Dear Editor,

Antidepressants are undispensable part of treatment in depression. In addition to this, they are not only restricted to depression treatment. It is well known that antidepressants are also widely used in treatments of subgroups of anxiety disorders. Moreover, they are frequently preferred in areas of medicine other than psychiatry, including pain disorders, migraine, fibromyalgia etc. treatment. Increase of antidepressant use was not found to be associated with increase of population and incidence of psychiatric illnesses. Obviously, apart from prescriptions of physicians, accessing easily to antidepressants via pharmacies is a reality in Turkey. This has been emphasized several times by the mass media. They also observe the misuse of antidepressants. The majority of reported cases of antidepressant misuse occur in individuals with comorbid mood and substance use disorders. The most common motivation for abuse is to achieve a psychostimulant-like effect, including a desire for a “high” or euphoria. While it is important to recognize that the most majority of individuals prescribed antidepressants do not abuse them, it is also critical for psychiatrist to be aware of the potential for misuse and abuse when prescribing antidepressants. In addition to access, perceptions of the nonmedical use or abuse of antidepressants as being more socially acceptable and less stigmatized, may be contributing to increased rates of misuse. In my opinion, another possible reason regarding widespread use of antidepressants in Western countries is the support and expectation of strong ego and extroversion. Additionally, feeling strong of self with these medications promotes long period of unnecessary antidepressant use.

Besides to its benefits, such a group of drugs widely used in all over the world, have some undesirable side-effects. In addition to physical side effects like weight gain, antidepressants can emerge psychiatric conditions including maniac and hypomaniac shifts that effect familial and social life. Furthermore, subsyndromal symptoms of hypomania are quite often in population under antidepressant medications. These people might have an inflated ego, affective flattening of positive or negative emotions, relative impaired reasoning and risky behaviours.

As a result of these reasons, side effects of antidepressants, in particular psychiatric ones, are inevitably associated with social reflections. Due to all these reasons, uncontrolled use of prescription antidepressants can cause irreversible damage to individuals’ social and familial life. While these people are under effect of inflated ego and distorted reasoning, they may have tendency to break up close relationships, and make risky desicions without taking into consideration of others’ rights.

Physicians usually focus on medical side effects of antidepressants like in the other medications. However, human being is described in a biopsychosocial model. Biological or psychological problem evidently would have some social reflections. For this reason, in healthcare...
professionals, particularly sociologists, and in all levels of society, it seems necessary to improve mindfulness of potential harms regarding familial and social life associated with unprescribed or uncontrolled antidepressant use. Therefore, the Turkish Association for Psychopharmacology’s policies, with regards to social reflections of psychotropics within the context of preventive psychiatry, will contribute to prevention of potentially associated social harms.

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M.A.A.: The author reported no conflict of interest related to this letter.

ERRATUM


The authors acknowledge an error in the second paragraph of the Material and Methods section on page 260 regarding to the start date of referrals for the study group. Corrected version should be: “All consecutive referrals to the Dokuz Eylül University Medical Faculty of Department of Child and Adolescent Psychiatry between July 28th 2009 and December 31st 2012 were included.” This erratum does not otherwise affect the primary focus of the article and has been corrected in the online and PDF versions of the article.