

WHAT DOES 460 VOLTS  
OF ELECTRICITY HITTING YOUR  
BRAIN FEEL LIKE?

A DOCUMENTARY

THERAPY OR  
**TORTURE**

THE TRUTH ABOUT ELECTROSHOCK

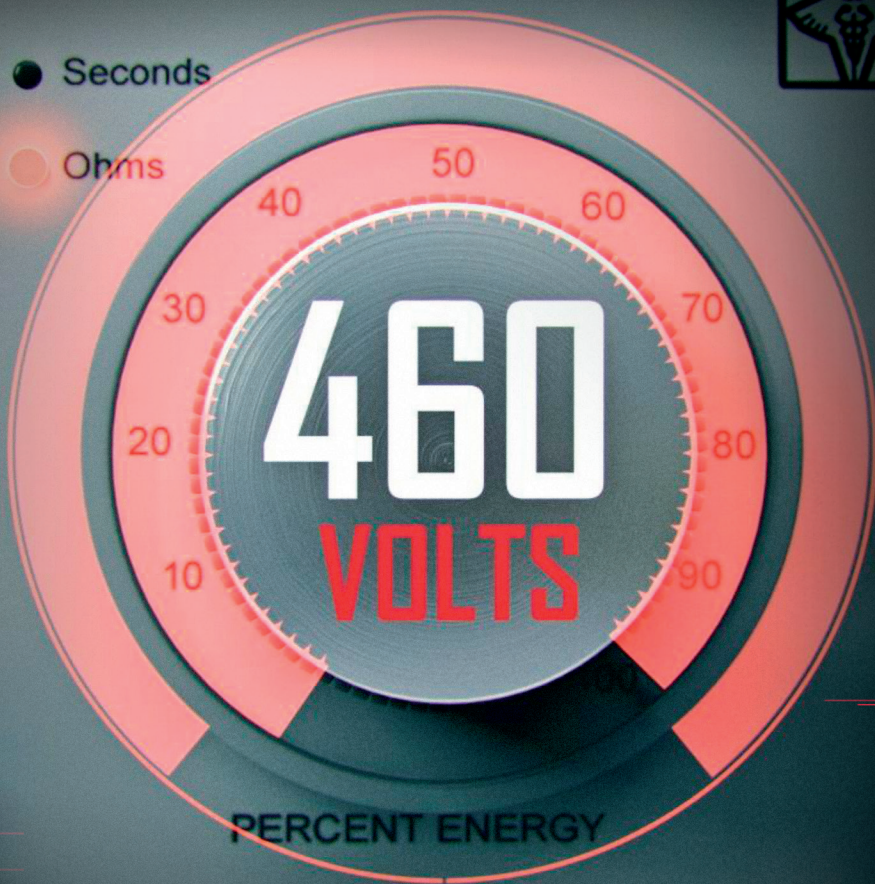
A SUPPLEMENT TO THE DOCUMENTARY

# THE THERAPY OR TORTURE

THE TRUTH ABOUT ELECTROSHOCK



Presented by Citizens Commission on Human Rights



## WHAT IS ECT?

**ELECTROCONVULSIVE THERAPY, OR ECT, IS A** procedure used by some psychiatrists. Up to 460 volts of electricity are sent coursing through the brain. Why? To produce a grand mal seizure they claim will “reset” or “reboot” the brain.

This theory has never been proven. In fact, there is considerable evidence that ECT causes significant and irreversible brain damage.

The human brain is a highly intricate organ, controlling the body with more than five trillion signals every second. It performs that feat with nearly eight times less than the power of a watch battery. But one ECT session assaults the brain with 2,300 times more electricity than it needs to function, leading to severe trauma. ■

**HOW MANY ELEVATORS CAN BE POWERED WITH THE ELECTRICITY FROM ONE ECT SESSION? WATCH THE DOCUMENTARY.**



**YOU'VE HAD AN ECT  
SCIENCE LESSON.**

**NOW FOR A  
HISTORY LESSON.**

**WORLD WAR I—PSYCHIATRISTS IN GERMANY** applied a primitive shock machine to shellshocked soldiers. Their goal? To make soldiers more terrified of a hospital than fighting on the front lines.

**1920s**—Austrian psychiatrist Manfred Sakel sought to drive out “bad brain cells” by injecting his patients with insulin. Despite severe convulsions and a five percent death rate, Sakel defended his “treatment” by pointing to the resulting childlike state of his patients. Hospital shock wards and insulin therapy became big business.

**1930s**—Hungarian neuropsychiatrist Ladislav Meduna believed he could drive out mental illness by inducing brain-damaging seizures with a drug called Metrazol. A psychiatrist could chemically shock 50 patients into a docile state in one morning, making the procedure extremely lucrative. This financial success sparked an even more profitable method of inducing brain-damaging convulsions—electric shock. ■



NEUROPSYCHIATRIST LADISLAV MEDUNA

**WHAT INSTRUMENT WAS USED  
TO SHRED THE BRAINS OF PATIENTS?  
WATCH THIS DOCUMENTARY.**



**UGO CERLETTI, FATHER OF ELECTROSHOCK**

Kitti Bolognesi/Contributor/Corbis Historical Getty Images

## THE BIRTH OF ECT. THE DEATH OF ANIMALS.

**THE YEAR IS 1938. TWO ITALIAN** psychiatrists, Ugo Cerletti and Lucio Bini, watched workers in a slaughterhouse shocking pigs before killing them. The shocks stunned the animals, making it easier to slit their throats.

After “perfecting” his technique on different animals, Cerletti found his first human victim—a homeless man. After just one shock, the man was said to have shouted, “Not another one! It will kill me!” Surprisingly, Cerletti used only 80 volts of electricity ... well below the voltage doctors shock their patients with today.

Back then, electroshock was delivered without anesthesia, so patients suffered broken teeth, jaws and spines from the muscular spasms induced by the electricity.

Although electroshock was being touted as a “miracle cure,” the truth was starting to seep out. Medical journals of the day admitted that brain damage was an effect of electroshock, but, according to psychiatrists, that was how the procedure worked.

In fact, psychiatrist and leading ECT proponent Walter Freeman theorized that “maybe

it will be shown that a mentally ill patient can think more clearly and constructively with less brain in actual operation.”

Doesn't make much sense. But neither does ECT. ■

**WHAT DOES THE TRAUMA TO THE BRAIN CAUSED BY ECT FEEL LIKE? THE ANSWER IS IN OUR DOCUMENTARY.**



UGO CERLETTI EXPERIMENTING ON PIGS IN ITALIAN SLAUGHTERHOUSE



## ECT IS “MODERNIZED.” THE TORTURE ISN’T.

**PUBLIC PRESSURE BECAME SO INTENSE,** psychiatrists needed to give it a PR makeover.

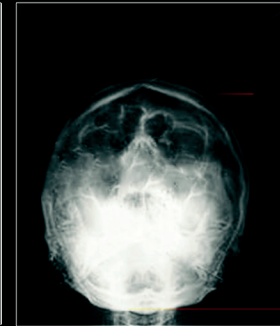
First came a new name ... “electroconvulsive therapy.” To minimize the outcry even further, they reduced the barbaric procedure to three letters—“E-C-T.” Then they coupled the therapy with anesthetics and paralyzing agents to obscure their patients’ writhing convulsions and screams.

The final stage was to market ECT as new and improved. It wasn’t either. Although it made the procedure look more acceptable, it was more dangerous than ever. The anesthesia and paralyzing drugs actually raise the seizure threshold, requiring much more electricity to induce a convulsion.

Now psychiatrists routinely assault the brain with far more electricity than was previously required to induce a seizure.



The result remains the same: a grand mal seizure and brain damage, which can be permanent. Today's vastly increased current flow can tear



holes in brain cells, killing the cells. The electricity can also kill the cells by generating heat. MRIs taken of ECT patients have shown scarring and brain shrinkage—unequivocal evidence of severe damage. ■

**HOW MANY STADIUM LIGHTS CAN BE POWERED BY THE ELECTRICITY USED IN AN ECT SESSION? WATCH THE DOCUMENTARY TO FIND OUT.**



# WHO KNOWS WHAT ECT ACTUALLY DOES?

## NOT PSYCHIATRISTS.

**MOST PSYCHIATRISTS ARE IGNORANT ABOUT** the laws of electricity. And, since each patient is different, the amount of electricity needed to induce a seizure is different, too. Many tries—and many additional shocks—may be needed, each one carrying with it brain and organ damage.

It's trial and error. And the patient is the guinea pig. ■



**IT'S NOT JUST THE  
EFFECTS OF ECT.**

**IT'S THE AFTER-EFFECTS.**

**LET'S START WITH ONE EFFECT THAT'S**

universal—memory loss. Memories from the past can be wiped out. But ECT can also impair the ability to learn and retain new information.

Shock psychiatrists don't want to know the extent of the damage they are causing. There have been very few studies on permanent amnesia (lasting six months or greater) caused by ECT. Yet, when researchers look for amnesia as a result of ECT, they find it.

In order to deflect responsibility for the harm they inflict, psychiatrists blame the patients' "underlying mental illness." But they have trouble explaining away the collateral damage to the rest of the body, like abnormal heart rhythms, heart attacks and stroke. And what about the published studies that show that ECT doesn't "work"?

*"I was pretty much tortured.  
I was being forced to have  
this [ECT] treatment."*

**"He doesn't know  
his parents, he doesn't  
know his siblings.  
Everything was wiped out  
of his mind."**

**"You forget how to do  
basic things.... I had to relearn  
how to read and write."**

In a letter to the FDA, shock doctors Richard Abrams and Conrad Swartz, who also own the ECT machine manufacturer Somatics, Inc., wrote that it is "not surprising that evaluations performed weeks or months after completion of the acute ECT treatment course usually fail to show a significant advantage for ECT."

Yet, the shocks continue, under the guise of "continuation," "maintenance" or "booster" ECT. A cleverly disguised moneymaking ploy for assaulting a patient's brain over and over. ■

**AN ECT TREATMENT USES HOW MANY TIMES  
THE ELECTRICAL CURRENT OF A STUN GUN?  
WATCH OUR DOCUMENTARY.**



# IF ECT DOESN'T KILL A PATIENT, SOMETIMES THEY KILL THEMSELVES.

**BESIDES THE PHYSICAL AFTER-EFFECTS OF** ECT—brain trauma, memory loss, organ damage—there are the psychological after-effects.

The sudden and permanent inability to remember how to do simple tasks, recall the names of best friends, children or spouses, not to mention recalling one's life before ECT, can be devastating.

Devastating enough for a person to take their own life. Yet, psychiatrists brazenly assert that ECT prevents suicide—a claim debunked by studies demonstrating that the reverse is true. Reliable statistics show that the suicide rate is 13 times higher among patients who receive ECT than those who don't. ■

**HOW MANY TIMES HIGHER IS THE  
SUICIDE RATE FOR ECT PATIENTS?  
WATCH THE DOCUMENTARY.**

A group of people, mostly women, are seen from behind, standing in a cemetery. They are dressed in black, suggesting a funeral or memorial service. In the background, a large, ornate tombstone is visible, set within a stone archway. The scene is dimly lit, with a dark, moody atmosphere.

# ONLY ONE THING'S WORSE THAN **DEATH.**

## EARLY DEATH.

**IN ONE STUDY, ELDERLY PATIENTS WHO** received ECT were compared with those who didn't. One year later, more than 25 percent of the ECT group had died compared to a survival rate of non-ECT elderly of 96 percent.

Unfortunately, hardly anyone knows what happens to ECT patients once they leave the hospital.

Despite this lack of documentation, the American Psychiatric Association (APA) routinely throws out the figure that ECT kills only one in 10,000 patients. However, that figure is only a guess made by Richard Abrams, a psychiatrist and owner of ECT machine maker, Somatics.



In Texas, one in 350 patients died within the first two weeks after receiving electric shock. Since Texas doesn't track patients beyond two weeks, the numbers could be much, much higher. ■

**WHAT IS THE CONNECTION  
BETWEEN ECT AND AN EXECUTION?  
WATCH OUR DOCUMENTARY.**



## DON'T WANT ECT? YOU MIGHT GET IT ANYWAY.

**PROTECTING ONESELF AND ONE'S LOVED** ones against ECT can be increasingly difficult. In most states, even if you refuse ECT, psychiatrists can force it on you.

Though there are laws to protect one's legal rights and ensure due process, psychiatrists can go to court and get a judgment ordering involuntary ECT.

No less than the United Nations Special Rapporteur on Torture has labeled involuntary ECT as "torture."

Of course, some of electric shock's earliest uses were just that. During the Nazi era, German psychiatrists administered lethal bouts of ECT to hundreds of mental patients they deemed unfit for life. ■



## COLLUSION, CONFUSION AND REJECTED RECOMMENDATIONS.

**SINCE 1976, OVERSIGHT OF ECT MACHINES IS** supposedly done by the US Food and Drug Administration.

Because ECT machines were already in use, the FDA allowed them to stay on the market.

In 1979, however, the FDA classified the ECT machine as a “Class III device,” meaning it is high-risk and must be safety tested. The agency gave manufacturers three years to prove them safe.

This has never been done.

In fact, nearly four decades later, the FDA rejected its own panel’s recommendations and broadened the use of the ECT machine, making it eligible for use on more people than ever. ■

**HOW DOES THE TRAUMA  
OF ECT COMPARE WITH BOXING?  
WATCH OUR DOCUMENTARY.**



## WHICH GETS A PSYCHIATRIST MORE MONEY?

## AN ATM MACHINE? OR AN ECT MACHINE?

**ECT MACHINE MANUFACTURERS MAKE BIG profits,** charging shock doctors up to nearly \$20,000 for their “system”—about 20 times the cost of its parts.

Psychiatrists benefit handsomely from prescribing ECT too, since they must be present, and therefore paid, for every electroshock session.

The average ECT session costs \$2,500. With a single round of treatment consisting of between 6 and 12 sessions, the money adds up quickly. Inpatient charges are even higher, netting as much as \$120,000 per patient.



**ECT USES ENOUGH ELECTRICITY  
TO POWER WHICH LARGE MACHINE?  
WATCH OUR DOCUMENTARY.**

And none of that is to mention additional rounds of ECT “maintenance” or “booster” shock treatments.

Using a total of \$260 worth of electricity, American ECT psychiatrists have created a

\$5.4 billion shock empire—that’s more money than the national budget of over half the countries on Earth. ■



**THERE ARE  
INTERESTS IN ECT.**

**AND CONFLICTS  
OF INTEREST.**

**HOW MUCH ELECTRICITY  
CAN AN ECT MACHINE HOLD?  
ANSWER IN OUR DOCUMENTARY.**

**THERE ARE MASSIVE CONFLICTS OF** interest between psychiatrists, ECT machine makers and government regulators.

The face of these conflicts is Harold Sackeim, a psychologist and leading ECT promoter, who has received tens of thousands of dollars from ECT manufacturers and at least \$9 million in government grants to “research” ECT.

Sackeim and his benefactor, NIMH psychiatrist Matthew Rudorfer, are so close they co-wrote an ECT textbook chapter together.

Also at NIMH is psychiatrist Sarah Lisanby, a research division head who has had financial ties to ten different psychiatric device makers.

# PSYCHIATRIC CORRUPTION



Psychiatrist Richard Weiner, the lead psychiatrist who took brain damage off the APA's ECT consent form, has also been a paid consultant to the two top American ECT machine makers, one of which is owned by shock psychiatrist Richard Abrams. Weiner's APA Task Force report on ECT cited over 60 of Abrams' articles.

Moreover, all of these key players in this tangled web are editorial board members of a leading psychiatric publication on electroshock, *The Journal of ECT*. ■

# NOW THAT YOU GOT EDUCATED GET INVOLVED.

**RIGHT NOW, THE MOST VULNERABLE AMONG** us, our children, are in the cross hairs. Sixteen US states actually allow ECT to be inflicted on kids. Even more disturbing is this—five states allow psychiatrists to subject children under the age of six to shock therapy.

Such barbarism prompted the World Health Organization to issue a strong injunction, stating that “there are no indications for the use of ECT on minors, and hence this should be prohibited through legislation.”

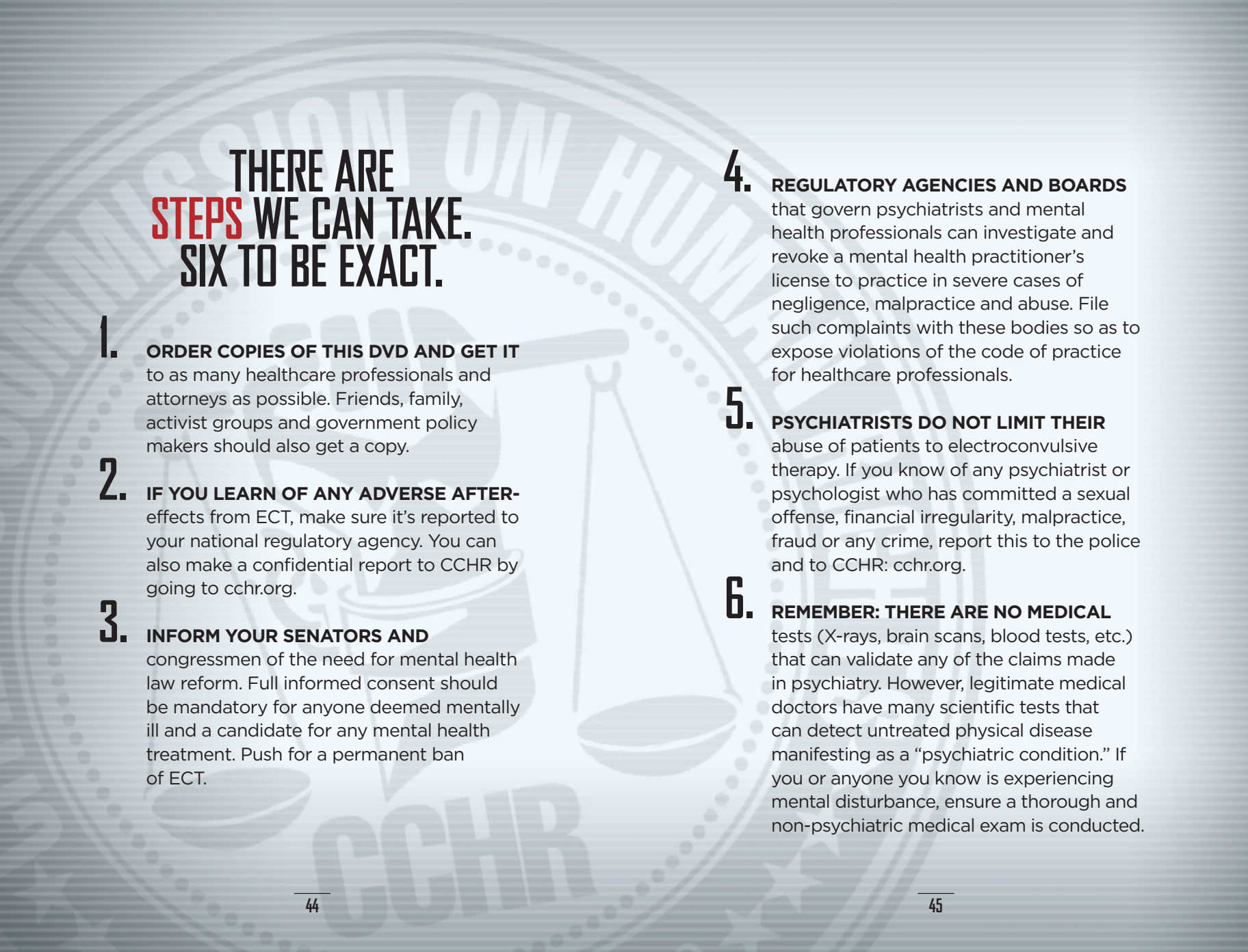
But that didn't stop the American Psychiatric Association. In a letter to the FDA, both the president and the CEO of the APA formally urged the agency's directors to make ECT widely available to children and adolescents of all ages.



It's time. Time to take a stand. Time to let your voice be heard. Let's call out ECT for what it really is: a brutal, brain-destroying criminal act.

If we're involved enough and vocal enough, we'll do to ECT what it's done to too many people.

We'll cut its life short.



## THERE ARE STEPS WE CAN TAKE. SIX TO BE EXACT.

- 1. ORDER COPIES OF THIS DVD AND GET IT** to as many healthcare professionals and attorneys as possible. Friends, family, activist groups and government policy makers should also get a copy.
- 2. IF YOU LEARN OF ANY ADVERSE AFTER-** effects from ECT, make sure it's reported to your national regulatory agency. You can also make a confidential report to CCHR by going to [cchr.org](http://cchr.org).
- 3. INFORM YOUR SENATORS AND** congressmen of the need for mental health law reform. Full informed consent should be mandatory for anyone deemed mentally ill and a candidate for any mental health treatment. Push for a permanent ban of ECT.
- 4. REGULATORY AGENCIES AND BOARDS** that govern psychiatrists and mental health professionals can investigate and revoke a mental health practitioner's license to practice in severe cases of negligence, malpractice and abuse. File such complaints with these bodies so as to expose violations of the code of practice for healthcare professionals.
- 5. PSYCHIATRISTS DO NOT LIMIT THEIR** abuse of patients to electroconvulsive therapy. If you know of any psychiatrist or psychologist who has committed a sexual offense, financial irregularity, malpractice, fraud or any crime, report this to the police and to CCHR: [cchr.org](http://cchr.org).
- 6. REMEMBER: THERE ARE NO MEDICAL** tests (X-rays, brain scans, blood tests, etc.) that can validate any of the claims made in psychiatry. However, legitimate medical doctors have many scientific tests that can detect untreated physical disease manifesting as a "psychiatric condition." If you or anyone you know is experiencing mental disturbance, ensure a thorough and non-psychiatric medical exam is conducted.

# YOU HAVE THE RIGHT NOT TO REMAIN SILENT.

**THEY'VE RAISED THEIR VOICES FOR HUMAN** rights. They've raised their voices against mental health abuse. The Citizens Commission on Human Rights (CCHR) has exposed, fought and won against psychiatry's human rights violations for five decades.

CCHR was co-founded in 1969 by the Church of Scientology and Dr. Thomas Szasz, Professor of Psychiatry Emeritus, State University of New York Health Science Center in Syracuse, to investigate and expose psychiatric violations of human rights.

Their voice is heard in over 150 chapters spread across more than 30 countries. Its board of

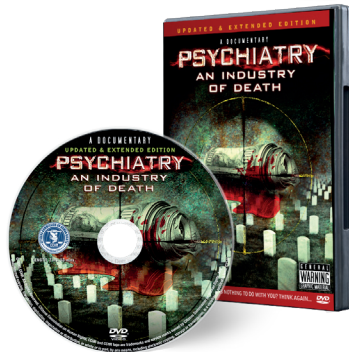
advisers is formidable, including doctors, lawyers, educators, artists, business professionals and civil and human rights representatives.

Raising one's voice yields results. CCHR has inspired and been part of hundreds of reforms by testifying in legislative hearings, conducting public hearings into psychiatric abuse and by working with media, law enforcement and public officials around the world.

CCHR hasn't remained silent. And neither should you.



**Think psychiatry has nothing to do with you? Think again...**



TELLY AWARD WINNER  
ACCOLADE AWARD WINNER  
INDIE FESTIVAL AWARD WINNER  
HERMES AWARD WINNER

This riveting presentation, two years in the making, lays bare the destruction wrought by psychiatrists upon every sector of our society.

Graphic footage from archival and current films depicting psychiatrists in action, eye-opening interviews with medical experts and moving accounts from victims and their families make this the most complete and devastating documentary of psychiatric abuse ever produced.

We think you have a right to know the cold hard facts about psychiatry, its practitioners and the threat they pose to our children.

# PSYCHIATRY

## AN INDUSTRY OF DEATH

**The facts are hard to believe, fatal to ignore...**



TELLY AWARD WINNER  
ACCOLADE AWARD WINNER  
COMMUNICATOR AWARD WINNER  
AEGIS AWARD WINNER

Psychotropic drugs. It's the story of big money—drugs that fuel a \$330 billion psychiatric industry, without a single cure.

The cost in human terms is even greater—these drugs now kill an estimated 42,000 people every year. And the death count keeps rising.

Containing more than 175 interviews with lawyers, mental health experts, the families of victims and the survivors themselves, this riveting documentary rips the mask off psychiatric drugging and exposes a brutal but well-entrenched moneymaking machine.

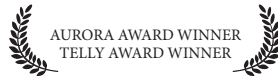
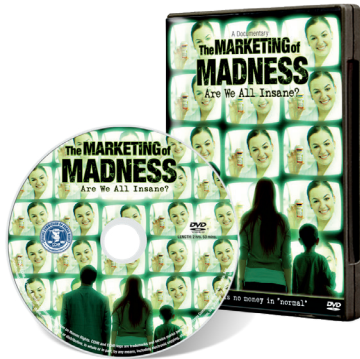
# MAKING A KILLING

## The Untold Story of Psychotropic Drugging

ORDER ONLINE: [cchr.org](http://cchr.org)

PHONE: 1 (323) 467-4242

## Psychotropic drugging... it's big business.



AURORA AWARD WINNER  
TELLY AWARD WINNER

This is the story of the high-income partnership between psychiatry and drug companies that has created an \$80 billion industry in psychotropic drugs.

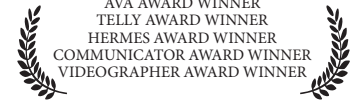
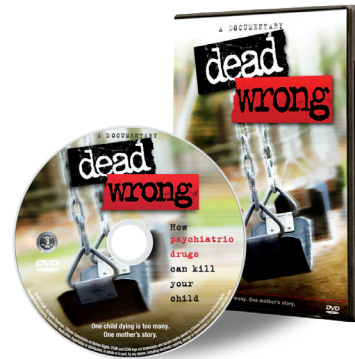
But appearances are deceiving.

How valid are psychiatrists' diagnoses—and how safe are their drugs?

Digging deep beneath the corporate veneer, this three-part documentary exposes the truth behind the slick marketing schemes and scientific deceit that conceal a dangerous and often deadly sales campaign.

**The MARKETING of  
MADNESS**  
ARE WE ALL INSANE?

## One child's story, telling the tale of 20 million more...



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TELLY AWARD WINNER  
HERMES AWARD WINNER  
COMMUNICATOR AWARD WINNER  
VIDEOGRAPHER AWARD WINNER

Here is a documentary that exposes how devastating—and deadly—psychiatric drugs can be for children and families.

Behind the grim statistics of deaths, suicides, birth defects and serious adverse reactions are the personal stories of loss and courage of those who paid the real price.

Psychiatrists claim their drugs are safe for children?

Once you hear what eight brave mothers, their families, health experts, drug counselors and doctors have to say instead, you will come away convinced of one thing.... Psychiatrists are DEAD WRONG.

**dead  
wrong**

How  
psychiatric  
drugs can  
kill your  
child



## Precision diagnosis... or scientific fraud?



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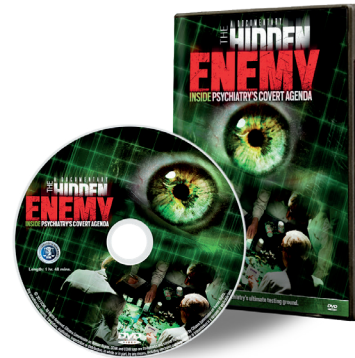
Today, the DSM serves as the “last word” on sanity, insanity and mental illness.

But is it science?

When pressed, psychiatrists will admit that it is not. But throughout the DSM's 60-year history, they have gone to great lengths to make the public believe it is.

So is the DSM a valid scientific document—or is it an elaborate pseudoscientific scam? Watch the DVD and decide for yourself.

## The most dangerous enemy is the one you never suspect...



AVA AWARD WINNER  
TELLY AWARD WINNER  
COMMUNICATOR AWARD WINNER  
ACCOLADE AWARD WINNER

Our military ... they protect us, defend us and help us in times of need. But every day, they're being attacked by a hidden enemy—one that's hiding in plain sight.

Today, with militaries of the world awash in psychiatry and psychiatric drugs, 23 soldiers and veterans are committing suicide every day.

Featuring over 80 interviews with soldiers and experts alike, this penetrating documentary shatters the façade to reveal the real culprits behind the ongoing destruction of our world's militaries from within.

**DIAGNOSTIC &  
STATISTICAL  
MANUAL**  
PSYCHIATRY'S DEADLIEST SCAM

**THE HIDDEN  
ENEMY**  
INSIDE PSYCHIATRY'S COVERT AGENDA

**FOR MORE INFORMATION  
OR TO ORDER CCHR  
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6616 Sunset Blvd.  
Los Angeles, California 90028

1 (323) 467-4242 or 1 (800) 869-2247  
cchr.org • contact@cchr.org



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