

Peter R. Breggin, M.D.

101 East State Street, No. 112
Ithaca, New York 14850
607 272 5328

RESUME

with Bibliography & Legal Experience

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I. BACKGROUND HIGHLIGHTS

Harvard College (Cambridge) (1954-58):

Graduated with Honors.

Directed Harvard-Radcliffe Mental Hospital Volunteer Program.

Research grants from Harvard Medical School and the National Institute of Mental Health (NIMH).

Co-authored 1st professional book, College Students in a Mental Hospital (1962).

Harvard Crimson, writer (editorial page).

Case Western Reserve School of Medicine (Cleveland) (1958-1962):

Conducted four years of psychopharmacology lab research with controlled animal trials supported by NIMH grant, resulting in first two published papers in psychopharmacology.

Special four-year individual tutorial with pediatrician Benjamin Spock, M.D.

Diplomat, National Board of Medical Examiners (1963):

Highest grade in country (99%) on psychiatry portion of boards used to qualify for medical licenses.

Massachusetts Mental Health Center (Boston) (1963-64):

First Year Resident in Psychiatry at the main Harvard teaching hospital.

Teaching Fellow at Harvard Medical School.

State University of New York Upstate Medical Center (Syracuse) (1962-63, 1964-66):

Intern in Mixed Medicine and Psychiatry.

Second and Third Year Resident and Teaching Assistant in Psychiatry.

National Institute of Mental Health (NIMH) and U. S. Public Health Service Officer (Charlottesville, VA and Bethesda, MD) (1966-68):

Full-time NIMH Consultant in Building and Staffing Community Mental Health Centers (1966-67).

Full-time NIMH Consultant in Mental Health and Education (1967-68).

University of Maryland (1968-1970):

Faculty, courses in counseling department.

Washington School of Psychiatry (1968-1972):

Faculty, courses for school counselors.

George Mason University (1990-96):

Adjunct Professor of Conflict Analysis and Resolution, courses on brain and behavior, and on conflict resolution, domestic violence and child abuse.

Johns Hopkins University (1996-99):

Faculty Associate in the Department of Counseling and Human Services, courses including psychopharmacology and diagnosis in psychiatry.

State University of New York (SUNY), Oswego (2007-2008, 2010-2014):

Visiting Scholar in the Department of Education, Division of Counseling and Psychological Services, courses including psychopharmacology and psychotherapy (2007-2008).
Adjunct Professor, courses on Empathic Therapy and Critical Psychology (2010-2012).

II. HIGHLIGHTS OF PROFESSIONAL ACTIVITIES

Private Practice of Psychiatry, Ithaca, New York. (2003-present):

In November 2002, all of my professional activities (see below) moved to Ithaca, New York.

Private Practice of Psychiatry, Washington, DC and Bethesda, MD. (1968-2002):

Full-time private practice with individuals, couples and families with children.

Subspecialty clinical psychopharmacology and the drug approval process.

Founder and Director, Center for the Study of Empathic Therapy, Education and Living (www.empathitherapy.org), 2010-present:

This new nonprofit organization led by Dr. and Mrs. Breggin has a large Advisory Council that includes many psychiatrists, neurologists, psychologists, social workers and counselors, including professors and heads of department. Many public advocates and interested citizens also participate. The Center offers a free newsletter, a professional network, and an annual Empathy Therapy Conference. Dr. Breggin's many decades of reform work have led others to call him "The Conscience of Psychiatry." He continues his reform work with renewed emphasis on finding better, empathic approaches to helping children and adults in emotional distress.

Founder and Director, International Center for the Study of Psychiatry and Psychology (1972-2002) and Director Emeritus (2002-2010):

Dr. Breggin, joined by his wife in the 1980s, developed this first professional organization devoted to psychiatric reform.

Editor-in-Chief (1998-2002) and Founding Editor and Consultant (2002-present) of *Ethical Human Sciences and Services: An International Journal of Critical Inquiry*. Now entitled *Ethical Human Psychology and Psychiatry*.

Founded and edited a peer-reviewed journal with 40 contributing editors published by Springer Publishing Company.

Editorial Consultant:

International Journal of Risk and Safety in Medicine
The Psychotherapy Patient
The Humanistic Psychologist
Journal of Mind and Behavior
Hospital and Community Psychiatry (reviewer in past)
Journal of Medical Ethics (reviewer)
Medical Hypotheses (reviewer)

Scientific Presenter at Conferences, Grand Rounds, Universities:

Many presentations at professional conferences each year. Two highlights:

Selected Recent Presentations

U.S. House of Representatives, Committee on Veterans Affairs, February 24, 2010, Washington, DC, Hearings chaired by Rob Filner (D-CA) on “Exploring the Relationship Between Medication and Veteran Suicide,” 35-minute lead off testimony on “Antidepressant-Induced Suicide and Violence: Risks for Military Personnel.” Audio of complete hearings and written presentations available on www.breggin.com.

20th Annual International Military and Civilian Combat Stress Conference, Los Angeles, May 2012. “Does Psychiatric Medication Increase the Risk and Prevalence of Suicide?”

Past Presentations

Hundreds of invited scientific presentations on psychopharmacology, shock treatment, psychosurgery, psychotherapy, and legal issues, including the Florida Public Defenders Association (2018) annual Life Over Death Training Conference (plenary on drug-related appeals in death penalty cases and workshop on specific cases); US House of Representatives Veterans Affairs Committee (2010), Full-Day Hearings on Risks Associated with Prescribing Psychiatric Drugs to the Military and Veterans (featured lead off presenter); the National Institutes of Health (NIH) Consensus Development Conferences on Diagnosis and Treatment of Attention Deficit Hyperactivity Disorder (November 1998); the NIH Consensus Development Conference on Electroconvulsive

Therapy (1985); National Institutes of Health Panel on NIH Research on Anti-social, Aggressive and Violence-related Behaviors and Their Consequences (1994); National Institute of Mental Health (NIMH) Guest Speakers Program; U.S. House of Representatives Committee on Education (September 2000); American Psychiatric Association; NIH Institute on Hospital and Community Psychiatry; American Psychological Association; American Orthopsychiatry Association; American Autism Society; American Association for the Advancement of Science; American Counseling Association, Connecticut Psychiatric Society Residents Program, Harvard University School of Education Special Lecture; Georgetown University School of Medicine Department of Pharmacology; New Jersey Medical School Department of Psychiatry Annual Medical Forum; Walter Reed Army Hospital Psychiatric Residency Program; National Naval Medical Center; Metropolitan Hospital Center/New York Medical College Department of Psychiatry; Manhattan State Hospital (New York City) Grand Rounds; Spring Grove Hospital (Maryland) CME Credit Seminars; Chestnut Lodge Hospital Case Conference; St. Elizabeths Hospital Grand Rounds and Seminars (Washington, DC); Regents College of Psychotherapy and Counseling (London); Institute for Genetics (Cologne); Royal Ottawa Hospital Grand Rounds (Canada); MIND of Great Britain; University of Sheffield Department of Psychiatry (England).

Special Presentations and Advanced Training Courses related to Clinical Psychopharmacology:

I have presented at and/or attended a number of lengthy several-day-long training workshops on the drug approval process that dealt with the FDA approval process and drug labeling. The following seminars, including several at which I made presentations, dealt extensively with adverse drug reactions, drug development, labeling and related processes:

- (1) “Regulatory Training Course I: IND [Investigative New Drug] Phase.” A course in how drug companies develop an IND for the FDA in accordance with FDA statutes, regulations, and guidelines. DIA (Drug Information Association). Bethesda, Maryland, February 26-28, 1996.
- (2) “Future development of neuroleptic medications: A report to the FDA.” This was a report to an FDA Meeting of the Psychopharmacologic Drugs Advisory Committee concerning labeling issues and the future development of neuroleptic medications. It was published as “Future development of neuroleptic medications: A report to the FDA” in the Rights Tenet (Newsletter of the National Association for Rights Protection and Advocacy) Fall 1995.
- (3) “Regulatory Training Course II: Marketing Application & Post Approval Phase.” A course in how drug companies develop an NDA [New Drug Application], as well as post-approval activities, in accordance with FDA statutes, regulations, and guidelines. DIA (Drug Information Association), Bethesda, Maryland, March 27-29, 1996.
- (4) “Clinical Therapeutics and the Recognition of Drug-Induced Disease: How

Health Care Professionals and the FDA Can Work Together to Reduce the Risks of Adverse Drug Events.” A workshop focused on the spontaneous reporting system presented by the Center for Drug Evaluation and Research (CDER) of the FDA, Georgetown University School of Medicine, Washington DC, June 10, 1994.

(5) “The Application of GCP [Good Clinical Practices] for Study Site Coordinators and Business Administrators.” Described as “a comprehensive, practical overview of the responsibilities of the investigator, the clinical study coordinator assisting the investigator, and the sponsor in the conduct of a clinical trial” for FDA approval of a drug. DIA (Drug Information Association), Philadelphia, December 11-13, 1995.

(6) “Pharmaceutical Industry Crisis Management Workshop.” Purpose described as “to develop the participants knowledge of the fundamental elements of crises and crisis management in the pharmaceutical industry.” Initial day covered handling of a variety of issues, including New Drug Applications (NDAs), FDA regulations and industry relations, recalls, adverse drug event reporting, and clinical trial standards. DIA (Drug Information Association), Washington, DC, December 4, 2000.

(7) “Ritalin Litigation.” Described as “The medical and legal roadmap to trying or defending your Ritalin suit successfully,” including presentations on stimulant drug treatment, ADHD, and the role of the FDA and DEA in monitoring industry activities. I presented on “The science behind the lawsuits” (including labeling issues) and also attended. The American Conference Institute, New York City, March 29, 2001.

(8) “Emerging Drug Litigation Conference.” One-half day on class action suits at which I presented on “The Science and Medicine of Ritalin” (including labeling issues) and also attended. Mealey's (Lexis/Nexis). New Orleans, May 17, 2001.

(9) “Adverse Effects of SSRI Medications: A Medical Legal Conference.” Labeling was a key issue at this conference focused on product liability. I presented on “Adverse Psychiatric Effects of SSRI Antidepressants” (including labeling issues) and attended conference. Extant Medical Legal Consulting. Philadelphia, October 4-5, 2002.

(10) “SSRI-Induced Stimulation, Suicidality and Violence in Children and Adults.” These were public presentations to two FDA Advisory Committee meetings on modifying the labeling for SSRI-induced suicidality in children. Each meeting involved the Psychopharmacologic Drugs Advisory Committee and the Pediatric Advisory Committee. I summarized evidence for a stimulant syndrome that causes suicidality and violence that should be included in the label. The label changes later adopted by the FDA closely parallel my suggestions in my

presentations and publications. Bethesda, Maryland, February 2, 2004 and September 13, 2004.

(11) “Anti-Depressant Suicidality and Violence: More about Deception than Science. Observations Made at the FDA Hearings Press Conference, sponsored by the Alliance for Human Research protection (AHRP).” I address issues surrounding what kind of material gets into FDA-approved labels, including the limitations of that data. Other presenters discussed related issues. Bethesda, Maryland, September 14, 2004.

(12) “Stimulation, Violence and Suicide as Adverse Reactions to SSRIs in Children and Adults.” Public Presentations and attendance at two FDA Advisory Committee meetings on modifying the labeling for SSRI-induced suicidality in children (three days total). Each meeting involved the Psychopharmacologic Drugs Advisory Committee and the Pediatric Advisory Committee. I summarized evidence for a stimulant syndrome that causes suicidality and violence that should be included in the label. The label changes later adopted by the FDA closely parallel my suggestions in my presentations and publications. Bethesda, Maryland, February 2, 2004 and September 13, 2004.

(13) “Anti-Depressant Suicidality and Violence: More about Deception than Science. Observations Made at the FDA Hearings Press Conference, sponsored by the Alliance for Human Research protection (AHRP).” I address issues surrounding the quality of the data drug companies generate and what ultimately gets into FDA-approved labels. Other presenters discussed related issues. Bethesda, Maryland, September 14, 2004.

Selected Highlights as a Medical Expert, Researcher and Reformer:

(1) Starting in 1972, for approximately a decade, I devoted a considerable portion of my professional work to conducting an educational campaign to stop the resurgence of lobotomy and psychosurgery in North America, Europe and elsewhere. I worked closely with U.S. Senators, including J. Glenn Beall and Steve Symms, and U.S. Congressmen, including Louis Stokes and Ron Dellums. With them, I wrote legislation creating the federal Psychosurgery Commission, which declared psychiatric brain surgery experimental and unsuitable for clinical practice. My work with Congressmen Stokes and Dellums, press conferences we held together, and address I gave to the annual meeting of the Black Caucus helped stopped operations on institutionalized black children at the University of Mississippi in Jackson (see Professional Publications, Nos. 9, 23 and others). I called for Senator Ted Kennedy to have his Health Committee hold a hearing on psychosurgery and then testified. I was the psychiatric expert and consultant in *Kaimowitz v. Department of Mental Health, Wayne County, Michigan* (1973). The three-judge panel followed my testimony in an opinion that helped to stop lobotomy and psychosurgery in the state and federal facilities around the country. This is considered a landmark case in the history of psychiatry and the law. I wrote numerous books chapters

and scientific articles, spoke at professional meetings and universities, and appeared as an expert on innumerable radio and television news reports and shows. My efforts stopped most of the known psychosurgery programs in Europe and North America including at NIH and the VA. Later on, in 2002, I was the psychiatric expert in a trial that ended favorably for the plaintiff and stopped psychosurgery at one of the last holdouts, the Cleveland Clinic (See Resume, Part VII, Case 52). My reform work, including the antipsychosurgery campaign, is documented in a book: International Center for the Study of Psychiatry and Psychology (Eds.) (2009). *The Conscience of Psychiatry: The Reform Work of Peter R. Breggin, MD*. Ithaca, New York: Lake Edge Press.

(2) Medical expert for the 100 or more combined Prozac product liability suits (1992-1994) against Eli Lilly, including the famous Wesbecker trial (Fentress et al.) that the drug company secretly settled in a controversial manipulation of the court system.

(3) Medical expert and consultant in many tardive dyskinesia malpractice and product liability suits.

(4) Medical expert in numerous criminal cases with defenses based on involuntary intoxication with psychiatric drugs.

(5) Invited Scientific Presenter on adverse drug effects in children at the November 1998 National Institutes of Health (NIH) Consensus Development Conference on the Diagnosis and Treatment of Attention Deficit Disorder.

(6) Medical consultant for the FAA (Federal Aviation Agency) concerning effects of SSRIs on pilots (1998-2000).

(7) Testimony before the Food and Drug Administration (FDA) on the dangers of SSRI antidepressants in children (February 2004). The published opinion of the FDA panel closely paralleled my testimony and publications about the overall risk of stimulation (activation) with the potential for agitation, violence and suicide.

Memberships:

Current:

American Psychiatric Association (Life Member)
Canadian Psychiatric Association
World Association of Medical Editors

Until approximately 2005-6

Royal Society of Medicine
Regulatory Affairs Professionals Society (RAPS)
Drug Information Association (DIA)
American Psychological Association
American Orthopsychiatric Association (Fellow)

Medical Licenses:

New York State, Washington, D.C., Maryland, and Virginia (last three inactive)

III. PROFESSIONAL BOOKS

1. College Students in a Mental Hospital: Contribution to the Social Rehabilitation of the Mentally Ill (New York, Grune & Stratton, 1962) (jointly authored by Carter Umbarger, James Dalsimer, Andrew Morrison, and Peter Breggin).
2. Electroshock: Its Brain-Disabling Effects (Springer, NY, 1979).
3. Psychiatric Drugs: Hazards to the Brain (Springer, NY, 1983).
4. Toxic Psychiatry (St. Martin's, NY, 1991).
5. Beyond Conflict (St. Martin's, NY, 1992).
6. Talking Back to Prozac (with Ginger Breggin) (St. Martin's, NY, 1994).
7. The War Against Children (with Ginger Breggin) (St. Martin's, NY, 1994).
8. Psychosocial Approaches to Deeply Disturbed Persons (senior editor) (Haworth Press, NY, 1996).
9. Brain-Disabling Treatments in Psychiatry: Drugs, Electroshock and the Role of the FDA (Springer, NY, 1997).
10. The Heart of Being Helpful: Empathy and the Creation of a Healing Presence (Springer, NY, 1997; new paperback edition in 2006).
11. Talking Back To Ritalin (Common Courage Press, ME, 1998).
12. The War Against Children of Color: Psychiatry Targets Inner City Children. (Common Courage Press, ME, 1998) (with Ginger Breggin) Revision and update of The War Against Children.
13. Your Drug May Be Your Problem: How and Why To Stop Taking Psychiatric Medications. (Perseus Books, Cambridge, MA, 1999) (Co-authored by David Cohen, Ph.D).
14. Reclaiming Our Children: A Healing Solution to a Nation in Crisis. (Perseus Books, Cambridge, MA, 2,000).
15. Talking Back to Ritalin, Revised Edition. (Perseus Books, Cambridge, MA, 2001).
16. The Antidepressant Fact book. (Perseus Books, Cambridge, MA, 2001).
17. Dimensions of Empathic Therapy (jointly co-edited by Ginger Breggin and Fred Bemak) (Springer Publishing Company, NY, 2002).

18. The Ritalin Fact Book. (Perseus Books, Cambridge, MA, 2002).
19. Your Drug May Be Your Problem: How and Why To Stop Taking Psychiatric Medications, Second Edition. (Perseus Books, Cambridge, MA, 2007) (Co-authored by David Cohen, Ph.D).
20. Brain-Disabling Treatments in Psychiatry: Drugs, Electroshock and the Psychopharmaceutical Complex, Second Edition (Springer Publishing Company, NY, 2008).
21. Medication Madness: The Role of Psychiatric Drugs in Cases of Violence, Suicide, and Crime. (St. Martin's Press, NY, 2008).
22. Wow, I'm an American! How to Live Like Our Nation's Heroic Founders. (Lake Edge Press, Ithaca, NY, 2009).
23. Psychiatric Drug Withdrawal: A Guide for Prescribers, Therapists, Patients and their Families. (Springer Publishing Company, NY, 2013).
24. Guilt, Shame and Anxiety: Understanding and Overcoming Negative Emotions. (Prometheus Books, Amherst, NY, 2014).

IV. PEER-REVIEWED PUBLICATIONS

1. Breggin, Peter. "The Psychophysiology of Anxiety." Journal of Nervous Mental Diseases, 139, 558-568, 1964.
2. Breggin, Peter. "Coercion of Voluntary Patients in an Open Hospital." Archives of General Psychiatry, 10:173-181, 1964. Reprinted with a new introduction in Edwards, R.B. (ed): Psychiatry and Ethics. Buffalo, Prometheus Books, 1982, and in Edwards, R.B. (ed): Ethics of Psychiatry. Amherst, New York, Prometheus Books, 1997.
3. Breggin, Peter. "The Sedative-like Effect of Epinephrine." Archives of General Psychiatry, 12, 255-259, 1965.
4. Malev, J.S, Breggin, P.R., et al. "For Better or for Worse: A Problem in Ethics." International Psychiatric Clinics, 2(3), 603-24, 1965.
5. Breggin, Peter. "Psychotherapy as Applied Ethics." Psychiatry, 34:59-75, 1971.
6. Breggin, Peter. "Lobotomy: An Alert." American Journal of Psychiatry, 129:97, 1972.
7. Breggin, Peter. "Psychosurgery." Journal of the American Medical Association

(JAMA), 226:1121, 1973.

8. Breggin, Peter. "The Second Wave of Psychosurgery." M/H (Mental Health), 57:10-13, 1973.

9. Breggin, Peter. "Therapy as Applied Utopian Politics." Mental Health and Society, 1:129-146, 1974.

10. Lundy PJ and Breggin, Peter. "Psychiatric oppression of prisoners." Psychiatric Opinion. 11(3):30-7, 1974.

11. Breggin, Peter. "Psychosurgery for Political Purposes." Duquesne Law Review, 13:841-862, 1975.

12. Breggin, Peter. "Psychiatry and Psychotherapy as Political Processes." American Journal of Psychotherapy, 29:369-382, 1975.

13. Breggin, Peter. "Madness is a Failure of Free Will; Therapy Too Often Encourages It." Psychiatric Quarterly, 53:61-68, 1981. Originally published (in French) in Verdiglione A (ed):*La Folie Dans La Psychoanalyse*. Paris, Payot, 1977.

14. Breggin, Peter. "Electroconvulsive therapy for depression." New England Journal of Medicine, 27;303(22):1305-6, 1980.

15. Breggin, Peter. "Electroshock Therapy and Brain Damage: The Acute Organic Brain Syndrome as Treatment." Behavior and Brain Sciences, 7:24-25, 1984.

16. Breggin, Peter. "Neuropathology and Cognitive Dysfunction from ECT." Electroconvulsive Consensus Development Conference Programs and Abstracts, pp. 59-64, 1985. Sponsored by the National Institute of Mental Health and the NIH Office of Medical Applications Research. Bethesda, Maryland, June 10-12, 1985 at the National Institutes of Health.

17. Breggin, Peter. "Neuropathology and Cognitive Dysfunction from ECT." Psychopharmacology Bulletin, 22:476-479, 1986.

18. Breggin, Peter. "Brain damage from nondominant ECT." American Journal of Psychiatry, 143(10):1320-1, 1986.

19. Breggin, Peter and de Girolamo, G. "Ellettroshock: Tra Rischioiatrogeno e Mito Terapeutico." Quaderni Italiani di Psichiatria, 6:497-540, 1987.

20. Breggin, Peter. "Precious the Crow." Voices (Journal of the American Academy of Psychotherapists), 23:32-42, Summer 1987.

21. Breggin, Peter. "The Three Dynamics of Human Progress: A Unified Theory Applicable to Individuals, Institutions and Society." Review of Existential Psychology and Psychiatry, 21(1-3):97-123, 1988-89.
22. Breggin, Peter. "Addiction to Neuroleptics?" American Journal of Psychiatry, 146(4):560, 1989.
23. Breggin, Peter. "Dr. Breggin replies." American Journal of Psychiatry, 146(9):1240, 1989.
24. Breggin, Peter. "Brain Damage, Dementia and Persistent Cognitive Dysfunction Associated with Neuroleptic Drugs: Evidence, Etiology, Implications." Journal of Mind Behavior, 11:425-464, 1990.
25. Breggin, Peter. "Psychotherapy in the Shadow of the Psycho-Pharmaceutical Complex," Voices (journal of the American Academy of Psychotherapists), 27:15-21, 1991
26. Weinberg MH and Breggin, Peter. "The homeless mentally ill." American Journal of Psychiatry, 148(5):690-1, 1991.
27. Breggin, Peter. "A Case of Fluoxetine-induced Stimulant Side Effects with Suicidal Ideation Associated with a Possible Withdrawal Syndrome ('Crashing')." International Journal of Risk & Safety in Medicine, 3:325-328, 1992
28. Breggin, Peter. "Parallels Between Neuroleptic Effects and Lethargic Encephalitis: The Production of Dyskinesias and Cognitive disorders." Brain and Cognition, 23:8-27, 1993.
29. Breggin, Peter and Breggin, Ginger Ross. "A Biomedical Programme for Urban Violence Control in the US: The Dangers of Psychiatric Social Control." Changes: An International Journal of Psychology and Psychotherapy, 11(1) (March):59-71, 1993.
30. Breggin, Peter. "Psychiatry's Role in the Holocaust." International Journal of Risk and Safety in Medicine, 4:133-148, 1993. Adapted from a paper delivered at "Medical Science Without Compassion" in Cologne, Germany and published in the conference proceedings.
31. Breggin PR. "Genetics and crime." Science, 262(5139):1498, 1993.
32. Breggin, Peter. "Encephalitis lethargica." Journal of Neuropsychiatry and Clinical Neurosciences, 7(3), 387, 1995.
33. Breggin, Peter. "Campaigns Against Racist Federal Programs by the Center for the Study of Psychiatry and Psychology." Journal of African American Men, 1(3), 3-22, Winter 1995/96.
34. Breggin, Peter. "Should the Use of Neuroleptics Be Severely Limited?" Changes: An

International Journal of Psychology and Psychotherapy, 14:62-66 March 1996.

35. Breggin, Peter and Breggin, Ginger Ross. "The Hazards of Treating 'Attention-Deficit/Hyperactivity Disorder' with Methylphenidate (Ritalin)" Journal of College Student Psychotherapy, 10:55-72, 1996.

36. Breggin, Peter. "Psychotherapy in Emotional Crises without Resort to Psychiatric Medication." The Humanistic Psychologist, 25:2-14, 1998.

37. Breggin, Peter. "Analysis of Adverse Behavioral Effects of Benzodiazepines with a Discussion of Drawing Scientific Conclusions from the FDA's Spontaneous Reporting System." Journal of Mind and Behavior, 19:21-50, 1998.

38. Breggin, Peter. "Electroshock: Scientific, ethical, and political issues." International Journal of Risk & Safety In Medicine, 11:5-40, 1998.

39. Breggin, Peter. "Does clozapine treatment cause brain disease?" Archives of General Psychiatry, 55(9):845, 1998.

40. Breggin, Peter. "Psychostimulants in the treatment of children diagnosed with ADHD: Part I—Acute risks and psychological effects." Ethical Human Sciences and Services, 1:13-33, 1999.

41. Breggin, Peter. "Psychostimulants in the treatment of children diagnosed with ADHD: Part II—Adverse effects on brain and behavior." Ethical Human Sciences and Services, 1:213-241, 1999.

42. Breggin, Peter. "Psychostimulants in the treatment of children diagnosed with ADHD: Risks and mechanism of action." International Journal of Risk and Safety in Medicine, 12 (1), 3-35, 1999. (Simultaneously published version of #'s 24 and 25)

43. Breggin, Peter. "Empathic self-transformation and love in individual and family therapy." Humanistic Psychologist, 27:267-282, 1999.

44. Breggin, Peter. "Treatment of attention-deficit/hyperactivity disorder." Journal of the American Medical Association, 281(16):1490-1, 1999.

45. Breggin, Peter. "What psychologists and psychotherapists need to know about ADHD and stimulants." Changes: An International Journal of Psychology and Psychotherapy, 18:13-23, Spring 2000

46. Breggin, Peter. "The NIMH multimodal study of treatment for attention-deficit/hyperactivity disorder: A critical analysis." International Journal of Risk and Safety in Medicine, 13:15-22, 2000. Also published in Ethical Human Sciences and Services.

47. Breggin, Peter. "MTA study has flaws." Archives of General Psychiatry, 58:1184, 2001.
48. Breggin, Peter. "Empowering social work in the era of biological psychiatry." [The annual Ephraim Lisansky lecture of the University of Maryland School of Social Work.] Ethical Human Sciences and Services, 3:197-206, 2001.
49. Breggin, Peter. "Questioning the treatment for ADHD." Science, 291(5504):595, 2001.
50. Breggin, Peter. "Fluvoxamine as a cause of stimulation, mania, and aggression with a critical analysis of the FDA-approved label." International Journal of Risk and Safety in Medicine, 14: 71-86, 2002. Simultaneously published in Ethical Human Sciences and Services, 4, 211-227, 2002.
51. Breggin, Peter. "Psychopharmacology and human values." Journal of Humanistic Psychology, 43: 34-49, 2003.
52. Breggin, Peter. "Suicidality, violence and mania caused by selective serotonin reuptake inhibitors (SSRIs): A review and analysis." International Journal of Risk and Safety in Medicine, 16: 31-49, 2003/2004. Simultaneously published in Ethical Human Sciences and Services, 5:225-246, 2003.
53. Breggin, Peter. "Re: Mud Splatters." British Medical Journal, October 14, 2004.
54. Breggin, Peter. "Recent U.S., Canadian and British regulatory agency actions concerning antidepressant-induced harm to self and others: A review and analysis." Ethical Human Psychology and Psychiatry, 7, 7-22, 2005. Simultaneously published in the International Journal of Risk and Safety in Medicine, 16, 247-259, 2005.
55. Breggin, Peter. "Recent regulatory changes in antidepressant labels: Implications for activation (stimulation) in clinical practice." Primary Psychiatry, 13, 57-60, 2006.
56. Breggin, Peter. "Court filing makes public my previously suppressed analysis of Paxil's effects." Ethical Human Psychology and Psychiatry, 8, 77-84, 2006.
57. Breggin, Peter. "How GlaxoSmithKline suppressed data on Paxil-induced akathisia: Implications for suicide and violence." Ethical Human Psychology and Psychiatry, 8, 91-100, 2006.
58. Breggin, Peter. "Drug company suppressed data on paroxetine-induced stimulation: Implications for violence and suicide." Ethical Human Psychology and Psychiatry, 8, 255-263, 2006.
59. Breggin, Peter. "Intoxication anosognosia: The spellbinding effect of psychiatric

drugs.” Ethical Human Psychology and Psychiatry, 8, 201-215, 2006. Simultaneously published in the International Journal of Risk and Safety and Medicine, 19, 3-15, 2007.

60. Breggin, Peter. “ECT damages the brain: Disturbing news for patients and shock doctors alike.” Ethical Human Psychology and Psychiatry, 9, 83-86, 2007.

61. Breggin, Peter and Breggin, Ginger Ross. “Exposure to SSRI antidepressants in utero causes birth defects, neonatal withdrawal symptoms and brain damage.” Ethical Human Psychology and Psychiatry, 10, 5-9, 2008.

62. Donald Marks; Breggin, Peter; and Braslow, Derek. “Homicidal ideation causally related to therapeutic medications.” Ethical Human Psychology and Psychiatry, 10, 134-145, 2008.

63. Breggin, Peter. “Antidepressant-induced suicide, violence, and mania: Risks for military personnel.” Ethical Human Psychology and Psychiatry, 12, 111-121, 2010.

64. Breggin, Peter “The FDA should test the safety of ECT machines.” International Journal of Risk & Safety in Medicine, 22, 89-92, 2010.

65. Breggin, Peter. “Psychiatric drug-induced Chronic Brain Impairment (CBI): Implications for longterm treatment with psychiatric medication.” International Journal of Risk & Safety in Medicine, 23: 193-200, 2011.

66. Breggin, Peter. “The Rights of Children and Parents in Regard to Children Receiving Psychiatric Drugs.” Children & Society, 28, 231-241, 2014.

67. van Daalen-Smith, Cheryl; Adam, Simon; Breggin, Peter; and LeFrançois, Brenda A. “The Utmost Discretion: How Presumed Prudence Leaves Children Susceptible to Electroshock.” Children & Society, 28, 205-217, 2014.

68. Breggin, Peter. “The biological evolution of guilt, shame and anxiety: A new theory of negative legacy emotions.” Medical Hypotheses, 85, 17-24, 2015.

69. Breggin, Peter. “Understanding and helping people with hallucinations based on the theory of negative legacy emotions.” Humanistic Psychologist, 43, 70-87, 2015.

70. Breggin, Peter. “Rational Principles of Psychopharmacology for Therapists, Healthcare Providers and Clients.” Journal of Contemporary Psychotherapy, 46, 1-13, 2016.

71. Breggin, Peter. “Extreme psychospiritual states versus organic brain disease: Bringing together science and the human factor.” Journal of Humanistic Psychology, 2018.

V. CHAPTERS IN PROFESSIONAL BOOKS, LETTERS TO THE EDITOR IN PUBLIC MEDIA, AND OTHER SELECTED PUBLICATIONS

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2. "Brain Surgery." *The Boston Globe*, October 20, 1972, page 18.
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VI. AWARDS AND HONORS

1954-58. Honorary Harvard Scholarships. Graduated Harvard with Honors.

1987. Ludwig von Mises Award of Merit for efforts on behalf of the rights of psychiatric patients.

1990. Minnesota Mental Health Association; the David J. Vail National Advocacy Award "For distinguished service in protecting the rights and dignity of mentally disabled Americans."

1994. Honorary Visiting Fellow, Regents College School of Psychotherapy and Counseling, London, England.

1997. Great Minds in Counseling Lecture Series of George Washington University.

1998. Johnson Award "For Lifetime Contributions to the Field of Mental Health Advocacy" presented by the National Association for Rights Protection and Advocacy (NARPA).

1999. Gustavus Myers Outstanding Book Award Honorable Mention for *The War Against Children of Color*.

2000. Dr. Ephraim T. Lisansky Lecture at the University of Maryland School of Social Work.

2000. Maryland Association for Multicultural Counseling and Development, and the Bowie State University Department of Education Certificate of Distinction.

2001. Certificate of Special Congressional Recognition "in recognition of outstanding and invaluable service to the community" in psychiatry (2001), Carolyn McCarthy, Member of Congress.

2008. Visiting Scholar SUNY Oswego Department of Counseling and Psychological Services.

2013. Florida Adlerian Society, Cameron W. Meredith Social Interest Award.

2013. South Carolina Society of Adlerian Psychology, The Arlis J. Epps Social Interest Award: "In recognition of his efforts to help the helpers respond to others in a spirit of caring and empathy. His forthright criticism of contemporary psychiatry's reliance on diagnoses and drugs is a gift to mankind which epitomizes the Adlerian concept of social interest."

2016. Mexican National Award of Giftedness, from the Mexican Federation of Giftedness, an organization that regulates the gifted schools and diagnosis of superior intelligence in Mexico. The award is given "to people whose work impacts or has changed this community in a positive way." It is a pure silver coin with the Mexican national symbol and the gifted community flag engraved on it. A plaque is also given to Dr. Breggin as the keynote speaker at the 1st International Conference of Intellectual Giftedness this year held in Mexico City which had several thousand attendees.

2016. Wellness Forum Health, Health Advocate Award, Presented to Peter. R. Breggin, MD: "Thank you for your tireless efforts as a patient advocate and for being 'The Conscience of Psychiatry.'"

VII. A REVIEW OF DR. BREGGIN'S LEGAL EXPERIENCE

With Online Links to Additional Case Details at:
breggin.com/legal-page

Dr. Peter Breggin often acts as a psychiatric and medical expert or as a consultant in criminal, malpractice, product liability and class action suits. This page presents a list of 70 of

his more successful trials and settlements.

In greatly updating this legal page in early December 2017, Dr. Breggin was able to retrieve information about most of his trial successes since 1986, but not before that time.

Unfortunately, information about many dozens of cases successfully settled before going to trial has not been easy to locate, and only a few are listed. Many of Dr. Breggin's most interesting cases are described in detail in his book, *Medication Madness: the Role of Psychiatric Drugs in Cases of Violence, Suicide and Crime*.

Based on his experience over 50 years, bolstered by his many scientific books and articles, Dr. Breggin is among the most experienced psychiatric experts in the world. He also maintains a private practice in Ithaca, New York.

Dr. Breggin has been a consultant or testified in many high profile cases, such as the Columbine High School and Aurora Theater mass murders and the recent Michelle Carter case—the girl who alleged “texted her boyfriend to death.” He has also been a consultant to the Federal Aviation Agency (FAA) on adverse drug effects on pilots.

Based in part on his expertise adverse drug effects, he has not only been qualified innumerable times to testify in malpractice cases against psychiatrists, but also against doctors in many other specialties such as general practice, pediatrics, internal medicine, neurology and neurosurgery, as well as non-physician healthcare providers.

Dr. Breggin's testimony has involved every class of psychiatric drug, including antidepressants, benzodiazepine tranquilizers, sleeping aids, antipsychotic drugs, stimulants for children diagnosed ADHD. Many cases involve polydrug administration, often involving non-psychiatric drugs as well.

He has testified or consulted on many other cases involving non-psychiatric drugs that have caused brain damage, death and other injuries including psychiatric or neurological crises caused by the following: antibiotics such as Bactrim and Accutane; antiviral agents; cardiovascular medications; Tegretol, opioids and other drugs used to treat pain; and neuroleptics used for non-psychiatric purposes such as Compazine and Phenergan for nausea and vertigo. He has testified or consulted about medication-induced diabetes, cardiovascular problems, fetal developmental abnormalities, and infant and child exposure to Reglan (metoclopramide).

Cases often include drug-induced tardive dyskinesia, neuroleptic malignant syndrome (NMS), serotonin syndrome, suicide, violence, and death from drugs.

He has testified concerning standards for prescribing in private practice, clinics, hospitals, nursing homes, and the Veterans Administration (VA).

He has testified on behalf of parents when mental facilities, state agencies and courts have tried to force them to give psychiatric drugs to their children or elderly parents.

Dr. Breggin has testified in cases involving electroshock (ECT) and psychosurgery, and was the expert in the first ECT and first psychosurgery malpractice cases won in trial.

The following list of Dr. Peter Breggin's experiences in legal cases does not include the very large number of those that have settled on the condition of secrecy. For example, one of his malpractice cases in which he was the sole medical expert resulted in the largest settlement of its kind ever, but required him to remain silent about it.

In digital form, each legal case in the following list is linked to additional information. The digital form can be retrieved at breggin.com/legal-page.

2018: DA Drops 1st Degree Murder Charge Moments before Dr. Breggin's Depo.

2017: Michelle Carter, who was seventeen at the time, was tried for allegedly "killing her boyfriend with words" by encouraging him to re-enter his truck filled with carbon monoxide. The trial resulted in a conviction of manslaughter, followed by a very light sentence. After testifying, and when the trial was over, Dr. Breggin wrote a blog series about the injustice of the conviction and true, tragic story of two young people texting each other in isolation while struggling with disturbed emotions and the negative effects of antidepressant drugs.

2017: Mazella Case Retrial Settled after Frye Victory.

2017: Judge reduces sentence in armed robbery under influence of Prozac intoxication and withdrawal from opioids.

2016: \$11.9 million award in Paxil suicide.

2016: Attempted murder charges dropped due to meds.

2014: \$1.5 million Zyprexa & Risperdal child TD trial.

2014: \$700,000 settled Risperdal Tardive Dyskinesia.

2014: \$1.5 million in Mazella case for Paxil suicide.

2014: Suicide malpractice Prozac and Xanax suicide settled for \$250,000 during my testimony.

2014: Trial of a man on Paxil who shot and wounded his wife and friend results with hung jury on one count of attempted murder and not guilty on the second count. Instead of aggravated assault charges, found Guilty But Mentally Ill.

2012: Dr. Breggin was qualified in Canada as a psychiatrist to testify against psychiatrists in a malpractice suit involving head injury and the administration of psychiatric drugs in

outpatient and inpatient practice, including the antidepressants Prozac and Effexor, resulting in a serotonin syndrome. For reasons beyond the legal arena, the case never went forward.

2012: A nursing home recognized an elderly woman's right to reject psychiatric medication and when she died of unrelated causes, the family sued for multimillions. After Dr. Breggin's deposition for the defense about how the patient lived longer as a result of being free of psychiatric medications, the nursing home was able to settle on very good terms. No other information can be made available on this case.

2011: Judge says Prozac caused teen murder 2011.

2009: Judge awards \$696,674 against Southern California Kaiser Permanente Medical Group in binding arbitration for death related to Tegretol for pain.

2009: Virginia Court of Appeals affirms jury verdict in the Salters ECT case on grounds that Dr. Breggin is "an expert in ECT" and cites his testimony on the standard of care and damages in affirming the jury verdict.

2008: First Virginia Involuntary Intoxication Trial Victory.

2007: Appeals Court Confirms \$635,000 Trial Win by citing Dr. Peter Breggin's testimony and credentials as an expert in ECT.

2006: in a New Jersey malpractice case focused on Prozac and Xanax, a businessman settled for \$250,000 when it was offered during Dr. Breggin's testimony.

2005: Another Paxil/GSK product liability case settled. This is the case that made public Dr. Breggin's previously sealed 2002 Lacuzong Report (see below).

2005: Eli Lilly settles Zyprexa/diabetes cases for \$690 Million. The company agreed to pay \$690 million but denied any wrongdoing.

2005: \$635,000 in first-ever electroshock (ECT) malpractice trial victory.

2005: \$1.6 million TD verdict in Virginia.

2005: In New Mexico, Dr. Breggin testified by telephone in a hearing about the over-medication of a child. Per Dr. Breggin's testimony, the judge ordered the medication stopped and authorized Dr. Breggin's further evaluation.

2004: In New York State, Dr. Breggin testified concerning the incompetency of an elderly woman with dementia, which the judge then confirmed. She required a determination of incompetency in order to be protected from an abusive caretaker.

2004: in a criminal case in Pennsylvania, Dr. Breggin testified by video deposition concerning the role of Paxil and other SSRIs in causing violent and suicidal behavior. The jury hung on one count of attempted murder and found him not guilty on the second count. He was found Guilty But Mentally Ill on aggravated assault charges.

2004: Trial of man who shot and wounded his wife and a friend resulted in hung jury on one count of attempted murder and not guilty on the second count. Guilty but mentally ill on aggravated assault charges.

2004: Jury awarded \$200,000 to a mentally retarded woman was treated with neuroleptics from age 18-22 and developed tardive dyskinesia.

2003: Three Alabama police officers were wounded (none seriously) in a shoot-out with a man taking Paxil. Dr. Breggin testified that the accused developed akathisia and a brief paranoid psychosis before the shoot out and that the psychosis resulted from a mixture of Paxil withdrawal and toxicity. In trial immediately before my testimony, the state initiated and offered a remarkable plea bargain: three first-degree attempted murder charges were reduced to assault, plus he received a reduced sentence.

2003: in the State of Washington, a man developed tardive dyskinesia after being treated older and newer antipsychotic drugs. The trial ended with a hung jury. This is Dr. Breggin's only failure to be on the winning side in many trials of adult tardive dyskinesia cases.

2003: A respected man in Pennsylvania drove his automobile into an unsuspecting policeman to knock him down to obtain his gun to commit suicide. Based on Dr. Breggin's report concerning Paxil, the injured police officer and the state's attorney joined in requesting his release after approximately one year in jail and a reduction in his overall sentence to 1-2 years, with 8 years probation.

2003: A child prescribed multiple psychiatric medications, including antipsychotics from an early age, suffered developmental delays and tardive dyskinesia. Dr. Breggin testified that the TD he diagnosed years earlier was largely resolved by trial. One of the defendants settled prior to trial and the other two prevailed in trial.

2002: \$7.5 million in first-ever psychosurgery malpractice trial victory (\$7.5 million against Cleveland Clinic).

2002: Massive Lacuzong Paxil product liability suit settled in January against GlaxoSmithKline (GSK). Lacuzong drowned himself and his two small children in a bathtub immediately after starting Paxil and developing akathisia (a dangerous psychomotor agitation). The heart of the successful case was Dr. Breggin's lengthy expert opinion and report based on his three-day onsite investigation of GSK's secret files. Unfortunately, the settlement sealed Dr. Breggin's large Lacuzong report. Then in 2006, in another Paxil/GSK productive liability suit involving Dr. Breggin, a new judge opened Dr. Breggin's report to the public. In quick

succession, Dr. Breggin published three detailed scientific reports on Paxil-induced violence, suicide and akathisia, as well as the negligence and fraud perpetrated by GSK in developing and marketing Paxil. Here are the first, second, and third published reports. Here is Dr. Breggin's original Lacuzong report that led to the settlement with GSK in 2002 and to later settlements by the company.

2002: Paxil Suicide Withdrawal Product Case against GSK Resolved.

2002: Court Finds Prozac and Xanax Cause Criminal Conduct.

2002: In a Massachusetts case, a Medical Tribunal found in favor of the Plaintiff, stating that Dr. Breggin had raised sufficient concern about the long-term administration of the benzodiazepine "to raise a legitimate question of liability appropriate for judicial inquiry."

2001: Judges Reduce Sentences in Latest Paxil and Prozac Criminal Cases.

2001: Patient Dies in Clinical Drug Trial: Jury Finds Menninger Clinic Negligent.

2001: Judge reduces sentence in violent assault related to effects of Prozac, Remeron, and BuSpar.

2001: TD case Settled in Trial after Dr. Breggin's Testimony.

2001: Judge agrees that Prozac and Xanax caused Bizarre Bank Robberies.

2001: In Virginia in a criminal violence case, Dr. Breggin sent a letter to a judge for a sentencing hearing reaffirming his trial concerning the harmful effects of Prozac, Remeron, and BuSpar. The judge gave a reduced sentence, and in his written opinion cited Dr. Breggin's testimony.

2001: In South Carolina a sentencing hearing for a 27 year old man with no prior history of violence who pleaded guilty to rape charges, Dr. Breggin presented evidence that Paxil can cause mania with disinhibition and aggressive sexuality. The judge concluded that Paxil contributed to the crime. Instead of sentencing him to life without parole, he gave him a more limited 21-year sentence.

2001: A woman was treated antipsychotic drugs developed severe tardive dyskinesia and tardive dystonia. The case was settled satisfactorily in favor of the plaintiff before it went to the jury.

2001: After the 1998 case of the man who shot the policeman, Dr. Breggin testified on the man's behalf in a malpractice suit against the hospital and the doctor who had inflicted outpatient electroshock treatment upon him while he was taking Prozac, Ritalin, the benzodiazepine Klonopin, BuSpar, and Depakote. After the completion of most of Dr. Breggin's

testimony, the judge called a brief recess, and defendant hospital settled the case without cross-examining him. The doctor had settled earlier in the trial.

2000: Landmark Victory in First Canadian Tardive Dyskinesia Trial.

2000: In West Virginia, the parents of a twelve-year-old boy wanted to remove him from involuntary treatment with multiple drugs at a state facility. Based on his medical reports, the judge allowed the parents to take him home and empowered Dr. Breggin to supervise his outpatient treatment.

2000: A man injured in a car accident while driving himself home after an MRI sued his neurologist for prescribing too large a dose of the sedative Ativan and sued the MRI center for letting him leave while heavily sedated. The plaintiff was awarded \$840, 000.

2000: A father wanted custody of his nine-year-old son in order to remove him from residential treatment and to withdraw him from multiple psychiatric medications. Dr. Breggin wrote an emergency medical report for the judge, including his finding that the child had early signs of tardive dyskinesia. The judge followed Dr. Breggin's recommendations and custody was awarded to the father and Dr. Breggin was empowered to consult long-distance with a primary care doctor who followed his instructions on how to withdraw the child from psychiatric drugs.

1998: Appeals Court Shocks Defense: Raises TD award to over \$2 Million.

1998: In Missouri, the jury reached a verdict of "Not Guilty By Reason of Diminished Capacity" in the case of man who had stood in front of his house with a pistol in each hand and fired upon a parked patrol car occupied by his wife and by a police officer who was slightly injured and returned fire. The morning of the incident, the defendant had received the second in a series of electroshock treatments for depression on an outpatient basis. He was also taking five prescribed psychiatric medications, including Prozac.

1998: In Virginia, a man pled guilty to several daylight home burglaries for drugs over a few day time period. At sentencing, Dr. Breggin testified on the effects of psychiatric drugs, as well as premature discharge from a drug rehab hospitalization. The judge, following Dr. Breggin's testimony, lightened his sentence, specifying that the purpose was to initiation of rehabilitation.

1998: In Chicago, a man committed suicide while taking the benzodiazepine sleeping pill, Halcion. The drug company, Upjohn, settled prior to trial. In the malpractice trial, the jury awarded the plaintiff \$1.2 million.

1998: A fourteen-year-old girl in Florida was charged with first-degree attempted murder when her gun misfired. Dr. Breggin testified on involuntary intoxication with Prozac. The jury came back with a conviction on a lesser charge and the girl served a relatively brief sentence in a residential setting without jail time.

1997: In Fairfax, Virginia a young man taking multiple psychiatric drugs assaulted a policeman. Dr. Breggin raised a successful involuntary intoxication defense. This was a first in Virginia.

1997: A teenage boy committed murder while on the antidepressant Zoloft. Dr. Breggin testified in trial concerning hospital negligence and adverse medication effects and the boy was found guilty of first-degree murder. On appeal, the verdict was reversed on grounds that Dr. Breggin's testimony offered sufficient evidence of involuntary intoxication to require a specific jury instruction.

1997: In Baton Rouge, Louisiana, a woman developed tardive dyskinesia and the jury awarded \$1.3 million[[/sg_popup](#)]. In 1998, the case was appealed and in an unusual turn of events, the appeals court nearly doubled the award to the plaintiff to over \$2 million.

1997: In North Carolina, a man taking the antidepressant Effexor was charged with violent crimes that could have added up to several life sentences. The judge accepted Dr. Breggin's report on involuntary intoxication from Effexor and the case was disposed satisfactorily to the defense by a plea bargain.

1996: In Iowa City, Iowa, a woman named Rohovit was injured by electroshock treatment. She sued the manufacturer of the ECT machine (MECHTA) and the company settled.

1994: While taking Prozac, a man assaulted his neighbor. The court accepted Dr. Breggin's written report on adverse effects of the antidepressant Prozac including violence, and the judge accepted a lesser plea and released the man from jail.

1994: A Virginia man committed a very violent murder while intoxicated with a variety of medical and non-medical drugs. The jury rejected the state's first-degree murder charge and convicted on second degree.

1994: Kentucky Supreme Court Overturns Verdict for Lilly in Prozac Mass Murder Trial (Fentress v. Eli Lilly). In the early 1990s Dr. Breggin was selected by a consortium of attorneys and approved by an Indiana federal judge to be the sole scientific and medical expert for the common scientific and negligence issues for all of the more than 100 combined Prozac-related cases brought against the manufacturer, Eli Lilly and Company (makers of Prozac®). Specifically, Dr. Breggin was appointed to evaluate for the plaintiffs the scientific basis for the claim that Prozac was causing violence and suicide, and to evaluate the drug company's potential negligence in the development and marketing of Prozac, including any attempts to hide the risk of Prozac-induced suicide and violence. He also evaluated some individual cases for their merit. The first Prozac case to come to trial was the mass murder perpetrated by Joseph Wesbecker at his former workplace, which occurred shortly after he became psychotic on Prozac. The jury was nearly hung but gave a split decision in favor of Lilly.

After the trial, the Kentucky Supreme Court and the trial judge determined that the trial had been

fixed between the plaintiff and defendant. Dr. Breggin began to suspect a fixed trial before the trial took place because critical documents were being withheld from him as the expert.

In return for untold millions of dollars, plaintiff's attorney had conspired with Lilly to throw the trial in Lilly's favor. Although profoundly disillusioning to experience the fraud, Dr. Breggin's role as the scientific expert for the combined Lilly cases gave him a unique understanding of how to research and to evaluate product liability lawsuits, including the internal processes of drug companies and the FDA. The story is told in greatest detail in Dr. Breggin's book *Medication Madness* with multiple citations documenting the fraud.

1993: In *New Jersey v. Biegenwald*, I testified in the sentencing phase of a capital case against giving the death penalty to a man who had impulsively and brutally killed several individuals in fights over a several year period. I testified about his Bellevue psychiatric hospital records, where he was sent as a child for truancy from a malfunctioning family. At Bellevue at the age of ten, Biegenwald committing his first known aggressive act when the child "attacked" the doctor who had given him ECT (electroconvulsive treatment). At that time, ECT was done without anesthesia and muscle paralyzing drugs. I obtained historical films from the National Library of Medicine and played them for the jury, showing adults undergoing ECT during the same time as the child Biegenwald. The shock treatment knocked the patients out, traumatizing them into massive body-shaking convulsions. As the jurors watched the film, I reminded them to imagine this same violent "treatment" being inflicted on a small child rather than an adult as in the film. I explained how damaging the treat was (and still is). I then concluded by asking the jury, if society had driven Biegenwald the child to violence with electrical trauma, should now we now finish him off by killing him with electrical trauma. The jury rejected the death penalty.

1992: A child developed tardive dyskinesia after treatment with antipsychotic drugs. After deposition testimony, the judge affirmed Dr. Breggin's status as an expert and the drug company and healthcare providers settled.

1991: The Supreme Court of New York County used Dr. Breggin's expert report, citing it for several pages, to reject an ECT manufacturer's request for summary judgment in the product liability case against them. The case then settled.

1991: An elderly man involuntarily hospitalized since his teenage years and now suffering from post-traumatic dementia brought an action to be released from St. Elizabeths Hospital in DC on the grounds that he was not mentally ill and chose a jury trial. Dr. Breggin testified on the effects of physical and sexual abuse in the hospital throughout his lifetime hospital stay from his teenage to his elder years. Dr. Breggin also testified on the impact of multiple medications, electroshock, repeated sexual abuse, and chronic institutionalization on a teenager, adult, and elder. The jury found for the patient, declaring that he was not mentally ill, and by implication, that he was being abused. The judge ordered the hospital to facilitate his release to a less restrictive environment.

1991: A man was injured by psychosurgery that was again performed by Harvard

psychosurgeon H.T. Ballantine and Dr. Breggin again testified. The psychosurgeon prevailed but the case contributed to his being unable to continue practicing. See similar case against him in 1987.

1991: A Canadian Court, without Dr. Breggin appearing, cited as “authorities referred to” his paper “Brain damage, dementia, and persistent cognitive dysfunction associated with neuroleptic drugs: Evidence, etiology, and implications,” his 1990 article in the *Journal of Mind and Behavior*.

1989: A North Carolina clinic was sued for the death of a young man who was not medicated by the clinic. Dr. Breggin testified in trial on behalf of the clinic’s treatment and the clinic prevailed.

1988: Tardive dyskinesia case won in Anchorage Alaska with Dr. Breggin pitted against an array of the establishments leading experts for the defense.

1987: A man was injured by psychosurgery performed by Harvard psychosurgeon H.T. Ballantine. Dr. Breggin testified on the standard of care and effects of psychosurgery. The jury found for the plaintiff, but the case contributed to Harvard psychosurgeon H T. Ballantine soon being unable to continue practicing. See similar case against him in 1991.

1987: A woman sued the manufacturer of an electroconvulsive shock machine in New York State. The judge cited Dr. Breggin’s report to reject the ECT manufacturer’s request for summary judgment and the case was settled.

1987: A teenage boy was mistreated in a Texas residential facility where he was sent by the District of Columbia. Dr. Breggin testified concerning his medication, restraint, involuntary status, and hospital treatment. The judge removed the boy from the Texas hospital and required the District of Columbia to provide him outpatient care.

1986: *Marjorie Allen White v. Bernard Bressler, MD, Duke University Medical Center, et al.*, (Cleveland County Superior Court). This is the first of two cases against Bressler and Duke which Dr. Breggin evaluated for negligence and damages. According to the North Carolina Academy of Trial Lawyers, “this is one of the largest medical malpractice non-structured settlements(the settlement is confidential) involving a non-physical injury in North Carolina history.” The cases surrounding Bernard Bressler have also been called “one of the largest malpractice settlements in North Carolina history.” According to the plaintiff’s attorney, the case was settled for “more than \$1,000,000.” Bressler was accused of massively overdosing the patient and abusing her in various ways. Dr. Breggin played a key role in allowing the Marjorie White case to go forward. He wrote a detailed scientific report arguing that statute of limitations should not have tolled because Bressler sent the patient for psychosurgery (a form of lobotomy called cingulotomy) that made her incapable of bringing a suit. See the very similar Betty Jordan case (below)

1986: Betty Jordan v. Dr. Bernard Bressler, Duke University Medical Center, et al., (Guilford County Superior Court). This was an action filed for psychiatric malpractice, hospital negligence, and corporate negligence. The case is significant in that it involved numerous alleged acts of corporate and individual medical malpractice. Bressler was accused of massively overdosing the patient and abusing her in various ways. In accordance with the terms of a confidential settlement agreement, the plaintiff can only report that the case was "resolved." The cases surrounding Bernard Bressler have been called "one of the largest malpractice settlements in North Carolina history." Dr. Breggin played a key role in allowing the Betty Jordan case to go forward. He wrote a detailed scientific report arguing that statute of limitations should not have tolled because Bressler sent the patient for psychosurgery (a form of lobotomy called cingulotomy) that made her incapable of bringing a suit. See the very similar Betty Jordan case (above).

1972: Landmark Kaimowitz case ends psychosurgery in state hospitals, VA and NIH.