Prozac-propelled Postmodern Poetry, Partly (II)

Ioan Florin DIACONU 1
Vlad ICHIM 2
Irina Ionită CROITORU 3
Carmen Gabriela LĂZĂREANU 4
Bogdan C.S. PÎRVU 5

1 PhD, Associate Professor of Piano, George Enescu National University of Arts Iaşi, ioan.diaconu@yahoo.com
2 PhD, Associate Professor of Medical Sociology, Grigore T. Popa University of Medicine and Pharmacy Iaşi, ichim_vlad_2004@yahoo.com
3 PhD, Modern Languages, Grigore T. Popa University of Medicine and Pharmacy Iaşi, irina.ionita82@yahoo.com
4 PhD, Social Work, Alexandru Ioan Cuza University Iaşi, gabrielalazareanu@yahoo.com
5 MD, PhD, Clinical Psychiatry, Mavromati Emergency Hospital Botoşani, bgdn_parvu@yahoo.com

Abstract: Conventionally singled out of the class of antidepressants, Prozac is further associated in what follows with poetic activity in terms of postmodern female identity. The two women under consideration, Liza Porter and Martha Silano, are lost and adrift in their stressed-out dysfunctional families, not in the least because of their mood disorders, major depression and respectively postpartum psychosis. Psychotherapy turning out to be inefficient for them in the long run, antidepressants or rather a combination of them come into play, and they restore a sense, even if more or less altered, of some poetic identity. In their interviews, they actually admit they are both cases of a definite progress from non-poetry to poetry. We will take either at her word, intent as we are on relating poet restoration to human recuperation.

Keywords: Prozac, Liza Porter, Martha Silano, postmodern identity, female identity.

Introduction

The upsurge of postmodernism in the latter half of the 19th century roughly coincides with the arrival of DSM-3 (APA, 1980), a landmark in the progress of psychopathology in the sense that there was now a coherent body of symptom-based corpus providing biological criteria for whatever mental disorder at hand. Diagnosis was no longer an arguably subjective matter, different from hospital to hospital, or even from therapist to therapist; it was no longer an exclusively Freudian approach, etiology-based. It turned to Kraepelin instead, and operated, for example within the mood disorders, a series of (sub)categoricals that allowed for target-based pharmacological drugs.

The arrival of DSM-3 eventually proved to be “fortuitous for the pharmaceutical industry,” the ascription of “exact categorical diseases” aiming drugs at the numerous conditions in there. Major Depression Disorder, perhaps “a function of everyday stress before”, now became a “prime market for pharmaceutical companies” (Lawlor, 2012). The stage was finally set for Prozac (fluoxetine) to rule over the antidepressants’ scene for the rest of the century (Kramer, 1994; Wurtzel, 1994; Blackbridge, 1997). Whether the tranquillisers deadened and dulled life for the consumer, the new wonder drug, with yet unknown side-effects though, was no late than 1994 the second best-selling drug in the world. That there was a total turnaround of life (Smith, 1985; Slater, 1998) or even that the antidepressants in case were hardly any good, but a mere “placebo effect” (Kirsch, 2011) was the next refrain with, further on, the harsh criticism to be found in Healy (1997; 2004), Bentall (2009) or Greenberg (2010). In between, there were objective longitudinal surveys (Metzl, 2003) and, among countless others, gender-based approaches (Zita, 1998) the kinds of which we are drawing upon for our own approach, keen on the patients’ behavioural and mental reactions.

Liza Porter

Lost and “adrift in a world of stressed-out families and war and overcrowded schools,” she struggled with depression “most of her life” and came to think that it was her “fault,” that she couldn’t find “some sort of happiness,” although she did try to prove herself: “perfect grades, competitive swimming, piano, flute, church choir, concert band.” No wonder she was angry at “the fucked-up world,” at how “numb” she felt “all the time,” at how nothing she did seemed “to change anything.” She could
“barely” open her mouth at all, “let alone ask for help.” No way to speak her truth, no way to speak at all. (Porter, 2008, pp.148-149)

She originally searched outside herself for something to cling to, “something to fight the depression inside”: “a place of twisted mouths yelling, ridiculing,” destroying her “every waking minute,” even in her dreams. And she had “nothing to fight back with,” she’d better “give up trying,” and perhaps resort to “drugs and alcohol to shut up those destructive voices,” the “taunts” getting into her soul and telling her she was “worthless.” (Porter, 2008, p.149)

It’s 1978 and she’s twenty-one, “five years out of high school, just divorced for the first time.” It’s raining, “always raining.” She’s sitting in her ’69 Camaro, “way too skinny, wearing a stretchy green-and-white striped halter-top, no bra, men’s Levi corduroy,” cut all the way up to the top of her thighs, “long blonde hair flying out of the window,” back into her blue eyes, into her mouth “and out again” - Kool in her left hand, fingers of her right “tapping the steering wheel to the beat of Springsteen’s ‘The Promised Land.’” (Porter, 2008, p.147)

In her topsy-turvy stifling flat, “a couple of moths later, or a day, or a week,” she sticks her finger down her throat twice after stuffing herself with “ice cream and granola,” in the next morning after rolling a joint. What else can she do but “get high?”, and after dropping the needle piling up Bruce Springsteen’s first four albums with her only friends, Wendy and Mary and Wild Billy and Crazy Jeaney and Spanish Johnny, actually her antidepressants working as “a mind-altering substance” kicking in her “adrenaline” and keeping her “alive” or at least able to drag herself “through the world until something different happens.” Rather than getting into her “cracking-up private world,” she gets into Springsteen’s “sad and angry songs about fast cars and darkness, dead-eyed girls hanging out on porches at dusk in desolate areas of town.” She projects “all of the anger into those songs,” now “secret voices” in her head, that “no one” will take away from her (Porter, 2008, p.147)

She’s now driving to Phoenix to see her old friend Vonnie. After “two wonderful years of remission” she has just come out of “another months-long depression,” peopled with the same “nasty voices” that grew “roots” into her, taking her “deeper into that dark silence” already familiar with her. This must be her “path to becoming a writer” that in her special case is “path through depression”:

Depression steals the voice.
Silence breeds depression.
Depression breeds silence. (Porter, 2008, pp.150-151)
This path, all the same, had been side-marked by “absence of voice,” like her fist poem “In Sync”: “the moon’s light/ is it her child/ or does she live in hope/ every month/ at the movement of my womb/ when she’s her fullest?// does she wish she had/ a source of her own/ instead of reflecting/ another’s power?” (Porter, 2008, p.150)

She saw a therapist, and he prescribed Elavil, that kicked her “in the butt” and got her “moving again,” unfortunately with such side effects as “hangover mornings, and strange visions” that she was “bound” to obliterate with her old friend, “booze.” This strange compound came forth, among others, with “fragments” like the following: “I cried for everyone tonight/ for myself…/ for the way my friend had to drive me around/ after I drank to the rain/ …my tears the downpour// the puddle in the laundromat parking lot, floating/ Marlboros smoked down beyond the filter// and I know/ I KNOW/ what it’s like to scrape bottom” (Porter, 2008, p.150-151)

She did want to write, but “anxious” as she was, she couldn’t sit still “long enough.” She couldn’t focus at all to create a poem or anything, she just had to drink “a bottle of wine every night to get to sleep.” She couldn’t cry, she couldn’t get angry, she was “dead inside.” She dropped out of the poetry class, and then “out of college altogether.” It was all her fault, right? She possessed “no voice to ask for the right kind of help.” She dove into “booze and drugs” and barely survived “the next few years.” (Porter, 2008, p.151)

It’s 1980 and she’s driving from Oregon to Arizona all through the night, playing Springsteen’s newest album (“The River”) “over and over,” singing “every lyric, memorising every word,” whining when Bruce whines, wailing when Bruce wales. Will she finally find “the ‘Desert,’ ‘Rebirth,’ ‘The Promised Land’?” (Porter, 2008, p.151)

In Arizona she married for the second time, gave birth to her first child, and traded “Bruce’s voice of struggle and faith” for “the overbearing voice of this mean, critical man” she married soon after arrival. Then “two years of sobriety followed,” she “just sat and listened,” ever so silenced by the “depression” and her husband whose words became “the Word,” whose voice became “the Voice.” Forbidden to listen to “the rock music coming from the Devil,” she stayed with him for no more than three months after the childbirth. Music-free and voice-free, she was merely a mother, “staying sober and nurturing,” feeding, comforting, and “keeping up with the dirty diapers.” She had “something to live for, someone to take care of,” an identity to lend her identity to. But her identity, as it was, was one-sided, and that is why she took her daughter and “a suitcase full of cloth diapers,” and
got on “a Greyhound bus headed south,” to her sister’s to raise her daughter in “a home free of harsh criticism and shame.” (Porter, 2008, p.152)

Being a spokesperson for her daughter, staying “clean and sober” while getting back into therapy, kept her “alive,” kept her depression “at bay.” Her voice, in “First born,” was “more than self-pity;” she was “still a victim, still depressed and angry,” but Bruce was “still” singing in her ear while “walking through dark streets” and searching for “hope, faith, the Promised Land”: “When she woke crying in the night/ I’d lift her out of the crib/ and hold on for dear life. Hers, mine, the whole world’s,/ the darkness of the stone cabin/ filled with the breath of all the other mothers/ I knew held their babies/ in the same way in the night’s silence—/ heads on the crook of our arms, tiny mouths/ sucking at our breasts, new eyes glowing hunger fire,/ all of us exhausted from the birthing/ days or months before, all of us feeding/ the bodies of the innocents, all of us madonnas.” (Porter, 2008, pp.152-153)

In 1985 she remarried, gave birth to a second daughter and settled down, writing the stories of her struggles and failures up to that point in her life. Booze-free and drug-free for fourteen years, she wrote about her addictions, her childhood, her first two marriages, the doctor who had molested her when she was sixteen, the time she was date-raped. She was using her voice, which is why “the depression stayed distant and silent for almost ten years”:

Voice comes from safety.
Silence becomes words.
The truth can be told. (Porter, 2008, p.153)

She obviously needed to be heard, she seemed to have found her voice, for example in “Mugshot”:

“I can’t believe it fucking fifteen years since I seen your face & all of a sudden it flashes in my mind just one eerie frame from an early DeNiro film but it’s your face fills that space … your contempt for the world arcing out like sparks off the chains of a Fifties’ street gang, heavy steel swinging & hitting the midnight … my eyes track the rage in those black eyes, my whole being waits it’s only a matter of time my body braced like a stone fortress my teeth clenched—just like yours. Ready. Waiting. I want it I deserve it I crave it I pushed you toward it many times. I hate myself for that.” (Porter, 2008, p.154)

It’s a “loud, harsh, bating, biting, writing voice.” While writing she was feeling “a fist pushing around” inside her, “down through [her] mouth,
[her] stomach, [her] intestines”; the trail of words “moving so violently” inside her, she felt “sick,” as if “a strangled voice were writhing around” inside her body, “a snake trying to escape.” She just couldn’t stop her voice, with “its gracelessness, its raw flinging of angry words.” It was hers, and she had to welcome it – no longer listening to the depression, and to the other voices inside her. (Porter, 2008, p.154)

In her first poetry workshop she read “Sister”: “Sometimes when I think of O’Keeffe/ I see rusty orange petals/ and myself at twelve/ going to you in the night/ when the blood came.” At a monthly reading series she read “The Rapist’s tale”: “She could never come, not until she was 31/ never give it up, no foot to the floor echoes/ of celestial hymns, no strobe lights/ at tunnel’s end, no, only hard-won patient/ waiting, someone else’s waves spending/ all her flesh and crashing onto bloody rocks.” She merely had to tell her stories, with all “that abusive depression voice” beating on her again, “like someone trying to stomp on the coals in a fire pit to make sure not one spark is still burning.” (Porter, 2008, pp.155-156)

The therapist found her “clinically depressed most of her life,” while “never properly treated for it.” He explained “brain chemistry, dopamine, serotonin reuptake inhibitors” and informed her he was to try “many different medications”; she only had to admit that it had never been her “fault,” that she shouldn’t blame herself about not trying “enough.” All of “the running” she’d done, all her “attempts to achieve things” in order to prove she was worthy, “all the self-blame,” none of it would work. She had “an actual physical disease” and there was treatment for it, if only she quit trying to convince herself that she had to fix it, or even that she could fix it herself. (Porter, 2008, p.157)

Hope was “back,” but it took “almost three years to find the right combination of drugs” to stabilise her. She went through Wellbutrin, Celexa, Effexor, Zoloft, Ritalin, Lamictal, Provigil, and Seroquel. She’s not able to remember the names of them all, but does recall the side effects, Zoloft giving her “the shits,” Effexor getting her “jerking and twitching in the night,” Lamictal constipating her, the lot of them “nearly” stealing her “sex drive.” But something just began to happen “in the brain,” she felt better. (Porter, 2008, p.157)

All things considered, she had a “treatment-resistant depression” but things were on the move. At long last “the depression and its voices” began to “recede into the background.” She was able to write poems about “things other than [her] sordid past,” she had “a more benevolent take on the past.” When taking Wellbutrin and Lamictal for a while, along with a little Ritalin, she began to write poems with “more hope in them, beauty in images, in
language.” She was “still angry, still trying to work things out inside [her]”;
her voice was now “tempered” the perspective was “different and lighter,”
although with “the same punch,” like in “Before Apollo”: “Praise to my big
brother, who while nursing his hidden wounds/ turned a refrigerator box
into a rocket ship./ Praise his kind heart and quick mind, his meticulous
design/ of the windows, the control knobs, the dashboard/ the gadgets he
had no words for, but were surely needed/ to survive with no gravity, no
air./ Praise him for spending days in our garage staring/ into the long hot
summer and making this contraption/ with his bare hands and naked soul.
For not giving up./ Praise him for not giving up.” (Porter, 2008, p.158)

There is “an increase in sensibility, attributable to medication,” she is
“less driven, more willing to wait,” all of it being “the opposite of instant
gratification, that horrible need to feel better, always to feel better, and feel it
now – the bane of addicts and depressives everywhere.” With
antidepressants working, her work becomes “more universal,” so that others
could listen to it. The hardships of her life turned into beauty, like in
“Trains”: “This early in the morning the clouds have cleared/ and I hear the
whistles of train after train/ rolling across the desert five miles south in the
dark.// I remember trains, the one that carried you north/ to the fo
rest in autumn as if no other mode of travel/ was good enough. But we had our
own, didn’t we,// the warm tongue of dope, cool teeth of booze/ the dirty
fingers of men whose names we could/ never remember no matter how
hard we tried.// What was it about us we hated so much?// Sleeping in
strangers’ beds was easier than even/ approaching that age-old question.
The ratty motor lodge// just south of Newport that summer, its depression-
ware/ dishes in dull primary colors, the muddy spring/ trickling down to the
beach like blood from a cut.// No one could ever sweep all the grit off
those/ chipped linoleum tiles. The two brothers who owned the place,/ what did the older one’s hands feel like on your skin?// I met a man just
after you left, when we slid away/ from the bar and headed out to his
house/ he was the nicest guy I’d ever known in my life.// But there were
Nam-ghosts inside those walls, shadows/ of his petrified wife and kids, he
had to take a shower/ just after we did it on the living room floor.// He laid
a blanket down first and quoted Genesis to me./ The tracks were just
behind his back fence and I could see myself/ running along those shrieking
metal rails// nothing but the clothes on my back and a photo/ of you in my
pocket, your scared eyes staring/ at nothing. I pulled myself up into one of
those empty cars// heading east or west, it didn’t make any difference./
After I caught my breath, I glanced back toward town.// Not a single soul
was watching.” (Porter, 2008, pp.158-159)
Gone are the times when she used to incessantly worry about weight, either “binging or starving,” hating herself. She’s a full-blown poet now, and remembers amusedly how she had found “a twenty-dollar bill alongside the road,” and bought “enough cookies and icecream to stuff herself “silly,” how “all that sugar” lifted her depression, made her feel “so high only to crash back a few hours later” (Porter, 2008, p.159). She cringes at the thought, but she hardly looks back in anger over that time she wasted worrying. Her “twelve-step poetry” had to go through depression, and that’s a fact.

Martha Silano

For three weeks on end, after giving birth she could barely sleep, “too worried to relax, insecure about every aspect of mothering.” What if her son caught pneumonia while given a bath? What if he wouldn’t stop crying? The questions kept piling up, her stomach ached with anxiety of all sorts, and a thick layer of dust was already on her poems long in progress. She was basically alone with the baby, and when crying started she started “singing, rocking, nursing, and more singing,” every kid being keen on the Beatles, “right?” But there was no end to crying, she was afraid of being on her own, with the newborn nearby. (Silano, 2008, pp.139-140)

When the police brushed past her, she was “on the threshold, not in and not out of the house,” her baby son “lying in a basinette, calm and quiet.” Her husband and her midwife, on the place in the meantime, joined her and the baby to hospital, in the squad car. What was wrong with her? Her diary is actually a complaint: “Read half a poem today, a little of the New York Times. Other than that, ate, slept, nursed, nursed, nursed./ Haven’t had a free moment to write till now, though time to nurse, sleep, eat, nurse, sleep, eat./ In a day I accomplish so little—never did find the time to tie my hair in a pony tail.” (Silano, 2008, p.140)

There was a sleep medication for her when leaving the hospital. She took it, but in a matter of days she began to slip “in and out of reality.” She wrapped herself in “a blanket like a funeral pall,” apologised for leaving her husband alone with the newborn and made for the door, already convinced she was a menace to her baby with her “poisonous milk,” and all; she wouldn’t nurse, she was useless. The next morning she was “catatonic, lying on [her] back and staring at the ceiling, unable to speak, unable to even blink.” Her mother, now with her from Seattle, called for health officials and took her to Harborview Medical Center, the diagnosis (postpartum psychosis) and her feelings thereafter being described in “Harborview”:
Some god’s gotten hold of me,/ some god’s squeezed hard the spit-up rag of my soul// some god’s got me thinking my milk’s poison, unfit/ for a hungry child, some god’s got me pacing// doesn’t want me well, doesn’t want my rapid-fire brain/ to slow, wants this ride for as long as it lasts, wants to take it// to its over-Niagara-in-a-barrel end, which is where/ this god is taking me, one rung at a time, one ambulance,// one EMT strapping me in, throwing me off this earth// Some god till I’m believing I’ve been shot, guts dribbling out,/ till I’m sure . . . I’m dead, a ghost, a smoldering corpse.” (Silano, 2008, pp.140-141)

She was at Harborview (“including one week in the ICU locked ward”) for over a month, receiving “heavy doses” of antipsychotics (Risperdal) and antidepressants (Ativan, Klonopin, and Celexa), her Catholic heritage visited her “in the form of waking visions,” she saw God, and angels battling devils for a place next to her. She was also visited by the Unabomber while she had extrapowers enough to destroy the world if only she pushed a button in her possession. One week of heavy sedation followed until “the hallucinations tapered off,” substituted for “a gloomy, zombielike state.” On her discharge she was free of delusions, but in thrall to reference ideas, that “the nurses, patients, and hospital staff” kept talking about her. Her paranoid schizophrenia stayed with her for some time, and for several months she used to move “around the house as if trying to swim through mud, unable to say more than a few words at a time.” Bouts of depression came upon her as well, and she was even visited by suicidal thoughts, fully shown by “At the Sayres park rowing and sailing centre, Lake Washington, Seattle”: “This is the body of water I once considered/ slipping into./ These are the gulls/ that preened, pecked, molted to brilliant white/all without my notice. This is the body of water// I planned, like the bread that ducks can’t always catch,/ to sink into.” (Silano, 2008, pp.140-141)

Psychosis then regressed to a “fuguelike state,” or rather several “layers of confusion” like a matryoshka doll unfolding down to the remembrance of what used to be “lively and musical poems.” And for this “inability to write” going full circle and exacerbating the depression by now dormant, she developed a kind of “mourning for [her] past life as a poet,” so much unlike her “life as a mother.” Could she write again? Was her condition temporary, or what? She was prescribed “megadoses of Neurontin,” which unfortunately turned out to be a placebo… (Silano, 2008, p.142)

Two or three therapists proved to be of no use too, a fourth one put her case in biological terms, that the senses of the new mothers are “more acute,” for adaptive reasons; that they are “hardwired to protect their
infants,” causing “the rapid and steady release of adrenaline” leading to “sleeplessness and a greater risk of anxiety attacks” – nothing out of the ordinary then, and no need to worry about as long as each and every mother is “bound to feel out of sorts.” And besides, “there were medicines to slow down this release,” and “keep the new mom from slipping into psychosis,” a series of a “waking nightmares,” believed to be “true” – not in the least “that terrible,” only an “extreme reaction to what all new mothers go through.” In other words, she needed “medicines to diminish her overalertness,” and get rid of two “residual phobias from the psychosis”: “fear of being alone in the house” and “fear of flying” – therapy for the former, Xanax for the latter. (Silano, 2008, pp.142-143)

To make a long story short, she was made to understand her condition and, of course, to change her (basically SSRIs) hospital cocktail of medications for lithium and Depakote, also addressing bipolar disorder. And she immediately felt “the urge to write,” her “Song for a newborn,” for one, letting loose the exuberance about her now five-month-old son: “Oh my Double Thick Pork Chop,/ my Prawn Tequila-kissed,/ Most Pico of Pico de Gallos:/ bless your brain . . . your capillaries/ like the roots of Early Girls,/ your large intestine like dozens/ of miniature knackwursts./ Bless your liver, its 500 functions./ Bless your sternum, your scapula—/ heck: bless all your 206 bones.” (Silano, 2008, p.144)

She was feeling “good enough to smile and laugh,” and “smile and laugh” was what she wanted to do. She was beginning to write “when and if” she could, not “according to a schedule,” not necessarily in her office, but in her car or “on a blanket at the park.” She was “in a groove,” writing poems about her son’s “first attempts at speech, then the questions he asked over and over, and then how it felt to send him off to pre-school,” of course, never forgetting to revel in his naptime, “While he naps” beginning: “Like tulips wrapped in cellophane, a nap is a beautiful thing./ Like the wind before it starts to rain, a nap is beautiful/ like a lawn near a lake where you lay yourself down.” (Silano, 2008, pp.144-145)

She remained “on lithium and Depakote for almost two years,” and gradually she went “off all medications except the occasional dose of Klonopine for sleep.” (Silano, 2008, p.145)

After the second childbirth some two years later, “gone were the deep-seated insecurities about mothering.” However, “soon after giving birth” she was visited by “racing thoughts, manic-like elations, paranoia, fears about where [her] children were and if they were okay.” But she was promptly “ready with the right medication,” for instance Zyprexa so as to prevent elation from turning to “full-blown mania.” And thus she was able
to write, including a poem (ironically titled “I can’t write”) about her [poetic] birth: “about her birth// or the number of times I pushed,/ but I can tell you [about] the voices of children,// of mothers telling them to settle down, how I wished my womb,// like theirs, had returned to the size of a fist. And I can tell you// I wished my daughter were older than half a day . . . both of us// smelling not only of yeast but of the acrid, earthiness of colostrum,// of colostrum and vernix and blood.” (Silano, 2008, p.145)

Motherhood, “no longer a foreign place,” now came with exuberance, with a movement away from “writing specifically about [her] child” to “writing about all girls”, in “What little girls are made of”: “In the month of pastels, fluorescent pink grass// With wheat berry eyebrows, resides// in the batter of Proust’s madeline./ Of cantaloupe rind, of gargantuan zucchini./ Of Athena—all brains from the get-go, over-/brimming, teeming, full of knowing// hare-bell from bluebell, every genus/ and every species, all brushed up// on conifer know-how, reminding us/ spruces have papery cones.// Of granite, with meteor shower/ skin, her nose, when it sniffs,// pre- and just-rainfall . . . She’s/ the Thinker, Ye Olde Tick Tock./ She’s the patch of geraniums/ in full throttle, all wrists and sucking fists.// She’s what glows and glows.” (Silano, 2008, pp.145-146)

The right medication and of course therapy helped her write poems with “a more universal, all-encompassing vision.” A medication-neuromodulated identity brought forth a new poetic identity, absorbing the mother identity, preoccupied with yeast (Petrescu-Dănilă et al., 2009), colostrum and vernix blood. (Jităreanu et al., 2018; Țarcă et al., 2021, pp.384)

Conclusions

With reference to the tableau we have drawn in the Introduction section of the paper, there is our own way, taking the patients to task so as to see how they reverberate to the drugs prescribed. The two female poets (Liza Porter and Martha Silano) we now have in view as a result of their ample interviews conducted for Johns Hopkins University Press, basically had Major Disorder (with alcohol- and drug-addiction), and respectively postpartum psychosis with hallucinations, delusions, reference ideas, and suicidal thoughts. They had what seemed to be inefficient therapy, and finally were prescribed antidepressants. No questioning comment in either case, they certainly noticed the voice change, but they were just happy to find some kind of poetic identity.
Case closed as far as they are concerned, they seem to exclaim with Ronald Wallace (‘On Prozac,’ 1999), “So much happiness! It seems everything I touch shines back, all smiles” – only that there is no “chemical joy,” with the vital question of identity hovering over, “But is this what I wanted, after all?” They put on “the Emperor’s new clothes” and, contrary to postmodern mores, do not make too much of their own identity.

Acknowledgements

All of the five authors contributed equally to this research, according to their expertise, in the various stages of the writing process: Ioan Florin Diaconu, PhD, Associate Professor of Piano, George Enescu National University Iaşi; Vlad Ichim, PhD, Associate Professor of Medical Sociology, Grigore T. Popa University of Medicine and Pharmacy Iaşi; Irina Ionită Croitoru, PhD, Modern Languages, Grigore T. Popa University of Medicine and Pharmacy Iaşi; Carmen Gabriela Lăzăreanu, PhD, Social Assistance, Alexandru Ioan Cuza University Iaşi; Bogdan C.S. Pirvu, MD, PhD, Clinical Psychiatry, Mavromati Emergency Hospital Botoşani.

References

APA. (1980). DSM-3 Diagnostic and Statistical Manual of Mental Disorders.


