

Broadway  
NSW 2037

2 April 2019

Mental Health Inquiry  
Productivity Commission  
GPO Box 1428  
Canberra City  
ACT 2600

Dear Sir or Madam,

This is a submission to the Mental Health Inquiry and the topic is:

The damaging side effects of psychiatric medications.

I've attached a chart that gives the comparison between the side effects of a blood pressure tablets and psychiatric drugs. The reason I've done this is to illustrate that if the blood pressure tablets had the same type of side effects as the psychiatric tablets there would be an absolute outrage among patients and something would be done to ban them from human consumption. However, the psychiatric drugs have been prescribed by psychiatrists and doctors for many years with no questions asked.

So the question is why does the TGA approve these obviously dangerous drugs? It appears that the TGA gets considerable income from being paid by the drug companies who submit their drugs for approval. This is a flawed system that is SIMPLY NOT WORKING TO PROTECT THE INTEREST OF PATIENTS.

I also enclose a news article that demonstrates how dangerous these drugs are. The young lady took her own life and the NSW Coroner failed to connect the link between the two drugs she was taking.

These drugs may be making the drug companies huge profits but at what cost to the patients (and tax payers) who take them and do not realize the damaging effects of what they are consuming. Also, the drug companies have permanent customers in some cases as once they are taking them they can't stop taking them because of their addictive qualities.

Yours faithfully,

Richard Burnell

## COMPARISON OF SIDE EFFECTS OF PSYCHIATRIC AND OTHER DRUGS

Drug Medication or	TREATMENT FOR	Attempts of Self Destruction/ Suicide Thoughts	Anxiety and Panic Attacks	Hostility and Impulsive Activity	Difficulty Sleeping	Hallucination	Loss of Appetite	Increase in Blood Pressure	Fits or Convulsions	Nausea
AVAPRO	High Blood Pressure	No	No	No	No	No	Yes	No	No	No
DIABEX	Blood glucose level	No	No	No	No	No	No	No	No	No
DIAMICRON	Blood glucose level	No	No	No	No	No	No	No	No	No
EXEFOR-XR	Depression	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
LEXAPRO	Depression	No	Yes	No	Yes	Yes	Yes	No	No	Yes
PROZAC	Depression	No	Yes	Yes	Yes	No	Yes	No	Yes	Yes
RITALIN LA	ADHD	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
STRATTERA	ADHD	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No
ZOLOFT	Depression	No	Yes	No	Yes	No	No	No	Yes	Yes

Source Reference: Federal Government Health Department Consumer Medicine Information

Sheets available from any pharmacist

## STRATTERA®

atomoxetine hydrochloride

### Consumer Medicine Information

#### What is in this leaflet

This leaflet answers some common questions about STRATTERA. It does not contain all the available information. It does not take the place of talking to your doctor or pharmacist.

The information in this leaflet was last updated on the date shown on the final page. More recent information on this medicine may be available. Make sure you speak to your pharmacist or doctor to obtain the most up to date information on this medicine. You can also download the most up to date leaflet from [www.lilly.com.au](http://www.lilly.com.au). The updated leaflet may contain important information about STRATTERA and its use that you should be aware of.

All medicines have risks and benefits. Your doctor has weighed the risks of you taking STRATTERA against the benefits it may have for you.

**If you have any concerns about taking this medicine, ask your doctor or pharmacist.**

**Keep this leaflet with the medicine.**

#### What STRATTERA is used for

STRATTERA is used to treat Attention Deficit Hyperactivity Disorder (ADHD) in children 6 years and older, adolescents and adults. ADHD is a behavioural disorder that causes lack of focus and/or hyperactivity that is much more frequent or severe than others who are close in age or development.

STRATTERA works by acting on brain chemicals called amines which are involved in controlling behaviour.

**Ask your doctor if you have any questions about why this medicine has been prescribed for you. Your doctor may have prescribed it for another reason.**

Available evidence suggests that STRATTERA does not have a significant potential for abuse.

This medicine is available only with a doctor's prescription.

#### Before you take STRATTERA

##### When you must not take it

**Do not take STRATTERA if you have an allergy to:**

- any medicine containing atomoxetine hydrochloride (the active ingredient in STRATTERA)
- any of the ingredients listed at the end of this leaflet.

Some of the symptoms of an allergic reaction may include shortness of breath, wheezing or difficulty breathing; swelling of the face, lips, tongue or other parts of the body; rash, itching or hives on the skin.

**Do not take STRATTERA if you have any of the following conditions:**

- certain heart diseases such as moderate to severe hypertension, abnormal or dangerously fast heart beat, thickening and hardening of the walls of the arteries due to cholesterol deposits
- an uncontrolled overactive thyroid gland which causes increased appetite, weight loss, intolerance to heat, increased sweating, tremors, and rapid heart rate

- a tumour of the adrenal gland, which sits near the kidney. The symptoms are bouts of anxiety and headaches, palpitations, dizziness, a feeling of weakness, nausea, vomiting, diarrhoea, dilated pupils and blurring vision, stomach pains, and raised blood pressure.

**Do not take STRATTERA if you are taking medicine called a monoamine oxidase inhibitor (MAOI) for the treatment of depression or have been taking a MAOI within the last 14 days.**

Check with your doctor or pharmacist if you are unsure as to whether or not you are taking a MAOI.

If you do take STRATTERA while you are taking a MAOI, you may experience shaking (tremor), shivering, muscle stiffness, fever, rapid pulse, rapid breathing or confusion.

**Do not take STRATTERA if you have high pressure in the eye (glaucoma), or have a family history of glaucoma.**

**Do not take this medicine after the expiry date printed on the pack or if the packaging is torn or shows signs of tampering.**

If it has expired or is damaged, return it to your pharmacist for disposal.

**If you are not sure whether you should start taking this medicine, talk to your doctor.**

##### Before you start to take it

**Tell your doctor if you have allergies to any other medicines, foods, preservatives or dyes.**

**Tell your doctor if you have or have had any of the following medical conditions:**

- high blood pressure
- low blood pressure
- fast heart beat
- heart disease
- conditions affecting blood flow in the brain, such as stroke
- liver disease
- kidney disease
- an overactive thyroid gland
- enlargement or disease of the prostate
- difficulty passing urine
- seizures, fits or convulsions
- any psychiatric disorder, including depression or bipolar disorder.

**Tell your doctor if you or your child have or have had:**

- thoughts or talk of death or suicide
- thoughts or talk of self-harm or harm to others
- any recent attempts at self-harm.

You may wish to see a paediatric psychiatrist for further assessment and supervision of your child.

**Tell your doctor if you:**

- are involved in strenuous exercise or activities
- are using a group of medicines called stimulants
- have a family history of sudden/cardiac death.

STRATTERA generally should not be used in children, adolescents or adults with known structural heart abnormalities.

**Tell your doctor if you are pregnant or plan to become pregnant or are breast-feeding.** Your doctor can discuss with you the risks and benefits involved.

Safety and effectiveness in elderly patients older than 65 years and children younger than 6 years have not been established.

**If you have not told your doctor about any of the above, tell him/her before you start taking STRATTERA.**

##### Taking other medicines

**Tell your doctor or pharmacist if you are taking any other medicines, including any that you get without a prescription from your pharmacy, supermarket or health food shop.**

Some medicines may be affected by STRATTERA or may affect how it works. You may need different amounts of your medicines or you may need to take different medicines.

These include:

- monoamine oxidase inhibitors (MAOIs), medicines used to treat some types of depression. **You should stop taking MAOIs at least two weeks before starting STRATTERA**
- certain medicines used to treat depression such as fluoxetine, paroxetine, desipramine, imipramine, venlafaxine and mirtazapine
- certain medicines used to treat irregular heart beat such as quinidine
- medicines used to treat low blood pressure or to raise blood pressure (pressor agents)
- medicines containing the decongestants pseudoephedrine or phenylephrine
- asthma reliever medicines such as salbutamol, when taken orally as a syrup or as an injection
- certain medicines taken for anxiety such as diazepam or to treat epilepsy such as phenytoin.

Your doctor and pharmacist have more information on medicines to be careful with or avoid while taking STRATTERA.

#### How to take STRATTERA

**Carefully follow all directions given to you by your doctor or pharmacist.**

They may differ from the information contained in this leaflet.

**If you do not understand the instructions on the box, ask your doctor or pharmacist for help.**

##### How much to take

For children and adolescents up to 70 kg body weight, the usual starting dose is approximately 0.5 mg/kg once a day.

After a minimum of 3 days, if necessary, the dose may be increased to approximately 1.2 mg/kg once daily in the morning or as evenly divided doses in the morning and late afternoon/early evening. After 2 to 4 additional weeks, if necessary, the dose may be increased to a maximum of 1.4 mg/kg once daily or 100 mg.

For children and adolescents greater than 70 kg body weight and adults, the usual starting dose is 40 mg once a day.



# Dragun's suicide may have been avoided: coroner

The suicide death of newsreader Charmaine Dragun was probably preventable if her mental condition had been properly diagnosed, a Sydney coroner has found.

**He also said the suicide would not have happened if Dragun had been prevented access to the cliff edge at The Gap.**

Deputy State Coroner Malcolm MacPherson said the diagnosis that Dragun suffered from depression was "almost certainly wrong" and she most likely had a bipolar disorder.

The coroner said if the health professionals treating Dragun had made the correct diagnosis "she would have been properly treated with a mood stabiliser and she probably would not have committed suicide".

The coroner was handing down his findings at the Coroner's Court in Glebe today into the death of the 29-year-old, who jumped to her death at The Gap in Sydney's east, on November 2, 2007.

The coroner made a number of recommendations, including the need for increased awareness among health professionals to exclude a bipolar disorder in all patients presenting with signs and symptoms of depression.

He also said the issue of funding for the completion of suicide prevention work at The Gap was vital.

Dragun had a budding career with Network Ten and was about to marry when she committed suicide.

The coroner said he was comfortably satisfied her death was an act of suicide.

"Her jump from the cliff at the gap was done with intent and in the full knowledge of its consequences," he said.

He said the change in her drugs regime in the lead-up to the death could not be said to have "caused" her suicide, in the sense that they put the idea into her head or "caused" her to behave in an irrational way and with no control over her actions.

"Quite apart from the deficiencies in her management by her health professionals, Charmaine's suicide would not have happened if she had been prevented access to the cliff edge at The Gap," Mr MacPherson said.

Earlier, he described Dragun as a "talented and successful newsreader" who seemingly had everything to live for.

He noted that her family and partner believed that she would have wanted "to assist others struggling with mental illness" and therefore wanted her story to be told.

Dragun's mother said outside court today she hoped the recommended changes in mental health care would mean her daughter "has not died in vain".

Mrs Dragun said it had been very emotional morning but a "very fruitful one".

She said "we can all learn" from the coroner's investigation and "we can all make a difference".

"Hopefully the medical profession will read and take in the findings and we will see a difference in medical health care," she said.

"My daughter then has not died in vain."

Asked to describe her daughter, she said she was "beautiful, bubbly and the most caring and wonderful daughter anyone could have".

Dragun's long-term love, Simon Struthers - whom she was planning to marry on her 30th birthday - told reporters the inquest had provided a positive outcome to help other people.

"I think even if it goes some way to even just raising a bit of awareness and started people talking about it in the community, that is a start," he said.

He said people had to realise the issue of mental health should be talked about openly.

Asked what advice he had for people in Dragun's mental health position, Mr Struthers said he urged them to talk to their friends and families who, would be with them "every step of the way".

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