

[NewsTarget.com](http://www.newstarget.com)

Originally published April 18 2007

Are antidepressant drugs an accomplice in the Virginia Tech shootings? (opinion)

by [Mike Adams](#)

The Chicago Tribune reports that Cho Seung Hui, the Virginia Tech shooter who killed 32 fellow students in a shooting rampage, was taking antidepressant drugs. This is not the first time a school shooting rampage has been linked to antidepressants. The infamous Columbine High shootings took place almost exactly eight years ago, and the shooters in that rampage were also -- you guessed it -- taking antidepressant drugs.

What is it about antidepressant drugs that provokes young men to pick up pistols, rifles and shotguns, then violently assault their classmates? Clearly, there's something wrong with the mind of anyone who engages in such violent acts. Could the drugs be "imbaling" their minds, priming them for violence?

The answer is a very sobering, "Yes, they could be." As we reported in a [previous NewsTarget article on Paxil](#):

Researchers from Cardiff University in Britain and the Cochrane Centre examined data on Paxil -- or its generic form, paroxetine -- from GlaxoSmithKline, legal cases and emails from nearly 1,400 patients who responded to a British TV program on antidepressants. The researchers found that 60 out of 9,219 people taking Paxil -- 0.65 percent -- experienced a "hostility event," compared to 20 out of 6,455 patients taking placebo, or 0.31 percent.

In that same article, published in September, 2006, I stated, "This finding helps explain why school shootings are almost always conducted by children who are taking antidepressants. We also know that SSRIs cause children to disconnect from reality. When you combine that with a propensity for violence, you create a dangerous recipe for school shootings and other adolescent violence."

Sadly, that explanation rings true once again with the Virginia Tech shooting.

Wherever we see school violence, antidepressant drugs seem to found at the scene of the crime. The correlation is not coincidence. There is a causal link between the two.

The links between antidepressants and violence are well documented

A study published in the Public Library of Science Medicine (an open source medical journal) explored these same links in detail. (See [Antidepressants and Violence: Problems at the Interface of Medicine and Law](#), by David Healy, Andrew Herxheimer, David B. Menkes)

The authors note that "Some regulators, such as the Canadian regulators, have also referred to risks of treatment-induced activation leading to both self-harm and harm

to others" and the "United States labels for all antidepressants as of August 2004 note that 'anxiety, agitation, panic attacks, insomnia, irritability, hostility, aggressiveness, impulsivity, akathisia (psychomotor restlessness), hypomania, and mania have been reported in adult and pediatric patients being treated with antidepressants for major depressive disorder as well as for other indications, both psychiatric and nonpsychiatric'".

In other words, **the link between antidepressants and violence has been known for years** by the very people manufacturing, marketing or prescribing the drugs. As the author of the study mentioned above concluded, "The new issues highlighted by these cases need urgent examination jointly by jurists and psychiatrists in all countries where antidepressants are widely used."

That was last year, well before this latest shooting. The warning signs were there, and they've been visible for a long time. Medical authorities can hardly say they are "shocked" by this violent behavior. After all, the same pattern of violence among antidepressant takers has been observed, documented and published in numerous previous cases.

How to stop the violence

Following this recent episode of violence, some Americans are renewing calls for gun control. But I ask, **isn't it time we looked at antidepressants control?** Why do we continue to drug up young people in this country with psychotropic drugs that we know are closely associated with violent outbursts?

Giving young men antidepressant drugs is, in my opinion, just like building silent timebombs and waiting around for one to suddenly go off. Chemically assaulting these young, troubled brains with powerful drugs -- while denying them real mental health solutions based on nutrition -- is the bread and butter of modern psychiatry, an industry that in my opinion has sold its soul to drug companies and now serves primarily as a glorified system of legalized drug dealers that preys upon children and teenagers.

That doesn't mean the doctor or psychiatrist who prescribed the antidepressants is directly responsible for the violence committed by Cho Seung Hui, but they may have very well played a key role in destabilizing the mind of a young man who was on the verge of insanity. You don't give another shot of whisky to a drunk driver, and you shouldn't prescribe antidepressants to troubled young men. Especially when there are weapons lying around.

How many more Americans will be killed by pharmaceuticals?

FDA-approved prescription drugs kill 100,000 Americans each year. Sadly, these 32 dead students at Virginia Tech now join the list of those killed by pharmaceutical side effects. And yet nobody in the mainstream media seems to be reporting about the drugs.

Don't you find it curious that when 100,000+ Americans are killed in their homes and beds each year, dying from heart attacks and strokes caused by pharmaceuticals, there's virtually no news coverage, but when mind-altering drugs cause a student to pick up guns and blow away 32 classmates, it's suddenly front-page news everywhere? The reason is because there's violence involved, and **violence gets ratings for news organizations**.

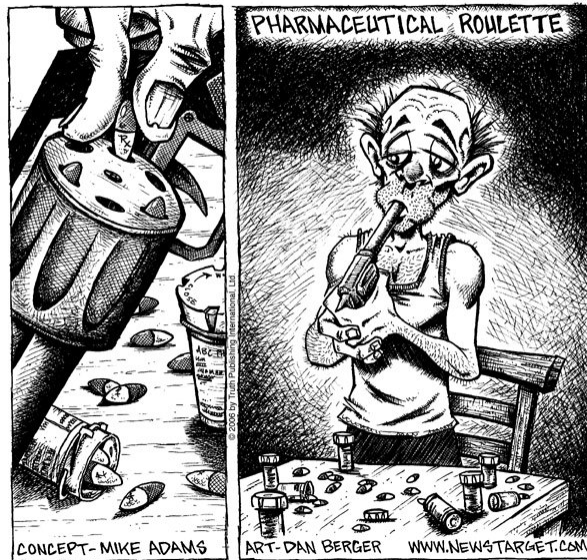
Another interesting point in all this is that a Korean diplomat contacted the Bush Administration to offer his condolences. Does this seem a bit strange to anyone else? The student was an American citizen, and he had lived in America for many years. In fact, he got put on antidepressant drugs in America, following the same fraudulent system of medicine that is uniquely American in the degree of harm it causes people. If anybody should be picking up the phone and apologizing, it's the U.S. diplomats who should be apologizing to the world for exporting death, disease and western medicine. Drug companies should be apologizing to the families of those who died, as well as to the family of the shooter. And the doctor or psychiatrist who prescribed these drugs to Cho Seung should be apologizing to everybody. Where is the apology from the drug companies who manufacture these chemicals that kill?

The question I'm asking is: Who's really at fault here? Sure, it's primarily the person who pulled the trigger. But it's also the companies and FDA regulators who allowed dangerous, violence-inducing chemicals to be prescribed to the person who pulled the trigger. "Chemically-induced violence," I call it. And antidepressant drugs make it so much easier for the shooter because they make people feel dissociated from reality. One of the Columbine shooters said it was all, "like a video game."

Or, as described in shocking detail in the PLoS Medicine study mentioned above, a 12 year old boy was being drugged with antidepressants when the following took place. As reported: (emphasis added)

The independent forensic report on the case notes CP as saying that that night: "something told me to shoot them". He had initially reported this to be hallucinations and then said he thought it was his own thoughts. When asked to specifically describe what the experience was like, he said it was "like echoes in my head saying

COUNTERTHINK



(Click the cartoon for the full-sized version.)

*'kill, kill', like someone shouting in a cave". According to the forensic report, "He reported this began happening after he went to bed...He reported he had never considered harming his grandparents before and this was unlike anything he had previously experienced. He reported that the voices were coming from inside his head and they bothered him so much that he got up. He reported that the voices continued until he killed his grandparents. He reported that he couldn't control himself and reported the echoes stopped after he shot his grandparents. He set fire to the house but could not explain these actions saying the thoughts just popped up". He then took a vehicle and began driving but reported that he had no idea where he was going and that **it all felt like a dream**. He recalled asking the police about his grandparents after he was picked up because **he was not sure if it had really happened or not**.*

My heart goes out to those who died... ALL of them

Yes, I mourn the dead. Do not mistake my skeptical thinking with a lack of compassion for those individuals and families traumatized by this event. But unlike most tabloid reporters, **I don't end my story with the 32 dead at Virginia Tech. I mourn the 100,000 Americans killed every year by FDA-approved prescription drugs**, and the millions more killed all around the world by pharmaceuticals, regardless of whether they were killed in a headline-grabbing act of extreme violence. And unless we restrict the use of antidepressant drugs and find a way to help young men achieve genuine mental health through nutrition, sunlight, and avoidance of toxic chemicals, mark my words: We will see more antidepressant-induced violence in America.

The shootings will not stop until the pills are banned.

You can bank on it. The next attempted shooting is likely only days or weeks away.

If we want to end this violence, we must end the chemical warfare being waged against the minds of our young men and children by the drug companies.

Study summary:

Here's the summary of the study, mentioned above, published in PLoS Medicine:

Recent regulatory warnings about adverse behavioural effects of antidepressants in susceptible individuals have raised the profile of these issues with clinicians, patients, and the public. We review available clinical trial data on paroxetine and sertraline and pharmacovigilance studies of paroxetine and fluoxetine, and outline a series of medico-legal cases involving antidepressants and violence.

Both clinical trial and pharmacovigilance data point to possible links between these drugs and violent behaviours. The legal cases outlined returned a variety of verdicts that may in part have stemmed from different judicial processes. Many jurisdictions appear not to have considered the possibility that a prescription drug may induce violence.

The association of antidepressant treatment with aggression and violence reported here calls for more clinical trial and epidemiological data to be made available and for

good clinical descriptions of the adverse outcomes of treatment. Legal systems are likely to continue to be faced with cases of violence associated with the use of psychotropic drugs, and it may fall to the courts to demand access to currently unavailable data. The problem is international and calls for an international response.

All content posted on this site is commentary or opinion and is protected under Free Speech. Truth Publishing LLC takes sole responsibility for all content. Truth Publishing sells no hard products and earns no money from the recommendation of products. Newstarget.com is presented for educational and commentary purposes only and should not be construed as professional advice from any licensed practitioner. Truth Publishing assumes no responsibility for the use or misuse of this material. For the full terms of usage of this material, visit www.NewsTarget.com/terms.shtml