

Student's death exposes flaws in psychiatric care



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On Oct. 10, 1990, University graduate student Jung Sook Jang was found dead in the bed that she was strapped into at the Lane County Psychiatric Hospital. Forcibly institutionalized and injected with drugs, denied access to her doctor and kept in seclusion and restraint, the native Korean was probably not given many choices regarding her treatment.

Not only does the death of Jung Sook Jang imply ineptitude and foul play on the part of the Lane County Psychiatric Hospital, but it also exposes an ugly pattern in our society regarding the mentally ill.

The crazy have no rights. The doctors decide not only whom to lock up, but what to do with them once they are locked up. Patients are given drugs to turn them into zombies, and if the loonies are still acting up, they are put into seclusion and restraint. If the people in power at the looney bin mess up a little, no matter. Who are people going to believe: a respected medical professional or a psycho?

The Lane County medical examiner listed the cause of Jang's death as bipolar disorder, according to an investigative report by the Oregon Advocacy Center, a non-profit organization providing advocacy services to the disabled. Something about that listing as cause of death bothered me. I didn't think anyone was capable of dying of bipolar disorder (a euphemism for manic-depressive disorder).

For those who are unfamiliar, bipolar disorder affects the brain. The cause is unknown but linked to heredity, and symptoms include radical mood swings from elation to despair.

Sources I contacted — which included an anonymous White Bird employee, a psychiatrist and Ask-A-Nurse — told me dying of a bipolar disorder is highly unlikely. It was possible, they said, to kill or starve oneself in an agitated manic state, but not die from the disorder itself.

Psychiatrist George Kjaer said, "There are in fact cases that people have had manic disorders that were so severe that they were fatal."

In Jang's case, it can be construed that Jang was so agitated from being strapped down and isolated for several hours that it sent her into cardiac arrest.

So the question is, was Jang's treatment the cause of her death? I think so. So does the Oregon Advocacy Center, whose report states that while there was no "criminal wrongdoing" on the part of the psychiatric hospital, the "inadequate and inhumane treatment ... contributed to Jung Sook Jang's death."

But in light of the way the system works, her treatment was par for the course. Inhumane treatment of mental patients is nothing new. There are some

key points of Jang's case that run a parallel with what's wrong with the way society views and treats the mentally ill.

There is the issue of whether she was "crazy" in the first place, or in need of "psychiatric treatment" at all. She was first treated in Nevada for "depression, sleeplessness and religious activity," stated the OAC report. In Eugene, she was seen praying and dancing in the lobby of the Hilton and wandering around the University campus, compelled by a "message" she had received to "work for God."

If you were asked to count how many people you knew who suffered from depression, the number probably wouldn't fit on one hand. You probably wouldn't call those people mentally ill, either. Consider, too, how many people you have wit-

nessed on this campus engaged in overzealous religious activity. They may seem bizarre, but do you see them and think that they should be institutionalized?

Cultural perspective plays an important role in this drama. The OAC report stated: "Jung Sook Jang was Korean. Early records note that she had fewer problems while with her family in Korea. No person knowledgeable in Korean culture was ever consulted. No one searched to discover if her behavior, particularly praying in the streets and other public places, was accepted activity in Korea. No one contacted doctors in Korea to determine treatment alternatives that might be common in Korea but uncommon in the United States."

The Western system of mental health does not encourage alter-

natives. She was treated like most loonies here — locked away and doped up.

The combination of Haldol and Eskalith (Lithium), given to Jang for manic depression, is warned against by the Physician's Desk Index. In an autopsy, an arteriosclerosis condition was revealed, and the OAC report implies that this condition combined with those two drugs contributed to her death.

Psychiatrist George Kjaer said that there is a danger in combining Lithium and Haldol, dangers that aren't detectable until it's too late. Kjaer said "there's the possibility of having an ailment which arises from having too much Dopamine present in the brain," which, when combined with the two drugs, can be fatal.

It's time for a better way. Along with health care reform,

this nation needs to rethink mental health reform as well. But Clinton's new plan does not aim to cover mental health.

We haven't come far from the days when society's crazy were shackled and thrown in dungeons. Yesterday's shackles are today's leather restraints.

"Crazy" is subjective. It's time to rethink what it means to live in an altered state of reality, along with rethinking how we mistreat people who exist in those altered states.

Maybe someday you'll want to visit those states yourself. Maybe they're a nice place to go. Maybe you think the only thing that's crazy is this column.

It's a fine line.
Lia Salciccia is a columnist for the Emerald.

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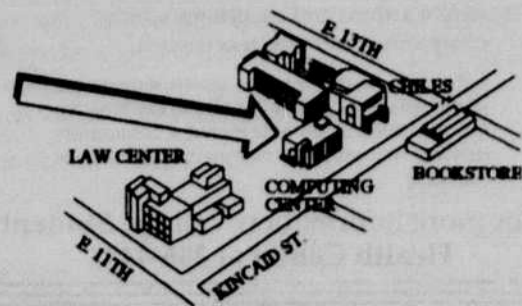


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