

Mothers Act Fuels Multibillion Dollar Industry

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Motherhood has fallen prey to the psycho-pharmaceutical complex. If new legislation known as the Mother's Act becomes law, the drugging of infants through pregnant and nursing mothers will no doubt increase.

Congress has rightfully refused to pass this bill for eight years. The official title is currently the "Melanie Blocker Stokes Mom's Opportunity to Access Health, Education, Research, and Support for Postpartum Depression Act of 2009."

The legislation was introduced in the House during the 110th Congress on January 4, 2007, by Illinois Democrat Bobby Rush and later reintroduced into both bodies of the new Congress in January 2009, after the bill died in the Senate last year.

Democratic Senator Robert Menendez from New Jersey, home to a large number of drug companies, and Richard Durbin (D-IL) are the main sponsors of the bill in the Senate.

In a March 30, 2009 speech on the House floor, Congressman Rush identified the target of this piece of legislation when he claimed that, "60 to 80 percent of new mothers experience symptoms of postpartum depression while the more serious condition, postpartum psychosis, affects up to 20 percent of women who have recently given birth."

After the House voted to pass the legislation on that day, the Congressman stated: "H. R. 20 will finally put significant money and attention into research, screening, treatment and education for mothers suffering from this disease."

However, he only mentions screening and treatment for postpartum depression. The true goal of the promoters of this Act is to transform women of child bearing age into life-long consumers of psychiatric treatment by screening women for a whole list of "mood" and "anxiety" disorders and not simply postpartum depression.

Enough cannot be said about the ability of anyone with a white coat and a medical title to convince vulnerable pregnant women and new mothers that the thoughts and feelings they experience on any given day might be abnormal.

The constant watching and barrage of questions such as are you depressed, are you anxious, are you moody, are you fearful of motherhood, are you sleeping well, are there changes in your eating habits, will predictably have the net effect of convincing many women that normal thoughts and emotions are a sign of mental disorders.

In the March 13, 2008 NewsWithViews article, "Branding Pregnancy as a Mental Illness," Byron Richards writes:

"The Mothers Act has the net affect of reclassifying the natural process of pregnancy and birth as a mental disorder that requires the use of unproven and extremely dangerous psychotropic medications (which can also easily harm the child). The bill was obviously written by the Big Pharma lobby and its passage into law would be considered laughable except that it is actually happening."

While mania, psychosis, agitation, hostility, anxiety, confusion, depression and suicidality are often cited as “symptoms” of mental illness, many of the same exact “symptoms” are listed as side effects on the warning labels for antidepressants, antipsychotics and anticonvulsants.

All of these drugs are now being prescribed to treat the "mood" and "anxiety" disorders that women will be screened for if the Act becomes law. In the case of pregnant women, no psychiatric drug has been FDA approved as safe for use.

The newly recruited customers will be stigmatized for life with labels of the most serious forms of mental illness simply because they are unlucky enough to become pregnant in the United States, where serious disorders lead to major profits from the prescribing of multiple classes of psychotropic drugs.

On September 1, 2008, Medical News Today ran a headline for a study that stated: "Americans Show Little Tolerance For Mental Illness Despite Growing Belief In Genetic Cause." The study by University of Pennsylvania sociology professor Jason Schnittker showed that while more Americans believe that mental illness has genetic causes, the country is no more tolerant of the mentally ill than it was 10 years ago.

The study explored tolerance in terms of: unwillingness to live next door to a mentally ill person, having a group home for the mentally ill in the neighborhood, spending an evening socializing with a mentally ill person, working closely with such a person on the job, making friends with someone with a mental illness or having a mentally ill person marry into the family.

Multi-billion dollar industry

In an article for AlterNet on June 18, 2008, Dr Bruce Levine, author of the book, "Surviving America's Depression Epidemic," explains how the psycho-pharmaceutical cartel works. "Mental health treatment in the United States is now a multibillion-dollar industry," he reports, "and all the rules of industrial complexes apply."

"Not only does Big Pharma have influential psychiatrists... in their pocket, virtually every mental health institution from which doctors, the press, and the general public receive their mental health information is financially interconnected with Big Pharma."

"The American Psychiatric Association, psychiatry's professional organization, is hugely dependent on drug company grants, and this is also true for the National Alliance for the Mentally Ill and other so-called consumer organizations."

"Harvard and other prestigious university psychiatry departments take millions of dollars from drug companies, and the National Institute of Mental Health funds researchers who are financially connected with drug companies."

More Democrats than Republicans are supporting the Mother's Act. The increased campaign funding to Democrats may well explain this turn of events. For the last eight election cycles the pharmaceutical industry has contributed far more to Republicans than Democrats. In the 2006 cycle the percentage was 28% to Democrats and 70% to Republicans, according to the Center for Responsive Politics, a nonprofit group that tracks political funding.

But the Democrats were close to matching the Republicans for the 2008 cycle with \$5,099,942 to Democrats compared to \$5,680,871 to Republicans, which is probably why the Democrats would allow such an obvious drug marketing scheme to be implemented.

"The Mothers Act, while appearing like an Act of benevolence, is a dangerous and unnecessary measure that will result in the further over-prescription of drugs that are already grotesquely over-prescribed," says Kate Gillespie, one of the lead attorneys handling SSRI birth defect lawsuits and Paxil suicide cases at the Los Angeles based Baum, Hedlund, Aristei & Goldman law firm.

"The Act is a slippery slope," she warns, "toward the forced drugging of women of childbearing years with drugs of questionable efficacy and serious safety issues effecting mothers and their innocent children – drugs that can cause horrific side effects, including, suicidal behavior, violence and devastating birth defects."

"Of course, mothers who truly cannot cope should be helped," Ms Gillespie says, "but do we really need legislation requiring mothers to be screened and drugged?"

"Take out politics and Big Pharma and the push for this legislation just doesn't make sense," she states.

"For politicians, a much safer issue than pushing drugs for pregnant mothers is promoting the expansion of medical treatment for postpartum depression," according to Dr Levine.

He says the Mother's Act "omits relevant truths" about Melanie Blocker-Stokes, the woman the bill is named after, and the following information about her suicide should be made known:

"Blocker-Stokes... did in fact receive extensive psychiatric treatment. She was hospitalized three times in seven weeks, given four combinations of anti-psychotic, anti-anxiety, and antidepressant medications, and underwent electroconvulsive therapy (electroshock). But despite her psychiatric treatment -- or because of it -- Melanie Blocker-Stokes jumped to her death from the twelfth floor of a Chicago hotel."

"There is no evidence that antidepressant use by depressed mothers lowers their likelihood of suicide," Dr Levine says, "and there is a great deal of evidence that antidepressant use can make some people manic, agitated, and violent."

Money-making promoters behind the Act

Katherine Stone runs an internet website called "Postpartum Progress" and posts a daily blog. She also serves on the board of Postpartum Support International as the public relations outreach chairwoman. Her Bio says she "is a nationally-recognized, award-winning advocate for women with perinatal mood and anxiety disorders."

"In 2001," Katherine reports on her website, that "she suffered postpartum obsessive compulsive disorder after the birth of her first child. The feeling of isolation and shame she suffered inspired her to create Postpartum Progress, which has become the most widely-read blog in the United States on postpartum depression, postpartum OCD, antepartum depression, postpartum PTSD and postpartum psychosis."

On another page titled, "The Art of Psychiatric Medication," Katherine tells women to hang in there if a medication does not work because for her diagnosis of OCD, she states:

"I've taken many medications, including Effexor, Celexa, Seroquel, Risperdal, Wellbutrin, Luvox, Cymbalta, etc. Throughout all of them, I was on the road to recovery. Some just worked better than others at treating my symptoms."

She ends the commentary by telling women: "You *will* find the right medication for you, and you *will* get better."

The prescribing of seven drugs, including two antipsychotics and five antidepressants, to treat OCD is a typical example of the profit-driven drugging that women snagged by the Mother's Act will face, but it's a far cry from the description Katherine wrote about regarding the comparatively minor treatment she received, when she stated in the June 7, 2004 issue of Newsweek, "in my case, that meant taking an antidepressant and going for weekly therapy sessions."

Aside from all the serious health risks now known to be associated with these drugs, most women could not afford the 7-drug "cure" that Katherine ingested. According to DrugStore.com in December 2008, from first to last, at a middle dose for a 30-day supply, the drugs would cost: Effexor \$197.86, Celexa \$279.92, Seroquel \$388.38, Risperdal \$652.07, Wellbutrin XI \$202.08, Luvox CR \$135.99, and Cymbalta \$366.62. The cost of "etc" is impossible to calculate without knowing how many more drugs she took.

In a March 11, 2009 Postpartum Progress blog, Katherine plugs herself for speaking jobs, along with a study that concluded "the Internet is a viable and feasible tool to screen for PPD."

"I'll be adding this study to the speech I give on how women with perinatal mood and anxiety disorders use the Internet," she reports, and then adds:

"If you're interested in having me speak at your event, let me know!"

On March 10, 2009, Katherine's headline read: "It's Petition Signing Time! Get Out Your Virtual Pen & Support Women with PPD", and reported "that Susan Stone over at Perinatal Pro is alerting everyone to the new petition created by the Depression and Bipolar Support Alliance to support the Melanie Blocker Stokes MOTHERS Act. She states that last year's petition generated more than 24,000 signatures. The petition has been reintroduced this year to try and get this legislation passed once again."

The blog carried a live link to a page where "you can scroll down, enter your zip code and generate letters of support in a matter of seconds for the Melanie Blocker Stokes MOTHERS Act that will be sent to your local Congresspeople and Senators."

Katherine further told readers: "I know you're thinking 'but I already did that last year.' Well that was then and this is now. Do it again."

The 2007 Annual Report for the Depression and Bipolar Support Alliance shows this Big Pharma front group received between \$150,000 and \$499,000 from AstraZeneca, Pfizer, and Wyeth. Abbott Labs, Cyberonics, Eli Lilly, Forest Labs, GlaxoSmithKline, Organon, and Otsuka American Pharmaceuticals each gave between \$10,000 and \$149,999.

The 2006 Annual Report shows that AstraZeneca gave the group more than \$500,000. Abbott Labs, Bristol-Myers Squibb and Wyeth gave between \$150,000 and \$499,000, and Forest Labs, Glaxo, Janssen, Pfizer, and Shire Pharmaceuticals each gave between \$10,000 and \$149,000. The Depression and Bipolar Support Alliance in Baltimore also received \$5,000 from Eli Lilly in the first quarter of 2008, according to Lilly's grant report.

In the section of the 2007 Annual report "at a Glance: How We Met Our Mission," among the things accomplished by the group, it states:

"Promoted Melanie Blocker-Stokes Postpartum Depression Research & Care Act at invitation of Rep. Bobby Rush (D-Ill.)

"Promoted MOTHER's Act at invitation of Sen. Dick Durbin (D-Ill.)"

After writing letters to Congress through the link established by the industry funded Alliance, those visiting Postpartum Progress will hopefully click on the link to Amazon and buy the book "Perinatal and Postpartum Mood Disorders: Perspectives and Treatment Guide for the Health Care Practitioner" by none other than the Perinatal Pro "expert," Susan (Dowd) Stone, and Alexis Menkin, at a special price of \$43.20, for a savings of \$10.80.

Katherine also provides a link to the PerinatalPro website, where women can find treatment for all the "mood" and "anxiety" disorders diagnosed with internet screenings at "Blue Skye Consulting," where Susan is listed as the Managing Director and Owner.

She also served as president of Postpartum Support International from 2006 - 2008, as vice-president and Conference Chair in 2005 - 2006, and will chair the group's President's Advisory Council through 2010. This group brags of being the leading proponent of the Mother's Act. On March 2, 2009, Susan's PerinatalPro Blog announced: "The Melanie Blocker Stokes MOTHERS Act moves forward!" and stated:

"Thank you to Congressman Bobby L. Rush, U.S. Senator Robert Menendez and Senator Richard Durbin for your unceasing efforts on behalf of America's mothers!"

She should have thanked these members of Congress for boosting her career status and yearly income from her treatment center, speaking fees and book sales.

On PerinatalPro, Susan posts a running list of supporters for the Mother's Act. On March 27, 2009, the list included many drug company funded groups. For instance, the American Psychiatric Association is listed as a supporter. In 2006, the pharmaceutical industry provided close to 30% of the Association's \$62.5 million in financing, according to the July 12, 2008 New York Times.

In the first quarter of 2007, Eli Lilly gave the Association grants worth more than \$412,000, according to Lilly's grant report. The group also received \$623,190 from Lilly in the first quarter of 2008.

In her PerinatalPro blogs, Susan has nothing but praise for Katherine's website and directs visitors back to Postpartum Progress with a live link. On March 16, 2009, Katherine posted a "Quick Survey on Postpartum Anxiety," and wrote:

"The fabulous Karen Kleiman has asked me to ask you to participate in a short, five-question online survey on anxiety. She says ANYONE can answer it, regardless of the age of their baby(s) and regardless of diagnosis or lack thereof. ANY mother should answer the questions. It's super quick -- I know because I took it myself."

Kleiman must be fabulous because she has three books for sale on Postpartum Progress with links to purchase them on Amazon. In fact, there are a total of fourteen books for sale on Katherine's site from which she most likely gets a kick-back with every sale.

Kleiman's survey is an excellent example of the methods used to con women into suspecting they are mentally ill via the "expert" blogs. The preface states: "The questions on this survey can be answered by a new mother of an infant or an empty-nester with good recall of the early days with her baby. Please answer as honestly as you can."

The question, capital letters and all, reads: "When you were carrying your baby down a flight of stairs, did you EVER, at ANY time, have ANY thought, image or concern that you could accidentally drop your baby?" The survey further tells women:

If you answered YES to the first question, please describe the type of worry you had:

Scary thoughts about dropping the baby, Scary images about dropping the baby, Both thoughts and images, Other.

How much distress did this cause you? A Great deal of distress, Some distress but I quickly got over it, Some distress that seemed to linger, Not much stress

Did this thought or image occur once or did it recur? Only once, It recurred frequently, It recurred persistently, It occurred off and on, Did you ever tell anyone about the fear of dropping the baby? (Please describe why you chose to tell someone or why you chose not to)

As a mother with good recall, the "honest" answer is yes, with two babies born 4 years apart, every single night as I stumbled out of bed half asleep for a nightly feeding, my normal fear instinct kicked in and warned me to be careful not to trip and fall down the stairs or drop the baby.

Women who take the survey are told nothing about what the results mean; but clearly the seed is planted that something is wrong if you "EVER, at ANY time, have ANY thought, image or concern that you could accidentally drop your baby".

Katherine's website also provides links to the "Top Women's PPMD Treatment Programs & Specialists." The first link on the list takes women to the "Emory Women's Mental Health Program" that primarily focuses on "the evaluation and treatment of emotional disorders during pregnancy and the postpartum period," according to Emory University's website. Lilly's 2008 first quarter grant report shows Emory's Department of Psychiatry received \$25,000.

The "experts" at Emory include some top pharmaceutical industry shills. For example, a link to "Articles" brings up roughly 90 studies and papers that include the co-author Dr Charles Nemeroff. Nemeroff is on an ever-growing list of academic researchers in the field of psychiatry under investigation by the US Senate Finance Committee for not disclosing millions of dollars of income from the makers of psychotropic drugs.

Emory's investigation found he was paid more than \$960,000 by Paxil maker, GlaxoSmithKline, from 2000 through 2006, but listed less than \$35,000 on his Emory disclosure forms. All totaled, Nemeroff had earnings of \$2.8 million from speaking and consulting arrangements with drug companies between 2000 and 2007, but only disclosed a fraction of that amount, according to the Senate Finance Committee reports.

On July 23, 2008, Medscape Psychiatry & Mental Health posted an article by Nemeroff titled: "Weighing Risk and Benefit for Treatment of Depression in Pregnancy and Post Partum". On March 17, 2009, the Medscape website stated: "This article is temporarily unavailable."

Maybe that's because the "top expert," Dr Nemeroff, recently stepped down as chairman of Emory's psychiatry department.