

> Psychiatric Times
> Conservative Groups Press Currie on Screening
> By: Stephen Barlas
>
> Conservative interest groups extracted commitments from Substance Abuse
> and Mental Health Services Administration (SAMHSA) Administrator Charles
> Currie to consider new restrictions on how states use the new mental
> health Transformation Grants, the first round of which SAMHSA announced
> last September. At a meeting with Currie on Oct. 17, he promised to
> consider requiring states to obtain parental consent before screening
> children for mental health problems when those screening programs are paid
> for with Transformation Grant money. That is not now a requirement. Currie
> also agreed to evaluate current mental health screening and treatment
> programs for effectiveness, a move SAMHSA set in motion in August.
>
> Underlying the groups' agenda was their belief that many mainline
> screening and treatment programs—such as TeenScreen and the Texas
> Medication Algorithm Project (TMAP)—are thinly veiled Trojan horses for
> the pharmaceutical industry. In a press release following the meeting,
> Vera Hassner Sharav, founder of the Alliance for Human Research Protection
> (AHRP), stated that the National Association of State Mental Health
> Program Directors (NASMHPD) is promoting TMAP around the country. She
> alleged that "the meetings of NASMHPD are under the influence of
> pharmaceutical company representatives; that the industry supports NASMHPD
> financially; and that many of these state directors serve on
> pharmaceutical advisory boards."
> She said Michael F. Hogan, chairman of the New Freedom Commission and
> state mental health director from Ohio, a state that adopted TMAP, served
> on an advisory board for Janssen Pharmaceutica Products, L.P., the
> manufacturer of Risperidal (risperidone), an antipsychotic recommended by
> TMAP as a first-line drug. When contacted by Psychiatric Times, Hogan
> declined to address any connection he might have, or have had, with
> Janssen.
> The Oct. 17 meeting was held a few weeks after SAMHSA awarded \$92.5
> million over five years to seven states. The money will be used to
> restructure state mental health programs. The Substance Abuse and Mental
> Health Services Administration published a Mental Health Action Agenda
> that laid out possible means toward that end.
> The Action Agenda, in turn, is influenced by the recommendations of
> President Bush's New Freedom Commission, which Hogan chaired.
> Many conservative groups at the meeting with Currie misinterpreted the New
> Freedom Commission's recommendations as backing wholesale mental health
> screening of children. They asked Currie to ensure that states using
> Transformation Grant money for screening children obtain prior consent
> from parents. They urged Currie to disavow Columbia University's
> widely-used TeenScreen program and the TMAP, according to Sharav's press
> release. In addition to AHRP, other groups at the meeting included:
> EdWatch, International Center for the Study of Psychiatry and Psychology,
> Eagle Forum, Association of American Physicians and Surgeons, American
> Psychoanalytic Association, and Mind Freedom.
>
> Mark A. Weber, associate SAMHSA administrator, who attended the meeting,
> told PT Transformation Grants are primarily aimed at helping states
> convert their mental health infrastructure, not providing mental health
> services. A portion of the grant money can be used for mental health
> screening of children and adults. There are no published guidelines on how

> screening must be conducted or which screening programs can or cannot be
> used. There is no requirement that states obtain prior consent from
> parents before screening children. Weber said that Currie committed to
> considering adding language the next time SAMHSA sends out a request for
> proposals for these grants clarifying the parental consent issue.
> Currie did not disavow TeenScreen, as Sharav's press release implied.
> States are free to use that program, Weber emphasized. According to its
> Web site, TeenScreen assesses children for depression risk factors; it
> does not lead to a diagnosis, much less a treatment recommendation. Two
> forms of consent, active and passive, can be used to obtain parents'
> permission for the screening. Currently, 98.2% of TeenScreen sites use
> active parental consent, which requires parents to sign a consent form if
> they want their child to participate in screening. Passive consent
> (waiver-of-consent or opt-out consent) requires parents to return a
> provided form only if they do not want their child to participate.
> Sharav's press release claimed: "TeenScreen uses vague, subjective
> questions based on unscientific diagnostic criteria. TeenScreen is itself
> scientifically not validated, has resulted in high rates of false
> positives so that normal children who are healthy are misidentified with
> mental disorders."
> States are also free to use TMAP, Weber said. The TMAP is a set of
> guidelines for physicians treating severely mentally ill patients within
> Texas' publicly funded mental health care system. They were developed by
> the University of Texas Southwestern and have been used in the state since
> 1997. Findings published in 2004 showed two to three times greater
> improvement in patients with major depressive disorder who were treated
> according to TMAP guidelines (Arch Gen Psychiatry 61[7]:669-680).
> The conservative groups have assailed TMAP, which they say is being
> promoted by NASMHPD. In a press release Sharav explained that TMAP
> "recommends the atypical antipsychotics and the [selective serotonin
> reuptake inhibitor-serotonin norepinephrine reuptake inhibitor]
> antidepressants as first line-and sometimes the ONLY treatment. ...
> However, a body of scientific evidence recently disclosed to the public
> has revealed that these drugs lack efficacy and that they are linked to
> severe, even fatal side effects. The compelling, newly revealed evidence
> has caused SAMHSA to dissociate from these medication algorithms."
> Weber explained that SAMHSA has not disassociated itself from TMAP. Andrew
> D. Hyman, director of the office of government relations at NASMHPD, told
> PT, "I truly doubt Mr. Currie is stepping away from tools such as TMAP,
> which serve to ensure better medical management techniques and better
> outcome."
> Currie told the groups that he supported reevaluating TMAP and other
> approaches toward providing mental health services as new science becomes
> available. In August, SAMHSA had already started the wheels turning in
> that direction by publishing a notice in the Federal Register announcing
> its intent to develop a National Registry of Evidence-Based Programs and
> Practices (NREPP) in the area of substance abuse treatment and mental
> health services. It already has an NREPP for substance abuse prevention
> programs, and rates those as promising, effective or model; some programs
> receive no rating, which implies they are ineffective. State programs use
> those ratings as guidance.
>
> FAIR USE NOTICE: This may contain copyrighted (©) material the use of
> which has not always been specifically authorized by the copyright owner.
> Such material is made available for educational purposes, to advance
> understanding of human rights, democracy, scientific, moral, ethical, and
> social justice issues, etc. It is believed that this constitutes a 'fair

> use' of any such copyrighted material as provided for in Title 17 U.S.C.
> section 107 of the US Copyright Law. This material is distributed without
> profit.