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December 27, 2008

OP-ED GUEST COLUMNIST

Living the Off-Label Life

By JUDITH WARNER

What if you could just take a pill and all of a sudden remember to pay your bills on time? What if, thanks to modern neuroscience, you could, simultaneously, make New Year's Eve plans, pay the mortgage, call the pediatrician, consolidate credit card debt and do your job — well — without forgetting dentist appointments or neglecting to pick up your children at school?

Would you do it? Tune out the distractions of our online, on-call, too-fast A.D.D.-ogenic world with focus and memory-enhancing medications like Ritalin or Adderall? Stay sharp as a knife — no matter how overworked and sleep-deprived — with a mental-alertness-boosting drug like the anti-narcolepsy medication Provigil?

I've always said no. Fantasy aside, I've always rejected the idea of using drugs meant for people with real neurological disorders to treat the pathologies of everyday life.

Most of us, viscerally, do. Cognitive enhancement — a practice typified by the widely reported abuse of psychostimulants by college students cramming for exams, and by the less reported but apparently growing use of mind-boosters like Provigil among in-the-know scientists and professors — goes against the grain of some of our most basic beliefs about fairness and meritocracy. It seems to many people to be unnatural, inhuman, hubristic, pure cheating.

That's why when Henry Greely, director of Stanford Law School's Center for Law and the Biosciences, published an article, with a host of co-authors, in the science journal *Nature* earlier this month suggesting that we ought to rethink our gut reactions and "accept the benefits of enhancement," he was deluged with irate responses from readers.

"There were three kinds of e-mail reactions," he told me in a phone interview last week. "'How much crack are you smoking? How much money did your friends in pharma give you? How much crack did you get from your friends in pharma?'"

As Americans, our default setting on matters of psychotropic drugs — particularly when it comes to medicating those who are not very ill — tends to be, as the psychiatrist Gerald Klerman called it in 1972, something akin to "pharmacological Calvinism." People should suffer and endure, the thinking goes, accept what hard work and their God-given abilities bring them and hope for no more.

But Greely and his *Nature* co-authors suggest that such arguments are outdated and intellectually dishonest. We enhance our brain function all the time, they say — by drinking coffee, by eating nutritious food, by getting an education, even by getting a good night's sleep. Taking brain-enhancing drugs should be viewed as

just another step along that continuum, one that’s “morally equivalent” to such “other, more familiar, enhancements,” they write.

Normal life, unlike sports competitions, they argue, isn’t a zero-sum game, where one person’s doped advantage necessarily brings another’s disadvantage. A surgeon whose mind is extra-sharp, a pilot who’s extra alert, a medical researcher whose memory is fine-tuned to make extraordinary connections, is able to work not just to his or her own benefit, but for that of countless numbers of people. “Cognitive enhancement,” they write, “unlike enhancement for sports competitions, could lead to substantive improvements in the world.”

I’m not convinced of that. I’m not sure that pushing for your personal best — all the time — is tantamount to truly being the best person you can be. I have long thought that a life so frenetic and fractured that it drives “neuro-normal” people to distraction, leaving them sleep-deprived and exhausted, demands — indeed, screams for — systemic change.

But now I do wonder: What if the excessive demands of life today are creating ever-larger categories of people who can’t reach their potential due to handicaps that in an easier time were just quirks? (Absent-minded professor-types were, for generations, typically men who didn’t need to be present — organized and on-time — for their kids.) Is it any fairer to saddle a child with a chronically overwhelmed parent than with one suffering from untreated depression?

And, furthermore, how much can most of us, on a truly meaningful scale, change our lives? At a time of widespread layoffs and job anxiety among those still employed, can anyone but the most fortunate afford to cut their hours to give themselves time to breathe? Can working parents really sacrifice on either side of the wage-earning/life-making equation? It’s disturbing to think that we just have to make do with the world we now live in. But to do otherwise is for most people an impossible luxury.

For some of us, saddled with brains ill-adapted to this era, and taxed with way too many demands and distractions, pharmacological Calvinism may now be a luxury, too.

Judith Warner writes Domestic Disturbances, a column at nytimes.com. Gail Collins is off today.

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