

Review of: "“Correlation does not Imply Causation”, while Psychotropic Drugs do cause Neurochemical Imbalances and Dysfunction of Neurotransmission"

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Potential competing interests: No potential competing interests to declare.

This article, titled “Correlation Does Not Imply Causation,” challenges the widely accepted theory that neurochemical imbalances are the primary cause of mental health disorders, while asserting that psychotropic drugs do cause neurochemical imbalances and dysfunction of neurotransmission. Morris argues that there is insufficient scientific evidence to prove that these imbalances are causative factors in mental health illnesses. The paper emphasizes that while behavioral and neurochemical research in animals shows an association between mental health states and neurotransmitter signaling changes, this does not necessarily imply causation. The article further critiques the safety and efficacy of psychotropic drugs, suggesting that these medications themselves cause disturbances in neurotransmission and neurochemical homeostasis, leading to adverse effects during withdrawal in both humans and animals.

(SERIOUS) LIMITATIONS

1. The article primarily focuses on evidence that supports its thesis while potentially neglecting a substantial body of research that may offer counterarguments or demonstrate the efficacy and necessity of psychotropic medications in certain contexts.
2. This critique seems to apply a broad generalization of psychotropic drugs' effects without adequately distinguishing between different classes of medications, their diverse mechanisms of action, and their varied impact on individual patients.
3. The discussion on stress paradigms in rodents and their implications for human mental health disorders might oversimplify the complex nature of these illnesses.
4. The article could benefit from incorporating perspectives and experiences from patients and clinicians regarding the use of psychotropic drugs, including qualitative data that might offer insight into the complex decision-making processes involved in treating mental health disorders.
5. While withdrawal symptoms are a crucial consideration, the emphasis on these effects without acknowledging the context of why and how medications are tapered or discontinued may present an incomplete picture of the therapeutic process.
6. By focusing predominantly on the critique of psychotropic drugs, the article misses an opportunity to discuss

alternative or complementary treatments in mental health care, such as psychotherapy, lifestyle interventions, and emerging non-pharmacological therapies.

7. A lot of approximation and even misinformation on issues such as addiction, abstinence, without even delving into related issues such as the intrinsic characteristics of drugs, scaling principles, well documented in the psychiatric field.

In conclusion, while this article raises important questions about the reliance on psychotropic drugs in treating mental health disorders, it also exhibits several limitations and potential biases in its analysis and interpretation of the available scientific evidence. A more balanced, comprehensive, and nuanced approach that considers the broad spectrum of research on this topic would enhance the article's scientific rigor and contribution to the field of psychiatry.