

The use of unmodified ECT would only increase this fear and lead to rejection and disrepute of this really effective modality of treatment for psychiatric disorders at the hands of the media and anti-ECT lobbies.

References

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Unmodified ECT: what is the patient's perspective?

Raval has correctly indicated that, when prescribing a treatment, it is necessary to be aware of the views of the recipients of the treatment. There is much literature on patients' experiences with and attitudes towards modified ECT in developed countries (1,2) as well as in India (3). There is, unhappily, no literature at all on patients' experiences with and attitudes towards unmodified ECT in any part of the world; in fact, it is uncertain whether, today, unmodified ECT is indeed practised in any other country!

Data on the subject should help form a more sound judgement about unmodified ECT. Unfortunately, such data are best obtained only through a study in which patients are randomised to receive either modified or unmodified ECT. If the data were to be obtained in any other way, adherents of unmodified ECT would claim that, in the absence of a control group, the experiences and attitudes documented merely reflect experiences with and attitudes towards ECT in general.

Raval additionally suggests that the practice of unmodified ECT may fuel the fears of patients who see ECT portrayed as a gruesome and barbaric treatment by the visual mass media. With apologies to Shakespeare, the fault, dear Brutus, lies not in unmodified ECT, but in its distorted portrayal. For example, an open heart surgery is well known to result in short- and long-term cognitive deficits; if the mass media were to use this knowledge to vilify open heart surgery, would it be justifiable to abandon the procedure? Sadly, in expressing his opinion, Raval is actually right. The strongest case for the abandonment of unmodified ECT is that its continued use may provide grist to the mill of publicity-hungry, self-important civil rights activists and sensationalistic film producers, and thereby jeopardise the survival of ECT itself.

References

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'Bust oil' and other bogus claims

Irrational, useless and even dangerous drugs flood the market. A certain company's rubs and iodide products for local application do business worth crores of rupees every year in India. Both multinational and Indian companies are involved in such practices. Since we do not raise objections, the manufacturers keep pushing new products to cheat consumers.

Initially, these tricks were restricted to what was sold as medicines. Recently, cosmetic products have been launched with advertisements that make false claims. Though vitamin E is not absorbed through the skin, soaps, creams, oils and lotions advertise vitamin E as an ingredient. Hair is just a dead extension of the hair follicle and its quality cannot be affected by external applications; even then products in the market promise to improve hair growth and retard greying.

With the entry of international brands in the Indian market, useless health drinks, herbal tea, nutritional supplements and breakfast cereals lure customers with the false promise of improving health. Buyers are lured by the nutritional and calorie content charts presented in stylish print and catchy formats. These products contain iron, calcium, minerals, trace elements or vitamins, but only in sub-therapeutic quantities. Such nutrients are present in larger quantities in the normal Indian diet.

Recently, the FDA in Mumbai raided a 'herbal' tea distributor. An analysis found the 'herbal tea' to be ordinary tea sold in fancy packaging for a high price. Because there are takers, there are sellers.

Recently, certain newspapers and magazines carried colourful advertisements for 'bust oil'. Among the claims made about the oil is that 'it keeps the breast toned up, it is needed by almost all age groups, it gives firmer, younger and tighter breasts,' and so on. Efforts must be made to counter such false and unethical advertisements.

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