public Affairs also told a CBS news show that the theory was "probably drug industry derived."

Eastgate says, however, that "many psychiatrists propagated to patients that a chemical imbalance was the source of their woes. They weren't the victims of deceptive pharmaceutical marketing but willing accomplices."

Prof. Moncrieff said that telling patients their behavior is the result of a chemical imbalance conveys "the message that we are powerless to change ourselves or our situations. When things go wrong, it persuades us we need a pill to put them right." While not disparaging people making such choices, she said it is important that everyone knows how little evidence there is to support it. [9]

CCHR points to World Health Organization and UN Human Rights agencies that have criticized the failure of the biological model used in the mental health field. In July 2020, Dr. Dainius Pūras, a psychiatrist and UN Special Rapporteur on the Right to Health, advised that the dominance of the biomedical model has resulted in an overuse of medicalization and institutionalization.[10] “There is now unequivocal evidence of the failures of a system that relies too heavily on the biomedical model of mental health services, including the front-line and excessive use of psychotropic medicines, and yet these models persist,” Mr. Pūras explained.[11]

In February 2022, the UN Human Rights Commissioner reported that there is an overreliance on mental health drugs which are a “significant obstacle to the realization of the right to health.”[12]

Eastgate adds: “The chemical imbalance lie has been a significant obstacle. Morally and scientifically, mental health professionals should have stopped ‘diagnosing’ this, and consumers given the truth. They could have been spared false hopes and potentially dangerous psychotropic drugs, and lives saved.”

CCHR stipulates that no one should suddenly stop taking antidepressants or any psychotropic drug due to potential serious withdrawal effects and should withdraw only under medical supervision.

[Read full article here.](#)

[1] Joanna Moncrieff, et al., “The serotonin theory of depression: a systematic umbrella review of the evidence,” *Molecular Psychiatry*, 20 July 2022, <https://www.nature.com/articles/s41380-022-01661-0>

[2] “A \$15 billion hustle? Expert says pill-prescribing psychiatrists KNEW that depression isn't caused by low serotonin levels - as landmark study shows that pricy drugs do little to help mental health,” *Daily Mail*, 21 July 2022, <https://www.dailymail.co.uk/news/article-11035903/Expert-says-psychiatrists-KNOW-theory-low-serotonin-levels-cause-depression-incomplete.html>

[3] *Ibid.*

[4] *Op. cit.*, *Molecular Psychiatry*, 20 July 2022

[5] Jacqui Wise “‘No convincing evidence’ that depression is caused by low serotonin levels, say study authors,” *BMJ*, 2022, <https://www.bmj.com/content/378/bmj.o1808>

[6] Ang B., Horowitz M. & Moncrieff J., “Is the chemical imbalance an ‘urban legend’? An exploration of the status of the serotonin theory of depression in the academic literature,” *SSM –*

Mental Health (2022), <https://discovery.ucl.ac.uk/id/eprint/10147405/>

[7] CCHR's report, Psychiatric Drugs Create Violence and Suicide, Los Angeles, 2018, p. 31, <https://www.cchrnt.org/pdfs/violence-report.pdf>

[8] People Magazine, 11 July 2005

[9] Joanne Moncrieff, "The Chemical Imbalance Theory of Depression: Still Promoted But Still Unfounded," 1 May 2014, <https://joannamoncrieff.com/2014/05/01/the-chemical-imbalance-theory-of-depression-still-promoted-but-still-unfounded/>

[10] "The world must change the way mental health challenges are addressed, UN expert says," UN Human Rights Office of the High Commissioner, 6 July 2020, <https://previous.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=26039&LangID=E>

[11] <https://news.un.org/en/story/2017/06/558932-nothing-short-sea-change-will-end-years-gross-neglect-mental-health-care-un>

[12] Report of the UN High Commissioner for Human Rights, Mental health and human rights, 49th session, 28 Feb. - 1 Apr. 2022

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