

Submission template

Response to *Review of the Mental Health Act 1986 Some key questions*

Introduction

This template is designed to assist people in making a submission in response to the *Review of the Mental Health Act 1986 Some key questions* paper. It contains a list of the questions posed in the paper. Comment is welcome on any matter related to the Act, and need not be limited to the questions in the paper or the *Consultation paper*.

Please note: Closing date for submissions is 5:00pm on Friday 27 February 2009. The use of this template is optional.

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List of questions in *Review of the Mental Health Act 1986 Some key questions* paper

Framework for reform (Ch.2)

(a) What other reforms could the new Act include?

Prohibiting barbaric treatment such as ECT, Psychosurgery and forcible injections of dangerous drugs without mandatory testing to determine if the patient is in fact allergic to these drugs, or appropriate analysis to determine if the dosage and dangerous prescribing practice of combination prescribing is contributing to or provoking the symptoms commonly diagnosed as Mental Health Disorders.

Urgent attention to Prohibiting any involuntary treatment of children under 18 years and stricter penalties for those breaching both this act and the Therapeutic Goods Act and regulations in respect to prescribing unapproved and unregistered drugs that are not recommended for children.

Prohibiting ECT and Psychosurgery for any child with or without their parents consent. It is a barbaric form of treatment and has long been considered by the general community to have been outlawed decades ago.

Involuntary orders (Ch.3)

(b) When should people who are seriously mentally ill be able to be placed on an involuntary order under the new Act?

Without breaching the Charter of Human Rights and Responsibilities Act there is no lawful provisions to approve continued involuntary orders against any human being, unless they are orders in respect to Criminal activity which are accounted for in the Criminal Act.

It is scientifically proven by more adequately qualified medical practitioners (non psychiatrists) confirming there is no definitive way to determine if a person is suffering from a mental health disorder. There is also significant clinical data and scientific evidence to confirm that psychotropic drugs provoke and cause symptoms associated with Mental Health Disorders commonly diagnosed and promoted by the Psychiatric profession.

There are scientific tests to determine if a person or child is suffering from a drug induced psychosis and these tests are conclusive, before any psychiatrist is allowed to play judge and jury and label a person mentally ill, there should be mandatory testing to determine if they have defective genes in their liver and are simply suffering from a high blood toxicity which is provoking their symptoms. The illegal drugs use the same pathways as the psychotropics so if a person is suffering from a "temporary" psychosis from illegal drugs it is insanity to allow a doctor to immediately force them to ingest another drug that requires the same pathways and will lead to further toxicity levels in their blood. Labelling them Schizophrenic and permanent disabled. Drug induced psychosis is CURABLE, obviously this is not good news for the Pharmaceutical Industry or the Psychiatric profession who rely on their funding, but this Review is about the people and their rights and not the pockets and interests of industry.

(c) How could the new Act improve ITOs and CTOs to better meet patients' needs?

Respect patient's rights to decline treatment with drugs that are contraindicated for their condition and Prohibit ITO's and CTO's as it is a violation of their rights and a breach of our new legislation the Charter of Human Rights and Responsibilities.

If a patient is suffering from a drug induced psychosis and is representing a risk to the community, and by risk I mean immediate violence and aggression, there are ample powers provided to the Police to detain them and organise a medical assessment if appropriate. I don't mean a psychiatric evaluation but a physical assessment to determine why they are suffering from psychosis. People do not become psychotic without explanation it is always due to a physical reaction that results in displaying symptoms of Akathisia and psychosis.

All other psychosis outlined in the DSM is promotional propaganda to increase the sale and distribution of psychotropic drugs. There is no evidence of a scientific standard that the psychotic disorders promoted in the DSM are non related to illegal or prescription drugs. The manual does include drug induced psychosis but coincidentally nobody is ever diagnosed with this condition, as is

confirmed by the Mental Health Review Boards annual reports. Of course if patients were appropriately tested and assessed, they would most likely recover, meaning a cure and that does not serve the agenda of Pharma or the Psychiatric profession.

Patient participation (Ch.4)

(d) How could the new Act improve patient participation in decisions about treatment and care?

By dictating that the patient has the right to make the final decision, it is accepted that a psychiatrist may have an opinion but not control over a human being, what century are we living in that we have allowed this to continue.

If a patient is unwell and suffering from severe psychosis and represents an immediate danger to the community and refuses to undergo appropriate health checks such as a physical check up and pathology testing, then they need to be made aware that if they are discharged from emergency or a clinic they will be subject to the Criminal system.

If they are deemed to be dangerous by the Police they can be detained and this will provide the appropriate time for them to detox, no different than when a criminal blames the behaviour on their heroin habit, except in the case of a drug reaction to psychotropics, if the doctor has negligently failed to obtain informed consent the patient will be in a position to press both criminal and civil charges against the prescriber.

Electroconvulsive therapy (ECT) (Ch.5)

(e) How should the new Act deal with ECT?

PROHIBIT THIS BARBARIC TREATMENT IMMEDIATELY, for those interested in the Top 10 most INSANE treatments of our history, please refer to the link below. We no longer attach leeches to people's bodies to cure them, we also do not burn innocent women accused of witchcraft, so why are we still allowing these Mad Men to forcibly strap down Victorian men, women and children and shock their brains with volts of electricity. To anybody reading this submission, I encourage you to take a few moments to imagine the pain, shock and horror these patients endure but placing yourself in the chair.

http://www.cracked.com/article_15669_10-most-insane-medical-practices-in-history.html

It has long been considered by the general community that this barbaric treatment was abolished. It has been proven scientifically that this form of treatment causes permanent brain injury, death and a host of other disorders if the patient is even able to partially recover and our State and Country are allowing Psychiatrists to misuse the Act to shock children as young as 4. Imagine going into a kindergarten and dragging out a pre schooler to shock their brain with 100 volts of electricity, it is inconceivable.

Restraint and seclusion (Ch.6)

(f) How should the new Act deal with restraint and seclusion?

It has been proven over and over again the vague interpretation in the Act has been abused to restrain and detain innocent victims in seclusion for weeks on end. Without shower or toilet facilities, they are made to defecate in a cardboard box, they are even deprived of natural light which according to Psychiatry is a form of treatment.

Prohibit seclusion and restraints immediately it is barbaric, according to the United Nations they confirmed this is the type of treatment used against terrorists as is well recognised as a form of Torture, they have outlawed this type of treatment. Victorian legislators have a moral and legal obligations to abide by the United Nations recommendations considering we have just passed our own Charter of Human Rights legislation.

External review (Ch.7)

(g) How should the new Act deal with external review of involuntary orders?

If you Prohibit Involuntary Orders you will not need to waste further taxpayer money which upto date has funded a biased and compromised tribunal, the Mental Health Review Board. Their own reports confirm less than 5% of patients will receive justice from this department which is funded and managed directly by the Department of Human Service, who also happen to have a vested interest in the majority of approved mental health facilities.

I recently spoke with the Executive Director of the MHRB who confirmed his contempt for patients rights and his alliance with the approved mental health facilities, to the point of deliberately breaching the MHRB's own administrative policies and guidelines in respect to a patients appeal application.

Any determination and judgement related to a human being should be done so through the normal legal channels and only decided by a judge or jury, not a compromised division with inappropriate alliances to their psychiatric associates.

Monitoring patient wellbeing (Ch.8)

(h) How could patient rights and wellbeing be protected and monitored in the new Act?

Stricter penalties for psychiatrist who abuse or refuse to obtain informed consent from the patient or their families. These psychiatrist should be accountable for both criminal and civil charges if they breach the provisions made in the act.

Mandatory pre testing for CYP450 genetic disorders, independent medical practitioners providing physical assessments of patients prior and during any intervention by a psychiatrist, including appropriate pathology testing to determine any allegations made by the psychiatrist.

Complaints (Ch.9)

(i) How could the new Act improve the complaint system for mental health?

Provide adequate Legal Aid and improve the funding for Mental Health Advocates who have a genuine and legitimate concern for the rights of patients. Each patient should be entitled to engage a lawyer of their choice and if the legislators and determined to continue involuntary treatment this should be funded by the Department of Health and Human Services.

Any appeal should be heard before a Judge and not a compromised tribunal who has already proven they have wasted both the taxpayers money and served as contributing to the violation of thousands and thousands of patients rights.

Confidentiality and information sharing (Ch.10)

(j) When should patient information be shared with others?

It should not be shared with others unless in accordance with the Privacy Act and with the patients consent.

Please attach any further comments.

Until September 2007, I was not even aware there was a Mental Health Act or the dangerous treatments used by the psychiatric profession to treat Adults. I was even more shocked to discover these treatments and restraints were also being commonly used on children and adolescents.

My teenage daughter was negligently prescribed a psychotropic drug for a physical condition that had nothing to do with a mental health disorder and suffered a severe adverse reaction because she is genetically polymorphic. The doctor did not obtain informed consent as is required by the regulations and so we were not informed that psychotropic drugs are not approved or recommended for the use in people under under 18. It is our Federal Drug Regulator the Therapeutic Goods Administration who confirm they are unapproved, unregistered and not recommended for children, because they provoke dangerous and life threatening side effects including the symptoms they claim to cure.

In my investigation to uncover why my daughter and hundreds of thousands of other Australian children were negligently prescribed these drugs, I discovered that the majority of adolescent mental health facilities were promoting these types of drugs as the first line of therapy. They are deliberately not advising the parents or the patients of the dangers and risks involved. When the children suffer from the common side affects such as suicidal ideation and self harm, including aggressive and violent behavior the approved mental health professionals falsely advise that these symptoms are confirmation of a mental health disorder, rather than addressing the confirmed and common side affects documented by significant scientific clinical trial data. Their response to these drug induced reactions is to increase the medication to 3-4 times the legal dosage for adults which obviously results in further injury and suffering to these innocent children. It is common practice for this industry to combine dangerous levels of these drugs to children and in dosages outside approved indications for adults without consequence.

Involuntary Treatment of Children Recommendation

There should be provisions included in the Act to Prohibit Involuntary Treatment for children under 18. There are currently no provisions in the Act to prohibit this action and subsequently these children and their families are at the mercy of negligent and

unscrupulous personnel who interpret the law to include any age. They have no regard to other legislative restrictions outlined in the Therapeutic Goods Act or regulations. What I was most horrified by was when I challenged the hospital's treatment after discovering the facts on the TGA website, I was threatened with the Mental Health Act which is commonly utilised by this industry to remove parent's rights. Then they are free to violate these children which extends to overdosing these innocent young people with dangerous and unapproved drugs including ECT, a barbaric and torturous treatment for adults but inconceivable for children.

It is scientifically proven that the use of ECT as a form of treatment and I use the word "treatment" loosely, contributes to permanent brain injury and death and has long been considered by the general community to be abolished. It is not until you experience the treatment from within this industry are you confronted by the horror that this barbaric treatment is still being carried out in our public hospitals and promoted as suitable treatment for children as young as 4 years old.

All Victorians now consider themselves to be protected by the Human Rights legislation, so how can it be possible that children are not protected from involuntary treatment that always and without exception, involves treatment with unapproved, unregistered and unlawful medication including extended periods in torturous seclusion, restraints and the barbaric act of ECT. The United Nations have already outlawed seclusion claiming it is a form of torture, to fail to protect a child in Australia from torture especially in a public hospital is unconceivable. Yet the failure of the Act to make provisions to protect these children has resulted in thousands and thousands of preventable injuries and many deaths and without consequence.

There can be no legal parameters to pass legislation that legitimately allows the treatment of children and adolescents with psychotropics without the written "INFORMED CONSENT" of the parent. Which would obviously include informing them that these drugs are not recommended or approved and why. There must be provisions included in the Act to prevent the involuntary treatment of a child (a person under 18). If a parent/guardian of child is "informed" in accordance with the definition of Informed Consent within the Therapeutic Goods Regulations and agrees to experiment with these drugs as a form of treatment as a last resort, then the Secretary needs to approve such action as it is defined as "experimental" and in failing this process it becomes unlawful. In the event that a parent declines the treatment after being provided the facts and warnings, it is a Human Rights violation to make legislative provisions to allow a medical doctor to remove the rights of the parent. They are ample services and legislation already available to protect children at risk and it is for the courts to determine if the parents decision to refuse treatment via dangerous, unapproved drugs actually represents a risk or is it simply responsible parenting.

Our government has already determined that these drugs are too dangerous to be approved for registration on the ARTG for children and our Federal Health Minister Nicola Roxon has confirmed they are contraindicated for children. Now it is the responsibility of our State to ensure that the appropriate provisions are made to include these restrictions within the Mental Health Act

Recommendation for ECT and Treatment Orders for children

There should be legislation to PROHIBIT, ECT on any child for any reason as it is confirmed that a young persons brain does not fully develop until they are in their early 20's and if the parent has been falsely advised by a psychiatrist, that the treatment is beneficial, it is the governments responsibility to ensure the rights of the child are protected by abolishing it immediately for any person under 24years of age with a view to abolishing this barbaric treatment for everybody.

Involuntary treatment and CTO's - Adults Recommendations

I have correspondence from the Therapeutic Goods Administration confirming the AKATHESIA is a side affect of psychotropic drugs that most GP's know little about, this condition is severe agitation that presents as aggressive and violent behaviour that has been linked to homicides in both adults and children. Every person has the right to be adequately assessed to include scientific testing to confirm if they are in fact mentally ill or whether they are suffering from a drug induced adverse reaction. The scientific analysis of adverse reactions to prescription medicines and illegal drugs is based on many who are genetically polymorphic or because of inappropriate prescribing of combination drugs that are contraindicated, this leads to a high level of toxicity in their blood and subsequently explains their symptoms, and the wonderful news is that there is a CURE. All Human Beings have the right to avoid being branded as mentally ill which commonly extends to their rights and freedom being removed by the "opinion" of some doctor before appropriately scientific and Medical testing is conducted.

I am at loss for words when it comes to Psychosurgery, I assumed this topic had already been dealt with. The unconsciounable Dr Freeman who was prematurely awarded a Nobel Peace prize for popularising the Labotomy has for many years been branded a "Mad Man". He conducted barbaric treatment methods that left most with major brain injury or dead. Why are we still even discussing Psychosurgery this needs to be abolished immediately.

Alternatives to Psychiatric Treatment Recommendation

There is no independent scientific evidence that confirms that cannabis causes schizophrenia, cannabis requires the same pathways and genes as many psychotropic drugs and high levels in a person's blood can provoke psychosis, mania and delusion thoughts it is defined as Drug Induced Psychosis. The good news is that is not permanent and can be cured, if a person was provided adequate time to recover from the side affects and any necessary counselling to recovery from trauma, there is sufficient scientific evidence to suggest a full recovery. The standard practice by psychiatrists is to immediately diagnose them with schizophrenia and forcible inject them with prescriptions drugs that happen to require the same pathways which is complete "insanity" considering the patient already has levels of blood toxicity. This leads to more adverse reactions, thus adding to permanent disabilities, induced by the drugs, which ultimately is costing the taxpayer millions and millions every year and contributing to this man made epidemic.

I understand curing patients is not the priority of pharmaceutical companies as it means less products sold, we all understand this industry supports and funds the psychiatric profession and this profession coincidentally only promotes drug treatment. The use of drugs in combination ignoring the contraindications and usually at dosage levels well above approved indications is contributing to overwhelming Adverse Reactions and subsequent rise in Mental Health statistics. They deliberately ignore the legitimate science of pharmacogenetics and currently the Act allows them to interpret the loosely written text to forcible inject and shock innocent men, women and children, this is Barbaric and unacceptable in 2009.

I demand as community representative for these patients, that the Review Board takes the opportunity to analyse the scientific data and the FACTS that it was the increase in psychotropic drugs being prescribed that preceded the spontaneous increase in mental health patients.

It is the right of every human being to decline the intervention of a psychiatrist, considering this profession has proven to an entire population that they have no regard for human life or appropriate therapy and have deliberately ignored appropriate scientific testing and analysis. Every human being has the right to be adequately assessed for a physical condition to determine if they are responding to a genuine health condition related to hormones, glands or even a possible vitamin D deficiency also scientifically linked to symptoms of depression.

The epidemic associated with psychotropic drugs which is fundamentally linked to involuntary treatment, ECT and psychosurgery and is barbaric, if in 2009 our society and its leaders are unable to protect its citizens from a promotional campaign that serves the pockets and interests of private enterprise such as pharmaceutical companies, then we have no hope for the future and there is no hope for our children. The spontaneous increase in mental health figures is simply linked to the over prescription of dangerous drugs, we did not suddenly wake up in the early 90's and find that 1 in 5 of the population had developed a mental health disorder. It was precisely and deliberately engineered and now it is time for you to place restrictions that will serve to ensure the protection of patients including appropriate testing, removal of outdated and barbaric treatments and stricter penalties to those who breach and violate the rights of these patients.

The only person that should determine if a person is able to consent is a judge relying on independent non related medical and legal professionals to the mental health industry or their associated businesses such as pharmaceutical industries and or the government run Mental Health Review Board, which has a track record that confirms less than 5% of patients receive justice under this system, they failed in the responsibilities and I have recently spoken with the Executive Director who confirmed his contempt for patients rights and his own administrative policies and guidelines.

The provisions for involuntary status should be prohibited, if a person is suffering from a psychotic episode and is physically dangerous to the community then the Police have the powers to intervene and organise the appropriate detention, they also can organise for an adequately qualified doctor to assess the patients physical condition which will most likely involve detoxing from the substance/poisons in their system. If they are aggressive and violent they can be detained by the Police if they represent a danger to the community and if this behaviour is due to a drug induced reaction there are adequate facilities available to provide drug rehabilitation and detoxing treatments.

The recent Deloitte Audit Report on the Department of Health and Ageing confirms 1.6 billion dollars is spent annually on cleaning up and caring for patients who suffer from Adverse Reactions to prescription drugs. A simple pathology test and better education of pharmacogenetics should be made mandatory for all medical practitioners as it is costing the taxpayer a ridiculous amount of money and is resulting in preventable deaths and injuries.

What I think is imperative to this review is acknowledgment that there is 57,000, that is Fifty Seven Thousands, epidemic numbers, confirmed Adverse Reactions reported by use of psychotropics by the Therapeutic Goods Administration. This figure only represents approximately one tenth of the real figure because the majority of psychiatrists refuse to report suspected adverse reactions. Why is there legislation for this type of medical treatment but not for somebody being treated for Cancer. If a person declines a blood transfusion on religious grounds, they are not detained and forcible given the transfusion?

When you analysis how the psychiatrists and this industry have gotten away with hiding drug induced psychosis it is quite simply explained by this Act. This piece of legislation has allowed them to act without consequence; it is quite disturbing that this class of drugs can actually provoke psychotic behaviour which can then be deliberately passed off as a mental health disorder. I do not believe it is a coincidence that these drugs can provoke these symptoms. I believe it was intentional to create a multi billion dollar industry that consists of mental health facilities, outreach workers, psychiatric nurses,

and all the other people relying on employment in this man made epidemic without consideration to the victims that suffer from the consequences.

There was no mental health epidemic until the release of the majority of these drugs, the drugs preceded the epidemic therefore any rational investigator would be able to conclude it is the drugs that represent the symptoms and the provisions in this act should clearly articulate the responsibilities to the doctors busily prescribing them. The term "Informed Consent" is crucial, it should be mandatory in the legislation to obtain written "informed consent" to respect the patient's rights and other relevant legislation and there should be provisions for stricter penalties for those that breach these restrictions, including both civil and criminal offences. The responsibility of the State, is to ensure the protection of its citizen's rights above all else.

In my investigation to uncover why my daughter and hundreds of thousands of other Australian children were negligently prescribed these drugs, I discovered that the majority of hospital facilities providing adolescents with mental health care including inpatient facilities were promoting these types of drugs as the first line of therapy. They are deliberately not advising the parents or the patients of the dangers and risks involved. When the children suffer from the common side effects such as suicidal ideation and self harm, including aggressive and violent behavior the approved mental health professionals falsely advise that these symptoms are confirmation of a mental health disorder rather than addressing the confirmed and common side effects documented by significant scientific clinical trial data. Their response to these drug induced reactions is to increase the medication to 3-4 times the legal dosage for adults which obviously results in further injury and suffering to these innocent children. It is common practice for this industry to combine dangerous levels of these drugs to children and in dosages outside approved indications for adults without consequence.

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It is scientifically proven that the use of ECT as a form of treatment and I use the word "treatment" loosely, contributes to permanent brain injury and death and has long been considered by the general community to be abolished. It is not until you experience the treatment from within this industry are you confronted by the horror that this barbaric treatment is still being carried out in our public hospitals and promoted as suitable treatment for children as young as 4 years old.

All Victorians now consider themselves to be protected by the Human Rights legislation, so how can it be possible that children are not protected from involuntary treatment that always and without exception, involves treatment with unapproved, unregistered and unlawful medication including extended periods in torturous seclusion, restraints and the barbaric act of ECT. The United Nations have already outlawed seclusion claiming it is a form of torture, to fail to protect a child in Australia from torture especially in a public

hospital is unconceivable. Yet the failure of the Act to make provisions to protect these children has resulted in thousands and thousands of preventable injuries and many deaths and without consequence.

There can be no legal parameters to pass legislation that legitimately allows the treatment of children and adolescents with psychotropics without the written "INFORMED CONSENT" of the parent. Which would obviously include informing them that these drugs are not recommended or approved and why. There must be provisions included in the Act to prevent the involuntary treatment of a child (a person under 18). If a parent/guardian of child is "informed" in accordance with the definition of Informed Consent within the Therapeutic Goods Regulations and agrees to experiment with these drugs as a form of treatment as a last resort, then the Secretary needs to approve such action as it is defined as "experimental" and in failing this process it becomes unlawful. In the event that a parent declines the treatment after being provided the facts and warnings, it is a Human Rights violation to make legislative provisions to allow a medical doctor to remove the rights of the parent. There are ample services and legislation already available to protect children at risk and it is for the courts to determine if the parents decision to refuse treatment with dangerous, unapproved drugs actually represents a risk or is it simply responsible parenting.

Recommendation for ECT and Treatment Orders for children

There should be legislation to prevent ECT on any child for any reason as it is confirmed that a young persons brain does not fully develop until they are in their early 20's and if the parent has been falsely advised by a psychiatrist, that the treatment is beneficial, it is the governments responsibility to ensure the rights of the child are protected by abolishing it for any person, particularly people under 24years of age.

Our government has already determined that these drugs are too dangerous to be approved for registration on the ARTG for children and our Federal Health Minister Nicola Roxon has confirmed they are contraindicated for children. Now it is the responsibility of our State to ensure that the appropriate provisions are made to include these restrictions within the Mental Health Act.

Involuntary treatment and CTO's - Adults Recommendations

The removal of involuntary treatment orders, the removal of CTO's and the abolishment of ECT.

The criteria for involuntary treatment status, confirms that the patient must be unable to consent to treatment. This broad interpretation has led to the abuse of human rights for years. Who determines a person is unable to consent? If a patient declines treatment of dangerous drugs that cause intolerable side effects and is not assisting in their treatment or helping with their symptoms, why are they deemed unable to consent just because they oppose the treatment. Why are they not given the option to seek a physical cause and the necessary treatment to assist them in curing or treatment the physical condition? On the flip side of this equation patients who are stable and have agreed to and are taking the recommended medication are commonly also defined as unable to consent. Whenever a psychiatrist wants to detain a patient all they have to do is claim the patient is unable to consent, when did our society deem a psychiatrist was above all other laws and regulations, when did they become judge and jury when the majority of them benefit from lucrative support from the pharmaceutical companies which represents a conflict of interest.

The current provisions in the Act make a mockery of our legal system and place significant power in the hands of a doctor rather than a judge. The failure of this Act to hold this profession accountable and give them unlimited power is unconceivable and a violation of every human beings basic rights.

The act also states that the patient must have a mental health condition, considering there is no mandatory pathology testing to establish if a patient's behaviour is due to a drug reaction, most emotional symptoms are considered and diagnosed by a psychiatrist as a mental health condition. Now it has been established that many illegal and prescriptions drugs require specific pathways in the liver to safely metabolise in a persons liver, if a person is tested and confirmed to have defective genes which accounts for up to 30% of the population spread across various ethnicities then why is the opinion of a psychiatrist considered more valuable than a scientific DNA test which is conclusive. The Act needs to ensure mandatory testing prior to any action to diagnose a person mentally ill, particularly if the patient has ingested illegal or prescription drugs prior to behavioural symptoms appearing. Each patient has the right to be adequately detoxed from dangerous substances in their system before being presumed mental ill and their freedom handed over without consequence to a psychiatrist.

I have correspondence from the Therapeutic Goods Administration confirming the AKATHESIA is a side affect of psychotropic drugs that most GP's know little about, this condition is severe agitation that presents as aggressive and violent behaviour that has been linked to homicides in both adults and children. Every person has the right to be adequately assessed to include scientific testing to confirm if they are in fact mentally ill or whether they are suffering from a drug induced adverse reaction. The scientific analysis of adverse reactions to prescription medicines and illegal drugs is based on many who are genetically polymorphic or because of inappropriate prescribing of combination drugs that are contraindicated, this leads to a high level of toxicity in their blood and subsequently explains their symptoms, and the wonderful news is that there is a CURE. All Human Beings have the right to avoid being branded as mentally ill which commonly extends to their rights and freedom being removed by the "opinion" of some doctor before appropriately scientific and Medical testing is conducted.

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There is no independent scientific evidence that confirms that cannabis causes schizophrenia, cannabis requires the same pathways and genes as many psychotropic drugs and high levels in a person's blood can provoke psychosis, mania and delusion thoughts that is defined as Drug Induced Psychosis, the good news is that it is not permanent and can be cured. If a person was provided adequate time to recover from the side affects and any necessary counselling to recovery from trauma, there is sufficient scientific evidence to suggest a full recovery. The standard practice by psychiatrists is to immediately diagnose them with schizophrenia and forcible inject them with prescriptions drugs that happen to require the same pathways, when they already have high levels of toxicity in their blood. This leads to more adverse reactions, thus adding to permanent disabilities, induced by the drugs, which ultimately is costing the taxpayer millions and millions every year.

I understand curing patients is not the priority of pharmaceutical companies as it means less products sold, we all understand this industry supports and funds the psychiatric profession and this profession coincidentally only promotes drug treatment. They promote use of drugs in combination ignoring the contraindication and usually at dosage levels well above approved indications. They deliberately ignore the legitimate science of pharmacogenetics and currently the Act allows them to interpret the loosely written text to forcibly inject and shock innocent men, women and children, this is Barbaric and unacceptable in 2009.

I demand as community representative for these patients, that the Review Board takes the opportunity to analyse the scientific data and the coincidence that as the increase in psychotropic drugs being prescribed preceded the spontaneous increase in mental health patients.

It is the right of every human being to decline the intervention of a psychiatrist, considering this profession has proven to an entire population that they have no regard for human life or appropriate therapy and have deliberately ignored appropriate scientific testing and analysis. Every human being has the right to be adequately assessed for a physical condition to determine if they are responding to a genuine health condition related to hormones, glands or even a possible vitamin D deficiency also scientifically linked to symptoms of depression.

The epidemic associated with psychotropic drugs which is fundamentally linked to involuntary treatment, ECT and psychosurgery and is barbaric and if in 2009 our society and its leaders are unable to protect its citizens from a promotional campaign that serves the pockets and interests of private enterprise such as pharmaceutical companies, then we have no hope for the future and there is no hope for our children.

The spontaneous increase in mental health figures is simply linked to the over prescription of dangerous drugs, we did not suddenly wake up in the early 90's and find that 1 in 5 of the population had developed a mental health disorder. It was precisely and deliberately engineered and now it is time for you to place restrictions that will serve to ensure the protection of patients including appropriate testing, removal of outdated and barbaric treatments and stricter penalties to those who breach and violate the rights of these patients.

The only person that should determine if a person is able to consent is a judge relying on independent legal professionals to the mental health industry or their associated businesses such as pharmaceutical industries and or the government run Mental Health Review Board. This department has already proven to be biased and compromised with a track record that confirms less than 5% of patients receive justice under this system.

The provisions for involuntary status should be prohibited, if a person is suffering from a psychotic episode and is physically dangerous to the community then the Police have the powers to intervene and organise the appropriate detention, they also can organise for an adequately qualified doctor to assess the patients physical condition which will most likely involve detoxing from the substance/poisons in their system.

A simple pathology test and better education of pharmacogenetics should be made mandatory for all medical practitioners as it is costing the taxpayer a ridiculous amount of money and is resulting in preventable deaths and injuries.

What I think is crucial to this review is acknowledgment that there is 57,000, that is Fifty Seven Thousands, epidemic numbers, confirmed Adverse Reactions reported by use of

psychotropics by the Therapeutic Goods Administration. This figure only represents approximately one tenth of the real figure because the majority of psychiatrists refuse to report suspected adverse reactions and they are getting away with it by claiming the reactions are in fact mental health disorders without any evidence to support their opinion. Why is there legislation for this type of medical treatment but not for somebody being treated for Cancer. If a person declines a blood transfusion on religious grounds, they are not detained and forcible given the transfusion?

When you analysis how the psychiatrists and this industry have gotten away with hiding drug induced psychosis it is quite simply explained by this Act. This piece of legislation has allowed them to act without consequence; it is quite disturbing that this class of drugs can actually provoke psychotic behaviour which can then be deliberately passed off as a mental health disorder. I do not believe it is a coincidence that these drugs can provoke these symptoms. I believe it was intentional to create a multi billion dollar industry that consists of mental health facilities, outreach workers, psychiatric nurses, and all the other people relying on employment in this man made epidemic without consideration to the victims that suffer from the consequences.

There was no mental health epidemic until the release of the majority of these drugs, the drugs preceded the epidemic therefore any rational investigator would be able to conclude it is the drugs that represent the symptoms and the provisions in this act should clearly articulate the responsibilities to the doctors busily prescribing them. The term "Informed Consent" is crucial, and only a judge should determine if a patient is unable to consent. It should be mandatory in the legislation to obtain written "informed consent" to respect the patient's rights and other relevant legislation and there should be provisions for stricter penalties for those that breach these restrictions, including both civil and criminal offences. The responsibility of the State, is to ensure the protection of its citizen's rights above all else.