

PE1651/XXXXXXXXXX

Beverley Thorpe Thomson submission of 14 March 2021

The petition PE01651 was lodged by Marion Brown, 10 May 2017. 'This petition has been set up on behalf of Recovery and Renewal to raise awareness of the plight of individuals in Scotland who are affected by dependence on and withdrawal from prescribed benzodiazepines and antidepressants – and specifically to ask the Scottish Government to support the BMA's UK-wide call for action to provide timely and appropriate support for individuals affected.'

On the 14 November 2019, Marion Brown and I had attended a meeting at the Scottish Parliament with Jeane Freeman, Cabinet Secretary for Health, to discuss how the petition would be taken forward. During the meeting Jeane Freeman said, 'I promise you I will do something about this'.

Jeane Freeman handed the issue to the Health and Social Care Alliance, Scotland. The Alliance states, important to their work is 'to ensure people are at the centre, that their voices, expertise and rights drive policy,' and they ensure their work is 'led by people's lived experience'. When addressing the issues raised by the petition PE1651, rather than the process being 'led by the people's lived experience' it is my opinion the Scottish Government and Alliance created their own agenda paying lip service to the actual patient experiences or the opinions of the individuals on the Short Life Working Group established.

As a member of the SLWG, I challenge Jeane Freeman's statement 'the SLWG were able to make excellent progress'. The progress took place over a lengthy period of four years, during a time when the Scottish government has continued to promote mental health as a medical issue and antidepressants have been first line treatment. 21.6% of the population in Scotland are taking antidepressants. We have increased repeat prescribing, increased long-term prescribing and a silent epidemic of dependence. There is little evidence 'professionals treat mental health appropriately and provide ongoing support'.

In December 2019, the Scottish Government produced a 'Petition Thematic Analysis' for the SLWG and identified the following "common themes" to be addressed:

1. Harms associated with prescribed medications
2. Impact of withdrawal symptoms
3. Lack of support from doctors
4. Lack of specialist services

They identified two suggestions on how patients can be better supported:

1. Better support for patients experiencing dependence and withdrawal
2. Wider access to non-pharmacological treatments

Attempts to further understand these themes and establish ways to better support individuals suffering prescribed drug harm, dependence and requiring

withdrawal support have been mostly ignored. The suggestion that NHS 24 111 be a solution is unrealistic and inadequate due to the unacknowledged complexities of the issues. The work to date has done nothing to better support people in Scotland with dedicated services as recommended by the BMA in 2016. Both Marion Brown and I were stakeholders at BMA meetings in London in 2017 and 2018 and have never been asked by the Scottish Government or Alliance about this work.

Not once during the SLWG meetings did I hear the questions, 'how do we prevent this harm in Scotland?', 'where do patients get help in Scotland?' or 'what do patients need in Scotland?'. The petition voices have been silenced by an overemphasis on data, a focus on Public Health England and on 'Realistic Medicine' which is supposedly about evidence based medicine; ironic really! Instead of focusing on the harms caused by antidepressants and benzodiazepines, there was a focus on chronic pain management, opioids and polypharmacy and the elderly.

The Scottish Government did NOT 'ensure that patients' voices were heard and considered throughout the programme of work'. They have NOT 'sought to identify the scale, distribution and underlying contributors to prescription drug dependence and what might be done to address this in Scotland'. I do NOT agree with the statement 'the recommendations were developed in partnership and agreement reached with both the Main SLWG and Patient Group.' I suggest the issue was NOT dealt with in an honest, open and transparent way and concerns relating to this were raised during the process both verbally and in writing.

The Scottish Government must acknowledge antidepressants can put people at risk of dangerous adverse effects; most notably they can cause dependence and raise the risk of suicide. As antidepressant prescribing continues to soar, so too does 'mental health' disability. We must address this issue now and there is still time for Scotland to look at the evidence, support those harmed, prevent further unnecessary suffering including prescribed drug-induced suicide and invest in the development of withdrawal services.

This is an issue too important to allow the fulfilment of self-serving agendas to override the safety of the people of Scotland, who really do deserve better.