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[Leigh Donaldson: Psychiatric drugging of American children is cause for alarm](#)

The use of powerful drugs to treat younger and younger patients has gone far beyond disturbing.

By LEIGH DONALDSON

The age of children being medicated with prescription psychiatric drugs is getting younger and more widespread every year.

PPH Opinion

According to a 2010 study of data on more than a million children reported by American Academy of Child and Adolescent Psychiatry's journal, the use of powerful anti-psychotics with privately insured U.S. children, ages 2 through 5, doubled between 1999 and 2007.

In the 2007 study, the most common diagnoses of anti-psychotic treated children were pervasive developmental disorder or mental retardation (28.2 percent), attention deficit hyperactivity disorder (23.7 percent) and disruptive behavior disorder (12.9 percent).

Fewer than half of drug-treated children received a mental health assessment, a psychotherapy visit, or a visit with a psychiatrist, during the year of anti-psychotic drug use.

"Anti-psychotics, which are being widely and irresponsibly prescribed for American children -- mostly as chemical restraints -- are shown to be causing irreparable harm." Vera Hassner Sharav, president of the Alliance for Human Research Protection, warns. She further asserts that long-term use of these drugs can have hazardous effects on cardiovascular and metabolic systems.

Dr. Peter Breggin, founder of the International Center for the Study of Psychiatry and Psychology and author of "Medication Madness," characterizes anti-depressants, stimulants, mood stabilizers and anti-psychotic substances as bathing the brains of growing children with agents that threaten the normal development of the brain.

Highlighting the controversial nature of medicating American children is the recent death of Rebecca Riley, a 4-year-old Boston girl diagnosed with ADHD and pediatric bipolar disorder at 28 months of age.

According to a medical examiner, she died from the effects of a combination of Clonidine, a

blood pressure medication prescribed for ADHD, Depakote, an anti-seizure and a mood stabilizer for her bipolar disorder, as well as a cough suppressant and an antihistamine.

Just as tragic is the 2009 revelation in federally funded research that children covered by Medicaid were prescribed anti-psychotics at a rate four times higher than children with private insurance.

The data indicated that more than 4 percent of children in Medicaid fee-for-service programs received anti-psychotics, compared to less than 1 percent of privately insured youth. Poorer kids are receiving more of these drugs than richer ones.

The over-drugging of children in this country is complicated by many circumstances. For one thing, alternatives to medication, such as counseling, especially for attention deficit disorder (ADD) and ADHD, is not often covered under many insurance plans.

There have been countless reports from psychologists claiming that insurance companies encouraged them to get patients on medication for any diagnosis, so that they could stop paying for counseling. Further, many people have no mental health insurance to start with.

Another consideration is that our culture is an attention deficit breeding ground. Mind-numbing electronics are all over the place and our society is abnormally fast-paced, both encouraging limited attention spans. Studies have indicated that continual exposure to video games actually makes ADD worse in some patients.

Furthermore, in this country, the public is inundated with direct pharmaceutical advertising that according to Dr. Peter Parry, a child and adolescent psychiatrist in Australia, "can feed the natural desire parents of distressed and aggressive children have for a quick solution by suggesting a simple medication fix."

The psychological propaganda of Big Pharma steers parents away from proactive parenting toward drug-related answers.

What is most important for patients and parents to take away from these troubling issues is that we should not blindly accept whatever medication that is being promoted as the new wonder drug.

Many parents need to be more resourceful by looking more deeply into their child's condition, and doctors need to be less interested in pushing drugs and focus more on the individual needs of their patients.

Medicating without thorough, professional diagnosis and research into alternative treatments is not only wrong, but abusive to the patient. Medications are necessary for many patients, but their irresponsible overuse is a serious problem that needs to be addressed.

For starters, we might regulate when and how some of these drugs are used, take ads for prescription drugs off television and expand health coverage for viable options to parents such as counseling. Also, doctors and pharmacists should be empowered to better inform parents of the possible harms many drugs can cause their children.

Doctors need to shift more of their concentration on the underlying causes of mental illness in

young children.

The reality is that life today is very difficult for many people. Stressed-out parents cannot provide adequate love, patience and attention, never mind good nutrition and a calm environment for their offspring to grow up in.

Nature and nurture should play a more prominent role in how children with psychological problems are diagnosed and treated.

Drugging a child, even as a last resort, should never be equated with good parenting, counseling and professional guidance.

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