

According to leading psychiatrist Dr Joanna Moncrieff there are two different ways of thinking about how psychiatric drugs affect people: the *disease-centred model*, which presumes drugs are treating a disease and correcting something that is wrong with a patient, and the *drug-centred model* which presumes psychiatric drugs, like other drugs, affect all people in ways that some people like, others dislike, but it can not be validly argued that they are correcting some imbalance or identifiable physical problem. Some differences between the models are outlined below:

<b>Disease-centred model</b>	<b>Drug-centred model</b>
Drugs help correct an abnormal brain state	Drugs create an abnormal brain state
Therapeutic effects of drugs derive from their effects on presumed disease pathology	Therapeutic effects derive from the impact of the drug-induced state on behavioural and emotional problems
Drug effects may differ between patients and volunteers	Effects do not differ
Outcomes of drug research consist of effects of drugs on measures of the ‘disease’ and its manifestations or symptoms	Outcomes are the global state produced by drug ingestion and how this interacts with behaviours and experiences
Paradigm: Insulin for diabetes	Paradigm: Alcohol for social phobia/social anxiety

From Moncrieff, J. (2008) *The Myth of the Chemical Cure: A critique of psychiatric drug treatment*. Basingstoke: Palgrave Macmillan.