

Being shy is NOT an illness - so why are we treating it with drugs?

By PAT HAGAN - [More by this author »](#) Last updated at 09:45am on 18th December 2007

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When she was six, Christopher Lane's mother would often pretend to be a horse, galloping around, rather than talking to strangers.

When her parents sent her to boarding school to escape wartime London, the anxiety of the separation caused her behaviour to become odder.

She'd gallop around outside for hours, only going indoors to play the piano alone.

She was shy and a little eccentric. Her parents put it down to a vivid imagination and waited for her to change.

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Shyness has been 'rebranded' as a mental illness called social phobia

Which she did, eventually becoming a music therapist for children with learning difficulties.

The point of the story, says Lane, an English professor at Northwestern University in Chicago, is that nobody tried to diagnose her as mentally ill or dish out pills to make her better.

Instead, they accepted that her unusual behaviour marked her out as an individual.

But in a damning new book, the academic - who has an interest in the use of drugs in "borderline" mental illness - documents how a handful of psychiatrists, together with leading drug companies, have "rebranded" shyness as a mental illness called social phobia.

As a result, many people are now taking pills daily that they don't need.

An estimated six million people in the UK meet the official criteria for social phobia. The worry is that many will end up on medication.

British experts agree that drugs should not be the first port of call for anyone with a shyness problem, yet the market for drug treatments to cure social phobia has boomed.

Figures compiled for the Daily Mail by independent health data firm IMS Health show the amount spent on prescriptions for social phobia by the NHS more than doubled between 1997 and 2002, from £84 million to almost £189million.

In the past ten years, the NHS has spent £1.46billion on drugs for the condition.

In fact, shyness is one of several "social" problems being turned into diseases. There has been controversy over new drug treatments for restless legs syndrome and female sexual dysfunction, for instance.

According to some experts, these are not illnesses, but lifestyle problems that have been "medicalised" to make more money for the drug companies.

The story of how shyness came to be seen as a mental illness begins in the late Seventies, when a small group of mental health experts in the U.S. was asked by the American Psychiatric Association to rewrite the psychiatry

manual, the Diagnostic And Statistical Manual Of Mental Disorders, or DSM.

This is the psychiatrists' "bible", a publication defining every mental illness. It is updated every ten to 15 years.

Psychiatrists use it to assess a patient's symptoms and behaviour when trying to reach a diagnosis. Mental illness is unlike other medical conditions.

There are no blood tests, scans or X-rays to identify its severity, and symptoms can vary widely.

Originally the manual was a thin handbook, but it has since grown into a tome of 500 pages. The task force documented 300 types of mental illness, including 100 new ones.

Among them was "social phobia", a so-called illness where embarrassment or blushing blight a person's everyday activities. A social phobic was someone too shy to date, chat at a party or be seen eating in public.

Later additions to the symptoms included fear of saying the wrong thing in public and 'bashful bladder' - a condition where people are too shy to urinate in a public loo.

This rise in "mental illness", Lane claims, came despite misgivings within the psychiatric community about the way a small group of U.S. experts created dozens of medical conditions.

Professor Robert Edelmann, a London-based psychologist and author of *Coping With Blushing*, has tracked the "epidemic" of shyness over the past 20 years.

"When I became interested in this in the late Seventies, there was no such condition as social phobia," he says.

According to Lane, certain drug firms are cashing in by marketing their under-performing antidepressant drugs as a cure-all for shyness.

"In my mother's generation, shy people were seen as introverted and perhaps a bit awkward, but never mentally ill," says Lane.

"But shyness isn't just shyness any more. It's a disease. It has various names, including 'social anxiety' and 'avoidant personality disorder' - afflictions said to trouble almost one in five people, according to some estimates.

"Countless Americans and Britons swallow large doses of drugs daily for routine emotions."

Lane says the rewritten DSM turned ordinary introverts into "the mildly psychotic, whose symptoms included being aloof, dull" or wanting to "be alone".

"Drug companies promoted these disorders, spending millions trying to persuade us that normal behaviours might stem from a chemical imbalance in the brain."

A report last year by researchers at Newcastle University, Australia, accused drug firms of inventing diseases to sell pills.

It said they exaggerated the prevalence of restless legs syndrome, promoted irritable bowel syndrome as more serious than it was and "medicalised" the menopause when it was just part of life.

Patients' Association vice chairman Michael Summers said a minority of patients had benefited from drug treatment for shyness, but added: "Most people can cope much better on their own, without counselling or drugs."

Edelmann shares concerns that too many patients are given drugs, and thinks many might get better through "talking therapy" instead.

"There are lots of people whose symptoms are being treated (with drugs) but whose underlying problems are not."

Yet he insists the manual was right to highlight social phobia as a problem.

"I've seen patients who said if they went to their GP with a fear of blushing they'd be laughed at," says Edelmann.

"But if it's labelled as social phobia it becomes medical jargon."

The good news is doctors are more likely to take it seriously. The bad news is many will just reach for the prescription pad to cure it.

One drug, Seroxat, has emerged as a popular treatment for social phobia. Between 1997 and 2006, NHS spending on Seroxat for social phobia topped £630million.

The drug boosts levels of serotonin, a chemical in the brain linked with mood.

But Seroxat has been dogged by controversy over its safety and was banned from use for children in Britain in 2004 because of fears that withdrawal might trigger suicidal thoughts.

Lane alleges that SmithKline Beecham, which later merged with rival Glaxo, set about marketing Seroxat - called Paxil in the U.S. - to a new audience of shy but otherwise healthy people.

In 1998, the firm produced an internal document called Towards The Second Billion. This was a

reference to the first billion dollars Seroxat had earned.

The company described social phobia as "an anxiety disorder with enormous potential", and a campaign was launched to raise awareness of social phobia through advertising and the media, according to Lane.

"Together, the task force and drug companies turned a rare disorder into an epidemic afflicting millions," he says.

Cognitive behavioural therapy (CBT) is more effective than drugs, says Professor Edelmann.

Here, patients learn to recognise the causes of anxiety and put them in perspective. "It's a slow process, unlike a quick-fix daily pill, but has a good track record."

Dr Cosmo Hallstrom, of the Royal College of Psychiatrists, says later issues of the DSM have made it clear that social phobia is a lot more than just shyness.

He agrees CBT should be the first line treatment. But some people's lives are so damaged by their social embarrassment, he adds, that drug intervention is sometimes necessary.

Lane, however, is concerned at what else may be seen as a mental illness. The next edition of the DSM is already being worked on.

"Apathy" could be a new inclusion. At least one U.S. expert has argued that apathy is not just a state of mind but a common illness that can "occur alone and in conjunction with other disorders."

SHYNESS: How Normal Behaviour Became A Sickness, Yale University Press, £18.99, at www.yalebooks.co.uk.