Children’s Mental Health For Sale

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The origins and age of onset for most mental illnesses are not clear. Much research has been done in these areas, and more theories than proof have been advanced. One of the most recent areas of concern is to what extent mental illnesses appear in children and whether children should be treated with powerful psychotropic drugs, almost none of which been put through pediatric clinical trials.

A key source of information on children’s mental illness and treatment has been the psychiatry department at Harvard University. Several physicians at the well-known and respected school have been arguing that a form of bipolar disorder appears in children and should be treated pharmacologically. While their practice and theories have been far from unquestioned, it was not until this summer that all eyes turned to the potential financial motives behind their theories.

Senator Charles Grassley (R-Iowa), as part of an investigation on the ties between physicians and drug companies, received conflict-of-interest forms from Harvard and Mass General showing payments from drug companies reported by Drs. Joseph Biederman, Thomas Spencer, and Timothy Wilens. Based on a review of the forms submitted, Grassley’s staff concluded that the physicians had received several hundred thousand dollars dispersed over a seven year period. Given discrepancies between those numbers and those reported to Grassley by the drug companies, the Senator asked Harvard and Mass General to have the doctors review their disclosures. At that time, they each admitted to having received over $1 million in drug company money. If that were not bad enough, the figures disclosed by the psychiatrists still did not match with those from the companies.

Grassley’s statements about the Harvard doctors, if proven, suggest violations not only of university rules, but also federal research rules as they were recipients of National Institutes of Health (NIH) grants to study some of the drugs at issue. The NIH requires researchers to disclose to their universities earnings of $10,000 or more per year in consulting fees received from the makers of drugs the researchers are studying for the NIH. In 2000, Biederman received an NIH grant to study Strattera, an attention deficit disorder drug, in children. For that year he reported to Harvard that he had received less than $10,000 from Eli Lilly, the drug company that makes Strattera. However, the company disclosed payments of more than $14,000 to Biederman during 2000. During 2001, Biederman reported no income from Johnson & Johnson, although his revised

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statement included a $3,500 payment from the company. In their report to Grassley, Johnson & Johnson reported giving Biederman over $58,000 that year alone.4

As common sense suggests and several psychiatrists have confirmed, controlling bias in studies involving psychotropic drugs is particularly important since rating the patient’s condition before, during, and after the trial is based on clinical judgment not an objective test.5

The head of the psychiatry department at Stanford has also caught Grassley’s eye. Dr. Alan Schatzberg is conducting an NIH funded study of a drug to potentially treat psychotic depression; he also has a $6 million stock interest in a pharmaceutical company.6

The problems with drug company money being the main source of funding for drug studies has been an issue for years. Two factors make the Harvard case in particular different than the usual disclosures. These psychiatrists are in effect double-dipping, by taking taxpayer money to conduct drug trials while simultaneously getting drug company funding for “consulting” on the same drug and the same condition under review in the NIH studies. Additionally, we are talking about doctors who are using the Harvard name and reputation to drastically increase the number of children – whose brains are not fully developed – taking drugs whose entire purpose is to alter brain chemistries.

The impact of untreated and under-treated mental illness is large, and no one is – or should be – arguing that children should not be eligible for treatment for mental diseases and disorders. That is not the problem. The issue is that the Harvard doctors are in effect advocating a system of drugs over therapy for children. We already have this to a large extent for adult mental health – psychiatrists are increasingly providing only medications and not therapy, and many people do not have the time or funds/health coverage to receive care from both a psychiatrist and another mental health professional who would provide talk therapy. It is damaging enough for adults to be medicated and sent on their way. While there are few long-term studies of the impact of most psychotropic drugs on adults, due largely to the recent development of most of these drugs, adults not only have the capability to consent to treatment for themselves in most cases but also have more developed brains and are therefore much less likely to have their brain development permanently altered or impaired by psychopharmacological treatment.

While the Harvard case may be particularly despicable, given the impact on children, it is just another sign that psychiatry is not above the same conflicts of interest that appear in other areas of medicine. Sen. Grassley has followed up on his investigations of individual psychiatrists by looking at the financing of the American Psychiatric

5 Harris, supra note 3.
Association as a whole. This may have been partly motivated by the fact that Dr. Schatzberg, the Stanford psychiatrist discussed above, is president-elect of the Association.\(^7\)

In what can only be described as a massive understatement, Grassley wrote in a letter to the Association that he understands that industry money can shape the practices of otherwise independent non-profits. According to the Association’s financial records for 2006, the pharmaceutical industry provided $62.5 million – or 30 percent – of the Association’s funding. The money went to advertisements in journals, exhibits at meetings, and sponsorships for fellowships and conferences.\(^8\)

Given that the Association itself is clearly guilty of opening itself up to the image of being bribed if not bought by the industry, it is no wonder that individual psychiatrists see no problem with doing the same. The Association is supposed to be the group that helps set the ethical code for the profession and supports its practitioners in a way that allows them to practice to the highest standards possible. Instead, the Association is showing members the way to get money from the drug industry, no matter what the impact is on physician bias or at least appearance of bias created by such arrangements. If any more proof was needed that professions should not be allowed to police themselves without additional oversight, the psychiatrists have certainly provided it. It is a sad, sad day when a patient or parent of a patient needs to ask about financial conflicts before accepting a psychiatrist’s advice on treatment options, but unless the push from Grassley wakes the profession up to its dirty dealings that is where we will stay.


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\(^8\) *Id.*