

BACK-GROUND TO OPEN LETTER

Article written by Audrey Adcock (26/07/06):

<http://listserv.nodak.edu/cgi-bin/wa.exe?A2=ind0607d&L=co-cure&T=0&X=7806E11CB1825379D5&Y=URSULA%40extra.co.nz&P=3972>

Gurli Bagnall's comments posted in Co-cure
27/07/06 "The Pros and Cons...."

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OPEN LETTER TO MS. AUDREY ADCOCK.

Dear Ms. Adcock,

My over-view of your piece published in Co-cure has now been posted. I did not however, say all I wanted to say, for that may have crossed Co-cure's publishing guidelines. Therefore, I write this open letter and ask: How can anyone who claims to have a sound knowledge of ME and the politics surrounding it, write such a glowing endorsement for the psychiatric lobby?

There are times when it is wise for a person not to identify themselves. In our world, there are many sufferers of ME and similar, who would be subjected to punitive treatment. For example, state benefits that allow them to exist, may be removed or they might find their front doors battered in and their sick children snatched from their beds.

The only way people in certain situations can stand up for their own and their children's legitimate rights, is by maintaining anything from a degree of anonymity to total anonymity.

That is clearly not your situation, so when you, a complete stranger, publish an article telling us that our collective years of nightmare existence have taught us nothing; that we are stupid and that we MUST change our ways of thinking and behaving, our hackles tend to rise.

All you have told us about yourself is your name and that you have a child who suffers ME. You do not tell us what criteria was used to make that diagnosis, so we are in no position to place any value on it, but judging by the advice you gave, it is not unreasonable to question it. Come to that, perhaps there is no daughter at all, and instead of being Audrey Adcock, you might be Archie Smith.

For all your readers know, you could be a newly emerged fledgling from the School of Cognitive Behavioural Therapy who, with the gleam of adoration in her eye, is waving the banner for her hero, Tony Pinching. Or you could have been commissioned (for a generous fee) by a member of the drug industry, medical profession, political agency etc to put the cat among the pigeons. You will be aware that such activities are referred to as conflicts of interest, but bear in mind the advice offered on this subject in the BMJ: The only free lunch, is the cheese in the mousetrap. I guess it pays to watch out for those whiskers.

Please do not think for one moment, that I am accusing you of acting on behalf of others. But it is the impression you give and given OUR circumstances, it is not unreasonable for us to ask what qualifies you to give advice that flies in the teeth of our experiences and then invite us to ³think about it²! What qualifies you to patronize and demean us? What qualifies you to dismiss our collective knowledge, gathered through decades of experience and study, by ignoring it?

If you want to appear independent, then you really should not use the strategies practiced by people like Pinching, Wessely, Sharpe et al, for we are far too familiar with them to be impressed.

Gurli Bagnall,
Patients¹ Rights Campaigner,
Marlborough,
New Zealand

28 July, 2006