



Ordinarily Well: The Case for Antidepressants

Peter D. Kramer

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Do antidepressants work, or are they glorified dummy pills? How can we tell? In Ordinarily W....

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From Reader Review Ordinarily Well: The Case for Antidepressants for online ebook

Kate Wyer says

I wanted to read this because anti-depressants have not worked for me. I have tried around ten or so of them, and had mostly bad side effects and no lifting of depression. I had also read a lot about the case against them (after trying them), about the unpublished studies that show how poor the outcomes actually are, the placebo effect and how exercise is just as, or more, effective.

By reading this book, I learned about how drug trials work, the history of the first anti-depressant, more about the placebo effect and different legal battles regarding the drug's use. I also learned some more about my own type of depression, the chronic dystonia. He also discussed the "double depression"-- when a chronically depressed person slips into a major depressive episode. That describes the last two years for me. I want to read his other book, Against Depression.

I also took away the idea that antidepressants seem to make the brain more resilient, and thus able to repair itself from the real damage of depression, rather than working by the commonly discussed "correcting" of a neurochemical imbalance.

In all, I felt the book was well-written and a good counterpoint to the wave of anti- anti-depressant lit out there. I still won't (in the foreseeable future) be using them, but this was an informative read.

Layne says

Ordinarily Well does an amazing job of illustrating the caution we should exercise when we see splashy headlines about psychopharmacueticals. There's a wealth of history about the development of the research methodology and the growth of an industry.

I really enjoyed the care Kramer took in explaining the differences in trials, statistical tools, and comparative analyses. He unpacks concepts like placebo effect, additivity, efficacy, diagnostic scales (Hamilton), effect size, and counterfactuals in an accessible and compelling way.

The structure of the book also allows for a sense of contemplation and reflection- what have the decisions made by the research community, pharma companies, medical professionals, and media done to shape our understanding of mental health? What could it have been like if other ideas had flourished?

Like many non-fiction books I read, I do feel like I ran out of juice toward the end. Still worth a read, although I suspect if you put it down 2/3 of the way through, you'll still take away the big picture.

Yvonne Lazear says

couldn't get through it

Silvia says

This isn't a book for the casual reader, or even for those who enjoyed Kramer's other books (like Listening to Prozac). Much of the book is a detailed analysis of the history of the study of antidepressants. As a science/medicine/mental health geek I found it fascinating.

The final few chapters were the payoff. Kramer concludes that antidepressant medicines are effective. For the details, read the book!

Susan says

Although somewhat clinical to read, it was extremely informative.

Laurie sharp says

Lots of information on studies and how they are mishandled. The book is one big case for antidepressants and puts all the myths to rest.

Ang says

This is well-worth reading if you've read any of those scary anti-depressant headlines recently (work the same as placebo! only good for severe depression!) and wondered, well shit, is that true? (Even if you know the answer because you know how they've helped you.)

It's not true, not really, and Kramer, who is no overprescribing pro-drug mouthpiece, lays out the facts and the non-facts. The non-facts come from his 30 years of clinical experience, where he describes how he's watched therapy and drugs work with his patients. Tbh, I find the non-facts more compelling than the facts; but it doesn't matter, because both illustrate that anti-depressants work, and that they're a net good for most patients.

Jamie says

This book should be called "The Case Study for Antidepressants," or something like that. 127 pages in, and as far as I can tell, this is a tale about the history of antidepressants. I wonder when the part comes in that the author makes the case...

Emma says

A psychiatrists take on anti-derpessants from both a personal view (what he has seen in practice) and a scholarly view (what does the research say.) Interesting history of how anti-depressants were developed and used also.

Erin says

just couldn't get into this one

kramer wrote this (i think?) in reaction to psychiatrists and others in the field saying that antidepressants don't work

and it's sort of a comparison between super scientific, double blinded placebo multi-armed studies that provide you with statistics and data and "facts"

and anecdotal medicine passed from clinician to clinician, which those stat junkies think is not so great

but it turns out psychiatric studies don't necessarily come up with perfect results because people are involved in them, people being notoriously not perfect

and you know, these are things i already know, and even though i enjoyed the insight into the rift between clinicians and researchers, it wasn't enough to hold my attention at this particular point in my life

this isn't a bad book, just not the book for me right now

Melissa says

Like Gawande and Sacks, psychiatrist Peter Kramer's narrative is simultaneously clinically intriguing, historically relevant, and surprisingly down-to-earth. In describing antidepressant research, he explains and bridges the divides between psychotherapy and psychopharmacology, independent- and industry- sponsored research, and EBM and clinical pragmatism.

Being personally involved in industry-sponsored clinical research, I have had my notions challenged and changed due to Kramer's book. Previously in animal research, I was plainly told that every result can be a publishable result with the right PR team, and it is fine to deep-six results that frankly are too confusing. How widespread that idea is and how ethically questionable that is has only been laid bare to me after reading *Ordinarily Well*. It has strongly motivated me to regard research and publications with much more scrutiny.

Czombie says

I read "Listening to Prozac" in the late 90's so was curious to see what Dr.Kramer had to add to the original

book. I was pleasantly surprised as he addressed many of the issues brought to the fore in the national media since then. In *Ordinarily Well*, Dr. Kramer examines drug research and his own direct practice with very real patients. Cites that the skepticism towards the efficacy of antidepressants is skewed not only in drug trials but preconceived notions of the public on the stigma of mental health concerns. Described patient encounters in the book are met with empathy by the doctor who never loses sight that his patients have a destructive illness, like diabetes, that affect the patient's behavior, feelings, careers families and quality of life. Kramer never loses sight of patients. He writes with empathy about his clinical encounters. These patients as well as the entire human race deserve to be ordinarily well and antidepressants give the patients that opportunity. Dr. Kramer also accents the need of clinicians to treat each patient with unique care in that with some a medication will work, but others need a different one. Always with supplementation of talk therapy which clarifies the goal, values and constraints of a glorious life. Making all work with the human mind i.e. medication management, talk therapy, exercise, eating/sleeping well a work of love and faith.

jay walker says

Too boring and repetitive to finish. Or I guess I agreed with him right off the bat and didn't need the remainder of the book for the author to prove his case.

David says

not certain how widespread the appeal would be. He tells some anecdotes re patients from his practice, but for the most part it's a (very) deep dive into clinical trials [and meta-analyses of them] of antidepressant medication. Major aim is to dispute two arguments that have gained currency in recent years, namely:

1. much of the impact of antidepressant meds is a placebo effect
2. antidepressants are only useful [or at any rate more useful than placebo] for severe depression, not the much more common mild/moderate range

Brings to bear research on depression secondary to other illnesses, selection biases caused by how clinical trials are run to get FDA approval, short-form vs. full Hamilton Rating scale for depression as an outcome variable, and much more.

one-sided discussion, and I don't follow the primary literature on this topic much anymore, so I'd be curious to see a rebuttal from someone on the other side, but for what it's worth just seeing this author's take it seemed generally convincing and logical.

Jonathan says

An important corrective to a lot of the overblown critiques, some of which amount simply to pill-shaming.
