



# Open letter to the Secretary of State for Health: 'Ethical, Professional and Scientific Standards of the Royal College of Psychiatrists'

**Professor John Read & 30 others**

School of Psychology  
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## Introduction and Context by James Moore

What led a group of 30 academics, psychiatrists and people with lived experience to formally complain to the Royal College of Psychiatrists about public statements made regarding withdrawal from antidepressant drugs?

On 21 February 2018, *The Lancet* reported the results of a meta-analysis<sup>1</sup> of 522 placebo-controlled trials of antidepressant drugs. The UK media provided wide coverage of the study, expressing the opinion that the study should 'end all debate'<sup>2</sup> about the efficacy and safety of antidepressants.

In response, a number of prominent academics and psychiatrists including Dr Joanna Moncrieff, Professor John Read and others pointed out<sup>3</sup> the media's lack of critical appraisal and the problems with the study itself, including the fact that adverse effects and withdrawal difficulties were not acknowledged.

A formal reply to this criticism was made on 24 February in a letter to *The Times*. Professor David Baldwin, Head of the Royal College of Psychiatry's Psychopharmacology Committee, wrote:

Furthermore, the statement that coming off antidepressants has disabling withdrawal effects in many patients 'which often last for many years' is incorrect. We know that in the vast majority of our patients, any unpleasant symptoms

experienced on discontinuing antidepressants have resolved within two weeks of stopping treatment.

By 28 February, nine mental health professionals had written<sup>4</sup> to Professor Wendy Burn, RCPsych President and Professor David Baldwin in accordance with the Royal College's complaints procedure. The letter requested a public retraction of *The Times* statement or the provision of the evidence in support of it. The letter included evidence showing that withdrawal from antidepressants was a significant and prominent problem for a number of users.

Professors Burn and Baldwin duly responded to the complaint but provided no evidence in support of the two-week claim. Neither had they seen fit to publicly retract a statement that, when taken at face value, could easily lead patients into becoming dependent on antidepressants.

Following this reply, Professor John Read and members of the Council for Evidence-Based Psychiatry amplified upon the original complaint, providing evidence in support of the view that antidepressant withdrawal was a significant issue for many people. The letter was signed by 30 academics, psychiatrists and those with lived experience, and was shared with the Royal College on 9 March.

Since then, there have been a number of communications back and forth, but the Royal College has sought to downplay

requests for clarification. Following College's refusal to retract their public statement minimizing the withdrawal effects of antidepressant drugs, and their suppression of research evidence that contradicts their statement, on 17 July the group of 30 wrote to the new Secretary of State for Health and Social Care to inform him that 'the Royal College of Psychiatrists is currently operating outside the ethical, professional and scientific standards expected of a body representing medical professionals'.

### **The Letter**

Url: [www.madinamerica.com/2018/07/30-mental-health-experts-write-secretary-state-unprofessional-conduct-uk-royal-college-psychiatry](http://www.madinamerica.com/2018/07/30-mental-health-experts-write-secretary-state-unprofessional-conduct-uk-royal-college-psychiatry)

The Rt Hon. Matt Hancock MP  
Secretary of State for Health and Social Care  
Department of Health  
79 Whitehall  
London  
SW1A 2NS

July 17, 2018

Dear Mr Hancock

### **Ethical, Professional and Scientific Standards of the Royal College of Psychiatrists**

We write to you as a group of mental health experts (including eight professors, ten psychiatrists, and ten people who have experienced the withdrawal effects of antidepressants for between 11 months and ten years), because we have become convinced that the Royal College of Psychiatrists (RCPsych) is currently operating outside the ethical, professional and scientific standards expected of a body representing medical professionals.

On April 26, 2018, in the House of Lords, the Earl of Sandwich said:

*'On 24 February, the president of the Royal College of Psychiatrists and a colleague wrote in The Times that for "the vast majority of patients, any unpleasant symptoms experienced on discontinuing antidepressants have resolved within two weeks of stopping treatment".*

*This statement has appalled a large number of psychiatrists and patients who have lodged a complaint with the RCP, including some who have experienced withdrawal effects for between 11 months and 10 years. Even the Royal College's own survey of 800 users found that withdrawal symptoms generally lasted for up to six weeks, with a quarter reporting that anxiety lasted more than three months. If even one of our leading institutions can mislead Times readers on a matter of public safety, what hope do the Government have of explaining these things to the general public?'*

We had originally written to the two senior officials responsible for the misleading statement, but they declined to either retract the statement or provide any compelling research evidence to support it. So we felt it incumbent upon us to register a formal Complaint with the RCPsych about such a misleading and potentially dangerous public statement made by two of its senior leaders, minimizing the seriousness and duration of the withdrawal effects of antidepressants.

The Complaint was dismissed by the Registrar without initiating a full investigation, and without a right of appeal. As is clear from the accompanying documentation [not included here – ed.], the four stated reasons for the peremptory dismissal were all either irrelevant or untrue.

We have waited four weeks for a response to our last letter to the RCPsych (19.6.2018). It seems we must accept that our endeavours to have the RCPsych respond in a responsible, professional manner to our concerns have come to nought and that we have therefore reached the end of our options for engaging with the RCPsych via its own processes.

Before deciding whether to take our original Complaint about the two senior officials of the RCPsych to the General Medical Council, and/or to lodge a Complaint about the RCPsych as an organisation with the Charity Commission because of their subsequent conduct, we ask that you review our requests of the RCPsych (below) and consider intervening, if only to encourage the RCPsych to reconsider those requests (including the simple request to meet with them – #7).

We understand the RCPsych is not directly accountable to yourself or Parliament. We would, nevertheless, ask you to consider suggesting to the RCPsych that it would be in the public interest for them to respond meaningfully to try to resolve the serious issue we have raised.

This is a matter of grave concern since it involves information about prescription medications taken by millions of people across the UK. We feel that this matter requires urgent attention and should not await the results of the Public Health England review into Prescribed Drug Dependence.

Our requests to the RCPsych, which we do feel are in the public interest, follow. They have been given to RCPsych on several occasions and have been consistently either ignored or dismissed.

We hope you may be in a position to ask RCPsych to respond in a more professional manner, which places the public interest on at least an equal footing as its guild interests.

- Publicly retract, explain and apologise for the misleading statement, in *The Times* and on the RCPsych website.
- Provide guidance or training for all RCPsych spokespersons, including the current President, on (i) the importance of ensuring that public statements are evidence-based, and (ii) the limitations of relying on colleagues who are in receipt of payments from the pharmaceutical industry (e.g. Professor Baldwin).
- Review policies and procedures relating to the holding of positions of responsibility within the RCPsych by members who are in receipt of drug company payments, including Professor Baldwin.
- Provide new evidence-based information about antidepressants and adverse effects, including withdrawal effects, and guidance about how best to withdraw, to be issued by the RCPsych and generated and agreed on the basis of a joint working group including some of ourselves and withdrawal sufferers.
- Reinstate, on the RCPsych website, the document 'Coming Off Antidepressants', including the results of the survey that contradicts the false statement and accurately reflects the experiences of over 800 antidepressant recipients.
- Make a commitment to advocate for more research, using a range of methodologies, into the duration and nature of symptoms following withdrawal from antidepressants, and into tapering protocols and treatments to assist people to withdraw safely.
- Arrange an informal roundtable meeting with Professors Burn and Baldwin and one or two other RCPsych representatives (perhaps chosen jointly by the Disciplinary and Complaints Committee and the President) with an equal number of ourselves, with the goal of moving on from a complaints procedure, and the difficult feelings involved therein, in such a way that we are all genuinely working together, in our inevitably different ways, to, in the words of Professors Burn and Baldwin in their responses above, 'help our patients recover' and to not only 'make sure depressed and anxious patients receive the best possible care' but also those withdrawing from antidepressants.

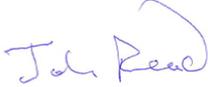
We have appended the original Complaint, with all the relevant research evidence and correspondence. We believe the RCPsych responses show a trail of obfuscation, dishonesty and inability or unwillingness to engage with a concerned group of professionals, scientists and patients.

If a group of scientists and psychiatrists together cannot challenge the RCPsych in a way that leads to an appropriate, considered response and to productive engagement with the complainants, what hope is there for

individual patients to have a complaint taken seriously?

In the interests of public interest and safety, we are making this letter, and any response thereto, public, and copying it to other MPs and members of the House of Lords and the Scottish and Welsh Assemblies with a special interest in mental or public health.

Yours sincerely



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(Clinical Psychology, University of East London)

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on behalf of:

**Claire Ashby-James** (withdrawal effects from Escitalopram – 1 year, 9 months) Berkshire  
**Emeritus Professor Mary Boyle** (Clinical Psychology) University of East London  
**Dr Pat Bracken** (Psychiatry) County Cork  
**Dr Steven Coles** (Clinical Psychology) Nottinghamshire Healthcare NHS Foundation Trust  
**Dr Duncan Double** (Psychiatry) Norfolk and Suffolk NHS Foundation Trust  
**Tabitha Dow** (withdrawal effects from Venlafaxine – 2 years, 4 months) Berkshire  
**Alyne Duthie** (withdrawal effects from Venlafaxine – 4 years) Aberdeenshire  
**Dr Peter Gordon** (withdrawal effects from Paroxetine – 4 years) Stirlingshire  
**Professor Peter Gøtzsche** (Medical Research) University of Copenhagen  
**Dr Peter Groot** (Psychiatry) University of Maastricht  
**Carina Håkansson** (Psychotherapy) International Institute for Psychiatric Drug Withdrawal  
**Dr Christopher Harrop** (Clinical Psychology) University College London  
**Dr Oliver James** (Clinical Psychology, Author)  
**Ann Kelly** (withdrawal effects from Fluoxetine & Venlafaxine – 10 years) West Dunbartonshire  
**Stevie Lewis** (withdrawal effects from Paroxetine – 4 years) Monmouthshire  
**Nora Lindt** (withdrawal effects from Venlafaxine – 3 years) Dublin  
**Dr Hugh Middleton** (Psychiatry) University of Nottingham  
**James Moore** (withdrawal effects from Mirtazapine – 11 months) Monmouthshire  
**Sinead Morris** (withdrawal effects from Paroxetine – 3 years) County Antrim  
**Professor Jim van Os** (Psychiatry) University of Maastricht; Institute of Psychiatry, London  
**Danielle Park** (withdrawal effects from Mirtazapine/Depakote – 4 years, 4 months) Kent  
**Dr Margreet Peutz** (Psychiatry) CGG Brussels, Belgium  
**Professor Nimisha Patel** (Clinical Psychology) University of East London  
**Professor David Pilgrim** (Clinical Psychology) University of Southampton  
**Professor Paula Reavey** (Psychology) London South Bank University  
**Dr Clive Sherlock** (Psychiatry) Oxford  
**Dr Derek Summerfield** (Psychiatry) King's College London  
**Dr Philip Thomas** (Psychiatry) (retired, ex University of Central Lancashire)  
**Professor Sami Timimi** (Psychiatry) Lincolnshire Partnership NHS Foundation Trust  
**Jo Watson** (Psychotherapy) Birmingham

cc

**Jackie Doyle-Price** MP – Under Secretary of State – Mental Health & Inequalities  
**Nicola Blackwood** MP – Under Secretary of State – Public Health & Innovation  
**John Ashworth** MP – Shadow Secretary of State – Health & Social Care  
**Paula Sherriff** MP – Shadow Minister – Mental Health  
**Baroness Judith Jolly** – Health Spokesperson, Liberal Democrats

**Caroline Lucas** MP – Co-leader, Green Party

**Jeane Freeman** MSP (Scottish Assembly) Cabinet Secretary – Health and Sport

**Dr Lisa Cameron** MP – Mental Health Spokesperson, SNP

**Vaughan Gething** AM (National Assembly for Wales) – Cabinet Secretary – Health & Social Services

**Rhun ap Iorwerth** AM (National Assembly for Wales) – Shadow Cabinet Secretary – Health, Well-being & Sport;  
Plaid Cymru

**David Rowlands** AM (National Assembly for Wales) Petitions Committee Chair

**Sir Oliver Letwin** MP – Chair, All Party Parliamentary Group for Prescribed Drug Dependence

**Luciana Berger** MP – All Party Parliamentary Group for Prescribed Drug Dependence

**Paul Flynn** MP – All Party Parliamentary Group for Prescribed Drug Dependence

**Norman Lamb** MP – All Party Parliamentary Group for Prescribed Drug Dependence

**The Earl of Sandwich** – All Party Parliamentary Group for Prescribed Drug Dependence

**Baroness Masham of Ilton** – All Party Parliamentary Group for Prescribed Drug Dependence

**John McDonnell** MP

**Jess Phillips** MP

**Eleanor Smith** MP

#### Notes

1 See [www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)32802-7/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)32802-7/fulltext)

2 See <https://uk.reuters.com/article/uk-health-antidepressants/study-seeks-to-end-antidepressant-debate-the-drugs-do-work-idUKKCN1G52Y9>

3 See [www.theguardian.com/science/2018/feb/23/why-we-are-sceptical-of-antidepressant-analysis](http://www.theguardian.com/science/2018/feb/23/why-we-are-sceptical-of-antidepressant-analysis)

4 See <http://cepuk.org/2018/03/01/royal-college-psychiatrists-challenged-burying-inconvenient-antidepressant-data/>