DR.WHITAKER'S

Health& Healing YOUR DEFINITIVE GUIDE TO WELLNESS MEDICINE

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School Shootings: Evil or Drug-Induced Behavior?

In the hit movie A Few Good Men, Tom Cruise and Jack Nicholson have a heated courtroom faceoff.

Cruise: "...Did you order the Code Red?"

Nicholson: "You want answers?"

Cruise: "I want the truth!"

Nicholson: "You can't handle the truth!"

Well, can you handle the truth about the clear connection and probable causation of psychiatric drugs with the murderous violence that is so common today?

On December 14, 2012, 20-year-old Adam Lanza fatally shot his mother in her home in Newtown, Connecticut. Armed with an assault rifle and two handguns, he then burst into the nearby Sandy Hook Elementary School and killed 20 children, six adults, and himself.

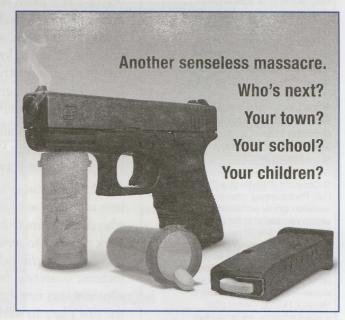
Tragic, heartbreaking, shocking, horrendous, unthinkable, inexplicable: All are apt descriptions of this act of murderous mayhem—except for inexplicable. Although the details on this specific incident are yet to be confirmed, I can say with near certainty that Adam Lanza was taking psychiatric medication.

First, it was reported that he underwent psychiatric evaluation and had been medicated as early as age 10. Second, this is by no means the first time these drugs have been associated with murder and suicide. Between 2004 and 2011, the FDA's Adverse Events Reporting System for drug side effects logged 12,755 reports of psychiatric medications relating to violence. Among them were 359 homicides, 7,250

incidences of aggression, and 2,795 episodes of mania. There were also 9,310 suicides. Actually, the damage is far greater. According to the FDA, fewer than 10 percent of adverse reactions are reported. To get a truer picture of the horrors of these medications, multiply these numbers by 10!

This isn't even the first school shooting linked with psychiatric drugs. The 14 school shootings and the 10 murders and murder-suicides listed on page 3—which left a total of 102 dead and 131 wounded—were all committed by individuals who have been positively identified as having been taking or withdrawing from antidepressants or other psychiatric drugs.

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School Shootings (cont. from page 1)

A Litany of Murder and Mayhem

- Pittsburgh, PA, March 8, 2012: John Shick, age 30, shot and killed one employee at the University of Pittsburgh Medical Center's Western Psychiatric Institute and injured six other people before he was killed by the police. Forty-three prescription medications, including nine antidepressants, were found in his apartment.
- Seal Beach, CA, October 12, 2011: Scott Dekraai, 41, killed eight people, including his ex-wife, and wounded one at the hair salon where she worked. He had been prescribed Trazodone, an antidepressant, and Topamax, a mood stabilizer.
- Huntsville, AL, February 5, 2010: Hammad Memon, 14, shot and killed a fellow student at their middle school. He had been treated for depression and ADHD and was taking the antidepressant Zoloft and other drugs.
- Lakeland, FL, May 3, 2009: Troy Bellar, 34, killed his wife and their 5-month- and 8-year-old sons, and then shot himself. He was taking Tegretol for bipolar disorder.
- Granberry Crossroads, AL, April 26, 2009: Fred B. Davis, 53, killed a policeman and wounded a deputy sheriff after threatening a neighbor with a gun. He had been prescribed Geodon, an antipsychotic drug.
- Middletown, MD, April 17, 2009: Christopher Wood, 34, cut and shot his wife and three children, ages 5, 4, and 2, and then committed suicide. He had been on the antidepressants Cymbalta and Paxil and the anti-anxiety medications BuSpar and Xanax.
- Concord, CA, January 11, 2009: Jason Montes, 33, killed his 25-year-old wife and shot himself to death in their home. He had started taking Prozac.
- Kauhajoki, Finland, September 23, 2008: Matti Saari, 22, shot and killed 9 other students, wounded another, and killed a teacher before killing himself. He was taking an antidepressant and a benzodiazepine.
- Little Rock, AR, August 13, 2008: Timothy Johnson, 50, shot and killed Arkansas Democratic Party Chairman Bill Gwatney at the party's headquarters; he was then pursued and killed by police. A police report confirmed that he was taking an antidepressant and "...the drug may have played a part in his 'irrational and violent behavior."
- Dekalb, IL, February 14, 2008: Steven Kazmierczak, 27, shot and killed five people and

- wounded 21, then killed himself in an auditorium at Northern Illinois University, where he had been a student. He had recently been taking Prozac, Xanax, and Ambien, a sleeping aid.
- Omaha, NE, December 5, 2007: Robert Hawkins, 19, killed eight people and wounded five before committing suicide in an Omaha mall. Autopsy results confirmed he was under the influence of the anti-anxiety drug Valium.
- Jokela, Finland, November 7, 2007: Pekka-Eric Auvinen, 18, killed five boys, one girl, the principal, and the school nurse and wounded a dozen others at his high school before killing himself. He had been taking antidepressants.
- Cleveland, OH, October 10, 2007: Asa Coon, 14, shot two students and two teachers at his high school and then committed suicide. He had been prescribed Trazodone.
- Red Lake, MN, March 21, 2005: Jeff Weise, 16, killed his grandfather and his grandfather's girlfriend, and drove to the high school on the Red Lake Indian Reservation where he opened fire, killing seven people and wounding five. He then shot himself to death. He was on Prozac.
- East Greenbush, NY, February 9, 2004: Jon Romano, 16, took a shotgun to school and wounded a teacher. He had been on medication for depression.
- North Meridian, FL, July 8, 2003: Doug Williams, 48, shot 14 of his co-workers at Lockheed Martin with a shotgun, killing six of them, before turning the gun on himself. He was reported to have been on two antidepressants, Zoloft and Celexa.
- Wahluke, WA, April 10, 2001: Cory Baadsgaard, 16, held 23 classmates and a teacher hostage using a rifle he had taken to school. He had been taking the antidepressant Effexor.
- El Cajon, CA, March 22, 2001: Jason Hoffman, 18, opened fire at his high school, injuring three students and two teachers. He committed suicide while in jail later that year. He was on two anti-depressants, Celexa and Effexor.
- Williamsport, PA, March 7, 2001: Elizabeth Bush, 14, took a revolver to school and shot another student in the shoulder. *She was taking Prozac*.
- Wakefield, MA, December 26, 2000: Michael McDermott, 42, shot and killed seven fellow employees at Edgewater Technology. He was taking three antidepressants.

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School Shootings (cont. from page 3)

- Conyers, GA, May 20, 1999: T.J. Solomon, 15, wounded six of his high school classmates with a gun he had taken to school. He was taking Ritalin, a stimulant often prescribed for ADHD.
- Columbine, CO, April 20, 1999: Eric Harris,
 18, and, Dylan Klebold, 17, shot and killed
 - 12 students and a teacher and wounded 26 others at their high school before killing themselves. Harris was taking an antidepressant, Luvox; Klebold's medical records are sealed.
- Notus, ID, April 16, 1999: Shawn Cooper, 15, took a shotgun to school and shot two rounds; no one was injured. He was taking Ritalin and an SSRI antidepressant.
- Springfield, OR, May 21, 1998: Kip Kinkel, 15, shot his parents to death with a rifle. The next day, armed with five weapons and over 1,000 rounds of ammunition, he went to school and opened fire in the cafeteria, killing two and wounding 25. He had been taking Prozac.

Many More Sad Stories

This list, which was compiled by the Citizens Commission on Human Rights, is far from comprehensive. These medica-

tions are strongly suspected in many other school shootings, murders, and murder-suicides, but we'll never know for sure.

Under the guise of protection of privacy, the medical records of the individuals who commit these unspeakable acts of violence are often sealed—as if anyone who kills innocent people, many of them children, needs or deserves such privacy. James Holmes, who opened fire in a movie theater in Aurora, Colorado, last year, killing 12 and wounding 58, had been seeing a psychiatrist. It's probable that he had been prescribed medications, but despite repeated requests, no specifics have been released. And that's just one recent example.

Nor does this list include the thousands of unexpected, uncharacteristic suicides or episodes of bizarre behavior by people who were under the influence of psychiatric drugs. You may have heard about Mary Kennedy, estranged wife of Robert Kennedy, Jr., and mother of four, who had traces of three anti-depressants in her system at the time of her suicide last year. Or Tony Scott, director of *Top Gun* and

other movies, who was on an antidepressant and sleeping pills when he leapt to his death in August. Or perhaps you're aware of psychiatric drug-related suicides or other incidents in your own community or circle of acquaintances.

The real tragedy is that many of these sad stories could have been prevented, if only the truth about psychiatric drugs had been told—and the truth is hiding in plain sight.

My Recommendations

- Say no to psychiatric drugs.

 There are far safer methods of dealing with life's challenges than taking mind-altering medications, which we'll discuss in next month's issue. If you are already taking an antidepressant or other psychiatric medication, talk to your physician about discontinuing it. Withdrawal from these powerful drugs must be done gradually and under medical supervision.
- To learn more about the adverse effects of psychiatric drugs, visit the Citizens Commission on Human Rights website, cchrint. org. For decades, this nonprofit organization has been at the forefront of the battle to educate the public on the dangers of these medications.
- Visit SSRIstories.com to grasp the full extent of the damage psychiatric drugs can wreak upon families, schools, and communities.

Dangers in Plain Sight

If you want confirmation of psychiatric drugs' propensity for promoting violence and suicide, you don't have to look very far—it's printed on the product labels and patient information sheets! Law requires that all antidepressants carry "black box" label warnings (the most serious type of warnings) stating they increase the risk of suicidal thinking and behavior in chil-

dren, adolescents, and young adults. Imagine people who are depressed being prescribed drugs that clearly state right on the bottle that they could make them worse and more likely to commit suicide. It's insane!

But there's more. Product inserts also list additional adverse effects, including worsening depression, anxiety, agitation, panic attacks, insomnia, irritability, hostility, aggressiveness, impulsivity, mania, and akathisia.

Akathisia, characterized by unpleasant feelings of restlessness and an inability to sit still, is particularly common in patients taking selective serotonin reuptake inhibitors (SSRIs, the most popular class of antidepressants, which include