

Soldiers, Suicide and Drugs

By <u>Martha Rosenberg</u> Global Research, December 05, 2010 <u>beyondwarispeace.com</u> 13 October 2010 Theme: <u>Science and Medicine</u>, <u>US NATO</u> <u>War Agenda</u>

More soldiers than ever are on drugs that have been linked to suicide and violent behavior.

In 2009 there were 160 active duty suicides, 239 suicides within the total Army including the Reserves, 146 active duty deaths from drug overdoses and high risk behavior and 1,713 suicide attempts. In addition to suicide, other out-of-character behavior like domestic violence is known to erupt from the drugs.

More troops are dying by their own hand than in combat, according to an Army report titled <u>"Health Promotion, Risk Reduction, Suicide Prevention</u>." Not only that, but 36 percent of the suicides were troops who were never deployed.

The unprecedented suicide rates are accompanied by an unprecedented rise in psychoactive drug rate among active duty-aged troops, 18 to 34, which is up 85 percent since 2003, according to the military health plan Tricare. Since 2001, 73,103 prescriptions for Zoloft have been dispensed, 38,199 for Prozac, 17,830 for Paxil and 12,047 for Cymbalta says Tricare 2009 data, which includes family prescriptions. All of the drugs carry a suicide warning label.

In addition to the leap in SSRI antidepressants, prescriptions for the anticonvulsants Topamax and Neurontin rose 56 percent in the same group since 2005, says <u>Navy Times</u> drugs the FDA warned last year double suicidal thinking in patients.

This article comes from a 10 September article in AlterNet: Are We Giving Our Soldiers Drugs That May Make Them Kill Themselves?

In fact, 4,994 troops at Fort Bragg are on antidepressants <u>right now</u>, says theFayetteville Observer. Six-hundred-sixty-four are on an antipsychotics and "many soldiers take more than one type of medication."

Of course, depression itself is a risk factor for suicide, so it is not always possible to tell if the disease or the drug is at fault.

But many believe the dramatic and tandem rises in suicide rates and psychoactive drug rates are correlated. "Intuitively, it just tells you that there's a connection," Sen. Ben Cardin, D-Md. told the National Journal <u>this month.</u>

Troops may also be taking Chantix, an antismoking drug so linked to violence and self-harm that Secretary of the VA James Peake was forced to defend its use, even in drug trials, before the House Committee on Veterans' Affairs in 2008. "If you know the drug induces suicidal thoughts," an unappeased Committee chair Bob Filner D-Ca. asked Rep. Filner, "Why don't you just stop?" Even widely prescribed asthma drugs like Singulair and Advair are linked to suicide, says the FDA, and have been cited in <u>young people's deaths.</u>

And who knows what happens when the drugs are mixed with mood stabilizers, insomnia and pain pills and antianxiety and antipsychotic pills — combinations that have never been tested for safety? In June <u>Marine Times</u> reported 32 deaths on prescription drugs in Warrior Transition Units (WTUs) since 2007 and said an internal review "found the biggest risk factor may be putting a soldier on numerous drugs simultaneously, a practice known as polypharmacy."

Links between suicide and even murder-suicide and SSRI and SNRI antidepressants have been long recognized. Of course, not everyone on SSRIs will be a suicide risk; but the danger is serious enough that the automatic and "knee-jerk" military prescribing of the drugs should be investigated.

Traci Johnson, a healthy 19-year-old with no mental problems, hanged herself during Lilly trials of Cymbalta in the drugmaker's <u>own clinic in 2004</u>. Red Lake shooter Jeff Weise, who killed 10 on a Minnesota Indian reservation in 2005, had just upped his Prozac. And the Virginia Tech shooter, Cho Seung-Hui, was also on psychoactive medications, according to <u>news reports</u>.

Americans have doubled their antidepressants since 1999 so that 10 percent of the population, or 27 million, <u>now take them.</u> Suicides have climbed by 5 percent since 1999 and 16 percent in middle-aged adults. (The suicide rate actually doubled in Japan since SSRIs were <u>introduced.</u>)

In fact, the high percentage of civilian suicides on psychoactive drugs is probably the clearest indication that military life is not the only cause of the shocking troop suicides: In September alone, there were 18 civilian suicides, 11 murders, two murder suicides and other violence linked to people who were using or had used antidepressants, according to published reports.

A 54-year-old respiratory patient with a breathing tube and an oxygen tank and no previous criminal record held up a bank in Mobile. She had gone off her antidepressants.

An enraged man in Australia, also off his antidepressants, chased his mailman and threatened to cut his throat...for bringing him junk mail.

And a 58-year-old Amarillo man with no criminal history tried to abduct three people, killing an Oklahoma grandmother in the process. He had "an antidepressant in his blood," said police.

Also in the 30-day period, a 60-year-old grandmother in Seattle killed three family members and herself; a disc jockey in Bristol, UK set himself on fire; and an Exeter, UK man was determined to have stabbed himself in the heart. All were on antidepressants.

Finally, in the month of September, legal proceedings began against two mothers and a father charged with killing their own children.

Over 4,000 published reports of violent and bizarre behavior of people affected by antidepressants on the web archive <u>ssristories.com</u> reveal the same out-of-character

violence and self harm in civilians that is currently seen in the military.

Twenty people set themselves on fire. Ten bit their victims (including a biter who was sleepwalking and a woman, on Prozac, who bit her 87-year-old mother into critical condition). Three men in their 70s and 80s attacked their wives with hammers. Many stab their victims obsessively — one even stabbed furniture after killing his wife — and 14 parents drowned their children, a crime seldom heard of before the 2001 Andrea Yates case. (Yates drowned her five children while she was taking the antidepressant Effexor, which manufacturer Wyeth (now Pfizer) "issued no public warning" about, says the <u>Associated Press.</u>)

Then there's the North Carolina pilot on Zoloft who sang, "I'm going down for the last time," into the cockpit voice recorder before he crashed his plane in June. And the mayor of Coppell, Texas, Jayne Peters, who killed herself and her daughter in July over the grief of losing her husband. Police found antidepressants at the home.

Why don't doctors and media outlets publicize the names of these volatile drugs?

It's a good question, said Gary Kohls, a Minnesota family practitioner, in an oped written after Iraq veteran Matthew Magdzas killed his pregnant wife, their 13-month-old daughter, their dogs and himself in <u>Wisconsin in August.</u>

"Nobody in the media has, to my knowledge, had the courage to report what the drugs were, nor have they interviewed the physician or his clinic to find out the rationale for prescribing drugs that have common violence-inducing effects (with black box warnings stating that in the prescribing information)," he writes. "Therefore nothing has been learned from this important teachable moment, probably because revealing the common reality of prescription drug-induced violence would be economically harmful for the sacred cows of Big Pharma and Big Medicine."

David Healy, a psychiatrist and professor at Cardiff University School of Medicine in Wales, has authored several books about the connections. "Prozac and other SSRIs can lead to suicide," he said in a lecture at the University of Toronto. "These drugs may have been responsible for one death for every day that Prozac has been on the market in North America."

And psychiatrist and expert witness Dr. Peter Breggin specifically called on the military to "curtail the use of these drugs and rely instead on psychotherapeutic and educational processes that have already proved effective," in a recent oped. "There is "profound danger of prescribing drugs that cause impulsivity, hostility and suicidality to heavily armed young men and women under stress on active military duty." He <u>also called for</u> "additional research in the military and the VA concerning suicide and violence caused by antidepressants."

Sen. Jim Webb, D-Va. has also zeroed in on medicated troops in Senate hearings this year, calling the fact that one of every six troops are on psychoactive drugs "pretty astounding and also very troubling."

And Retired Col. Bart Billings, a former Army psychologist who has also testified before Congress, said, "I feel flat out that psychiatrists are directly responsible for deaths in our military, for some of these suicides," in a <u>March Marine Timesarticle</u>. "I think it's criminal,

what they are doing."

Still, the remarks of Katie Bagosy, the wife of Marine Sgt. Tom Bagosy who took his own life in May after being prescribed the medication Neurontin, might be the most persuasive of all.

In an article called "A Prescription For Tragedy" in the current National Journal, she says that her husband told her before his death that "'It all started to get worse when I got on this medication.' Looking back, that was the beginning of the end."

Martha Rosenberg frequently writes about the impact of the pharmaceutical, food and gun industries on public health. Her work has appeared in the Boston Globe, San Francisco Chronicle, Chicago Tribune and other outlets.

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