

Soaring Numbers of Children on Powerful Adult Psychiatric Drugs

Special Section – Peter R. Breggin, M.D.

Pathways #43, page 46



Talking Points

- ❖ Dr. Breggin starts off his article by saying, “there has been a concerted effort by pharmaceutical companies to prescribe toxic antipsychotic drugs to children.” (46)
- ❖ It sure does seem that way, “in a comparison between the years 1993–1998 and 2005–2009, prescriptions of antipsychotic drugs per 100 children (ages 13 and under) rose from 0.24 to 1.83. That’s more than a sevenfold increase.” (46)
- ❖ These drugs can cause severe side-effects: violence, precocious puberty, tardive dyskinesia (a persistent and commonly permanent movement disorder from antipsychotic drug exposure that causes abnormal movements, including deforming facial grimaces and disabling involuntary movements of the torso and limbs) among many other things.
- ❖ One boy in this article, age 7, had to be psychiatrically hospitalized because he could not be withdrawn from this antipsychotic drug Risperdal as an outpatient.
- ❖ How are these young children on such heavy drugs with these intense side-effects? Psychiatrists are doing most of the prescribing of antipsychotic drugs to children. This is a direct result of off-label uses promoted by the drug companies, meaning they are unapproved. “The new *Archives of General Psychiatry* study confirms that most of the prescriptions of antipsychotic drugs to children have indeed been off-label for disruptive behavioral disorders.”
- ❖ Why are psychiatrists prescribing off-label drugs rather than helping parents and teachers improve their methods of disciplining children? They are “suppressing the overall mental life and behavior of these youngsters with antipsychotic drugs.” (47)
- ❖ Dr. Jerome Kagan, psychologist, said in an interview in 2012, “If you do interviews with children and adolescents aged 12 to 19, then 40 percent can be categorized as anxious or depressed. But if you take a closer look and ask how many of them are seriously impaired by this, the number shrinks to 8 percent. Describing every child who is depressed or anxious as being mentally ill is ridiculous. Adolescents are anxious, that’s normal.” (48)

- ❖ How many of the kids put on drugs for depression or anxiousness are actually seriously impaired by this? How could being put on these drugs affect them for the rest of their life?
- ❖ "The *Archives of General Psychiatry* report mentions that these drugs may cause increased blood sugar, diabetes, increased lipids (cholesterol), and obesity. It does not mention that these adverse reactions greatly elevate the risk of later heart disease, especially since these drugs also compromise cardiac function." (48) The study also neglects to mention all side effects.
- ❖ As with all studies, it is always important to read the financial disclosures at the end. This study happened to be backed by many pharmaceutical companies. How are we supposed to trust those invested financially to provide us with unbiased information?
- ❖ Why do the authors of this study call for more clinical trials to test the safety and efficacy of these drugs in children rather than calling a moratorium on off-label psychiatric drugging of children? I believe we all know the answer = \$\$\$\$\$\$

Resources

Full references for each article are available at <http://pathwaystofamilywellness.org/references.html>

"The Pill Merchants: The Relentless and Tragic Marketing of Psychiatric Drugs" by John Breeding, PhD & Amy Philo <http://pathwaystofamilywellness.org/Informed-Choice/the-pill-merchants-the-relentless-and-tragic-marketing-of-psychiatric-drugs.html>

"Still at Large: Are Psychiatric Drugs the Hidden Culprit in Mass Shootings?" by Kelly Hayford, C.N.C. <http://pathwaystofamilywellness.org/Family-Life/still-at-large-are-psychiatric-drugs-the-hidden-culprit-in-mass-shootings.html>