

Would Today's Edison and Einstein Be on Ritalin?

by Donald Phau

Today, millions of children under 18 years of age are being prescribed the behavior-controlling drugs Prozac and Ritalin. But an announcement in December 2003 by the British equivalent of the U.S. Federal Drug Administration (FDA) called for a partial ban on this mass drugging of youths. Britain's Committee of Safety on Medicines (CSM) banned the usage of the anti-depressants called selective serotonin reuptake inhibitors (SSRIs) for children under 18. The SSRIs are the leading medicines used to treat depression. The report was sent to every psychiatrist, pediatrician, mental health establishment, and pharmacy in Great Britain.

On Dec 10, the British *Guardian* newspaper reported: "Modern anti-depressant drugs which have made billions for the pharmaceutical industry will be banned from use in children today because of evidence, suppressed for years, that they can cause young patients to become suicidal. The Medicines and Healthcare Products Regulatory Agency (MHRA) told doctors last night not to prescribe all but one of the anti-depressants known as the selective serotonin re-uptake inhibitors (SSRIs). The exception is Prozac, which is licensed for use in depressed children in the US. But the MHRA warns, at best, it helps only one child in 10. The decision has big implications for drug regulation."

Ban on Ritalin Possible?

It was not explained why Prozac was the only SSRI exempted by the British ban. Could Prozac's manufacturer, the pharmaceutical giant Eli Lilly, have pulled some strings to have it exempted? The CSM report states that for five out of seven SSRIs evaluated, the "risk/benefit balance is unfavourable"; but for Prozac, "risk/benefit balance is not assessable"; meaning that it had no evaluation of the drug as of now.

The SSRIs and Ritalin have been linked to suicides and youth violence for many years. In 1998, 18-year-old Eric Harris and 17-year-old Dylan Kleibold killed 13 people at Columbine High School in Colorado. Harris, who had been taking the SSRI Luvox, then committed suicide. The same year in Springfield, Oregon, 14-year-old Kip Kinkel killed two students and wounded 25 others at Thurston High School. Kinkel had been taking Prozac and Ritalin.

Will a ban on Ritalin now be next? In the United States, a series of books has been published exposing the dangers of Ritalin. Ritalin, the brand name for methylphenidate, is categorized by the Drug Enforcement Administration, as a drug

within Federal Schedule II, which also includes cocaine. The drug itself is an amphetamine, but was given the name Ritalin by its manufacturer, Ciba-Geigy, which holds its patent. Sales of Ritalin are a billion dollars a year. Ritalin was first used to treat ADD or Attention Deficit Disorder. The name has been expanded and is now called ADHD, Attention Deficit Hyperactivity Disorder. Today, an estimated 5 million American school children are given Ritalin.

One of the first experts to call for stopping the widespread use of Ritalin was Lawrence H. Diller, M.D., whose book, *Running on Ritalin*, was published in 1998. Diller wrote how the professional acceptance of ADD was secured when it was listed in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM). The DSM is considered a virtual "bible" by psychiatry professionals, the American courts, and police. Some of the DSM criteria listed for "Hyperactivity" are: "often fidgets with hands or feet"; "squirms in seat"; or for "Inattention": "often has difficulty in sustaining attention"; "often fails to play close attention to details." Diller ridiculed these DSMs: "Don't all kids, at one time, fidget with their hands?" He noted that these "symptoms" may be a product of boredom, and that it's the smarter students who are most affected. Diller sarcastically added that Thomas Edison, Benjamin Franklin, and John F. Kennedy may have all displayed the symptoms listed in the DSM: "But the way things are going, even some of these notables might be offered Ritalin by today's diagnosticians."

Diller asked the basic question: "Is America ready to have 10% of its children taking Ritalin? With boys disproportionately represented, this means giving Ritalin to *one in six boys between the ages of five and twelve*" (emphasis in original).

Six years later, the answer, unfortunately, is "yes."

Another 1998 book, *The Hyperactivity Hoax*, by neurologist and psychiatrist Dr. Sydney Walker III, blasted the educational and medical establishment: "Has your child been labeled hyperactive? If so, you're not alone. According to doctors, there's an epidemic of hyperactivity in America today. Three to five percent of all U.S. schoolchildren, and more than 10 percent of elementary school-age boys, currently take Ritalin or other drugs for hyperactive behavior, attention deficits, and impulsiveness.

"These children are labeled hyperactive by family practitioners, neurologists, and psychiatrists. Some of them are initially 'diagnosed' by teachers, school counselors, or nurses. There's only one problem with this scenario: Hyperactivity is not a disease. *It's a hoax perpetrated by doctors who have no idea what's really wrong with these children*" (emphasis in original).

The Role of the HMOs

Dr. Walker writes that hundreds of thousands of healthy children were being drugged "and huge numbers of sick children are taking Ritalin to cover up symptoms of undiagnosed and untreated medical problems." He presented a number of

case studies of children who were labeled ADHD, and treated with Ritalin, but who, when competently diagnosed, had real medical problems which were never looked into further. Walker wrote that drugs such as Ritalin are treating symptoms, not diseases, and laid part of the blame for this on the takeover of much of medical practice by health maintenance organizations (HMOs).

According to Dr. Walker, HMOs reward the doctors who quickly diagnose their patients with ADHD, while penalizing those physicians who refer their patients for follow-up by neurological or psychiatric specialists. One case he cited was that of a girl named Debbie, five years old when he saw her. Though she was "tiny and delicate," her mother described her as a "mean little kid" who had temper tantrums and screaming fits. "As a baby, she cried continuously, slept very little, did not nap, and banged her head on her crib. Now in school, she's run away from kindergarten twice. Her teachers despair over her out-of-control behavior and recommend medication. Debbie's first doctor agrees." Fortunately, Debbie's mother did not agree and insisted on a second opinion. Debbie was examined by Dr. Walker, who referred her to a cardiac specialist. It turned out that Debbie had defective blood vessels between her heart and lungs, which prevented a normal flow of oxygenated blood to her brain. Surgery corrected this, and her behavior immediately improved, her tantrums stopped, and her teachers began praising her learning abilities.

Under HMO-run medical procedures, Debbie would have likely been on Ritalin for her entire youth. Walker writes, "In fact, many, if not most managed care programs are actually set up to punish doctors who offer careful and thorough care, and reward those who skimp. As the HMO population grows exponentially, the number of children labeled as hyperactive and put on Ritalin is growing right along with it: from about 150,000 in 1970 to approximately 2 million today [1998]. In my opinion, it's no coincidence that the number of children labeled hyperactive or ADD started skyrocketing at about the same time managed care took over the medical industry. Under managed care, the pressure for doctors to treat patients quickly is intense. The ten-minute office visit is the gold standard, and many procedures must be approved by nonmedical business managers who frown on diligent and appropriate diagnostic efforts. . . .

"A decade ago, when the managed care movement was still in its early years, a Georgia parent-advocacy group found that out of 102 children put on Ritalin, *only two* received an evaluation that met even the cursory standards recommended by the manufacturer of the drug."

In a webcast on Jan. 10, Democratic Presidential candidate Lyndon LaRouche was asked by a youth to say something about all the drugs that are forced on his generation. LaRouche answered that this was "brainwashing" and its purpose was to make you "stupid," like taking Soma in Aldous Huxley's book *Brave New World*. The full exchange follows.