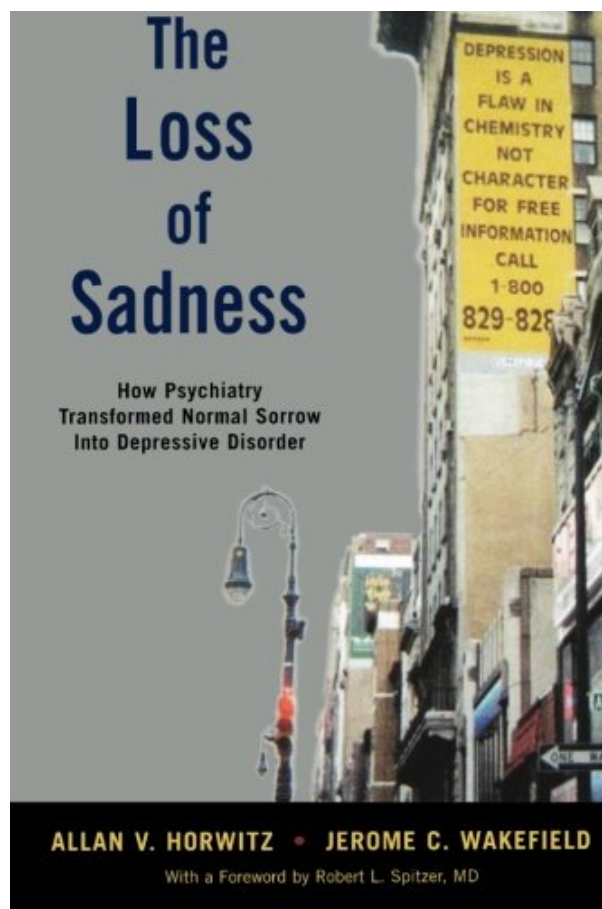
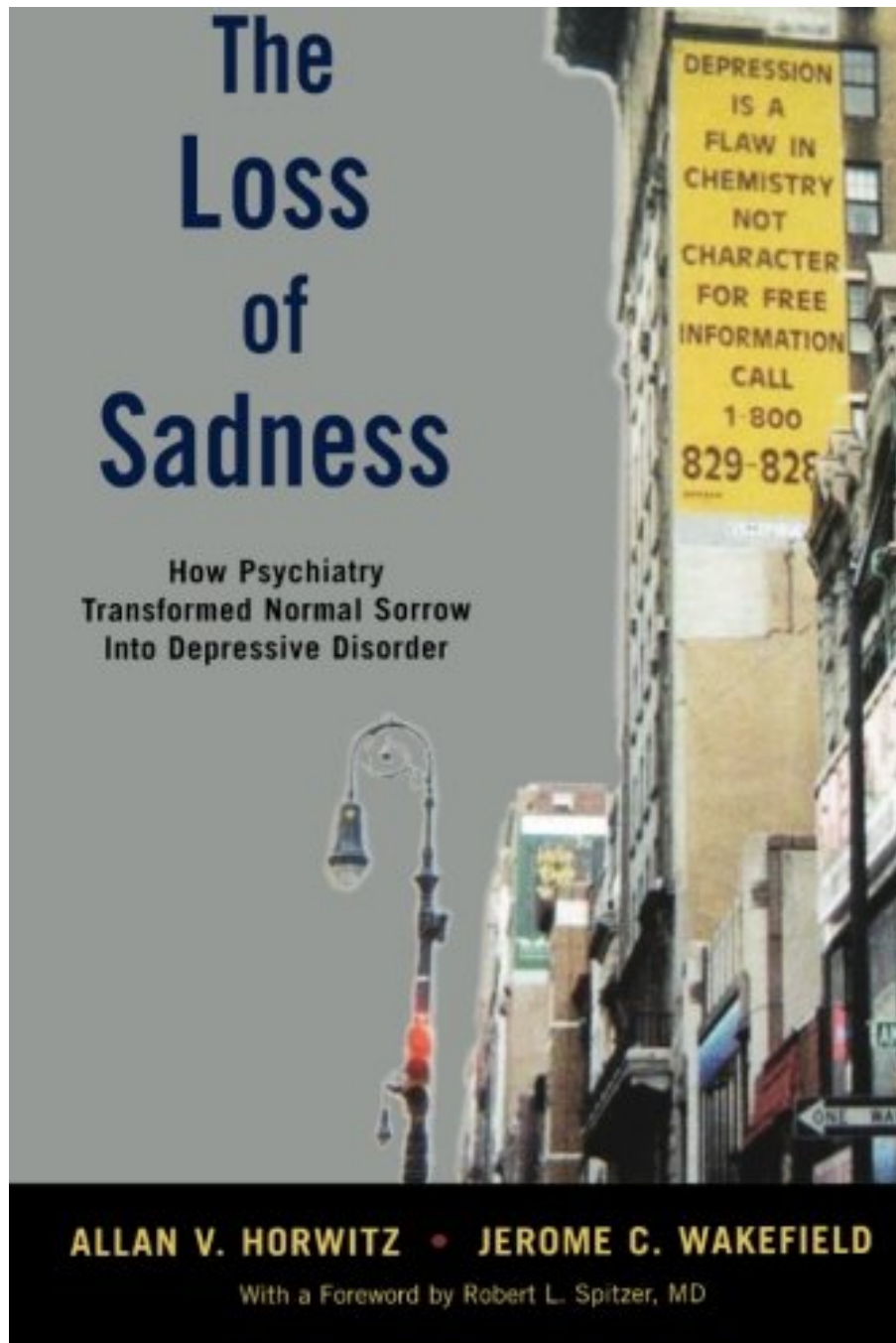


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Depression has become the single most commonly treated mental disorder, amid claims that one out of ten Americans suffer from this disorder every year and 25% succumb at some point in their lives. Warnings that depressive disorder is a leading cause of worldwide disability have been accompanied by a massive upsurge in the consumption of antidepressant medication, widespread screening for depression in clinics and schools, and a push to diagnose depression early, on the basis of just a few symptoms, in order to prevent more severe conditions from developing.

In *The Loss of Sadness*, Allan V. Horwitz and Jerome C. Wakefield argue that, while depressive disorder certainly exists and can be a devastating condition warranting medical attention, the apparent epidemic in fact reflects the way the psychiatric profession has understood and reclassified normal human sadness as largely an abnormal experience. With the 1980 publication of the landmark third edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-III)*, mental health professionals began diagnosing depression based on symptoms--such as depressed mood, loss of appetite, and fatigue--that lasted for at least two weeks. This system is fundamentally flawed, the authors maintain, because it fails to take into account the context in which the symptoms occur. They stress the importance of distinguishing between abnormal reactions due to internal dysfunction and normal sadness brought on by external circumstances. Under the current DSM classification system, however, this distinction is impossible to make, so the expected emotional distress caused by upsetting events--for example, the loss of a job or the end of a relationship--could lead to a mistaken diagnosis of depressive disorder. Indeed, it is this very mistake that lies at the root of the presumed epidemic of major depression in our midst.

In telling the story behind this phenomenon, the authors draw on the 2,500-year history of writing about depression, including studies in both the medical and social sciences, to demonstrate why the DSM's diagnosis is so flawed. They also explore why it has achieved almost unshakable currency despite its limitations. Framed within an evolutionary account of human health and disease, *The Loss of Sadness* presents a fascinating dissection of depression as both a normal and disordered human emotion and a sweeping critique of current psychiatric diagnostic practices. The result is a potent challenge to the diagnostic revolution that began almost thirty years ago in psychiatry and a provocative analysis of one of the most significant mental health issues today.

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Features

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Good book

By Seattle Lady

I had to read this book for a sociology course at UCF, but kept it after the class because I enjoyed the perspective of the authors and the way it was written. It explains a complex topic - the medication addiction in America - in an easy way. The diction isn't overwhelming and there is almost no jargon to confuse readers that aren't doctors. I have referenced in casual conversation, in papers and with my professors.

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Very relevant

By SLA

It refers to (DSM-5) the ways in which normal feelings are being viewed as pathological and placed under an 'umbrella' diagnosis. Grief, normal sadness etc. end up as Major Depressive Disorders rather than confirming that certain feelings and reactions to certain events are part of being human and normal to all of our lives. .

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A revolutionary book

By Markku Ojanen

I have read from many scientific journals that incidence of depression has increased 5-10 times during the past 100 years. This cannot be true, because a catastrophe is waiting us in less than 50 years - or is it present already? We have two alternatives: either there are many dangerous trends in the western societies or something has changed in explanations of misfortunes and life's problems. Plainly speaking, we are in the middle of ever increasing medicalization. Normal problems of life are now included in diagnostic classifications.

Loss of Sadness makes this all very clear. It is one of the best books I have read lately. The arguments for the main thesis are persuasive: Normal sorrows sufferings and pains of life must not be called depression.

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research, epidemiology, public policy, prevention, diagnosis, treatment, and even university mental health...Read it--it will make you think about your profession, your practice, and your society."--As reviewed by Steven P. Gilbert, PhD, ABPP, LP, Minnesota State University Mankato in Journal of College Student Psychotherapy

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About the Author

Allan V. Horwitz is Professor of Sociology and Dean of Social and Behavioral Sciences at Rutgers University. He is the author of many articles and a number of books on various aspects on mental illness, including *The Social Control of Mental Illness*, *The Logic of Social Control*, and *Creating Mental Illness*. Jerome C. Wakefield is University Professor and Professor of Social Work at New York University, and he has also taught at the University of Chicago, Columbia University, and Rutgers University. He is an authority on the intersection between philosophy and the mental health professions and the author of many articles on diagnosis of mental disorder.

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