

Health

Ken Kramer, crusader for kids against TeenScreen

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April 18, 2005—The Bush-appointed New Freedoms Commission on Mental Health (NFC) is urging the implementation of widespread screening for children to identify and treat mental illness. It wants the TeenScreen to give all children a mental health check-up before graduation from high school.

Anti-drugging of children advocate Ken Kramer is dead set against drugging children and, therefore, dead set against TeenScreen. Kramer is an investigator for the Citizen's Commission on Human Rights (CCHR), a psychiatric watchdog group.

After thoroughly investigating TeenScreen, which bills itself as a suicide prevention program, he has come to the conclusion that the program is a drug company marketing scheme to get more kids hooked into the psychiatric system and increase the customer base for psychotropic drugs.

Kramer is sponsoring a research project to investigate the circumstances of all child suicides in the state of Florida over the past five years. Although the data collection is in its infancy, Kramer says the investigation so far has determined that between 2000 and 2004, 100 percent of the children who committed suicide in Pasco County were either on psychotropic drugs or receiving psychiatric treatment.

He maintains that medicating kids with dangerous mind-altering drugs "is the real cause of high rates of teen suicide." Kramer recently launched an informational TeenScreen website at psychsearch.net/teenscreen.html

Pushing Pills To School Children

The fact is there is no medical test that can verify the existence of a mental disease in children. The type of screening proposed is entirely subjective and will only lead to millions of children being labeled mentally ill and hooked on mind-altering, addictive drugs.

The New Freedom Commission's drug treatment program for children deemed mentally ill, is based on the Texas Medication Algorithm Project (TMAP), first used in Texas in 1995, which lists specific medications that are mandated for children, including Paxil, Zoloft, Celexa, Wellbutrin, Zyban, Remeron, Serzone, Effexor, Buspar, Adderall, and others.

The antidepressants listed in the TMAP belong to a class of drugs known as the selective serotonin reuptake inhibitors (SSRIs) and are dangerous. They were banned for use in children in the UK in December 2003.

In March 2004, the FDA issued a Public Health Advisory about the risks associated these drugs including Prozac, Zoloft, Paxil, Luvox, Celexa, and Lexapro, Wellbutrin, Effexor, Serzone, and Remeron, after a public hearing where dozens of people testified about suicide and violence committed by persons on the drugs.

The drug companies are the true creators of the list and these medications are the most expensive drugs on the market. TeenScreen is nothing but an industry-invented scheme to recruit the nation's 52 million school children as new customers. When it comes to paying for these drugs, if parents can't afford to, government funds are already set up to do it.

Pediatrician, Dr Karen Effrem has said, "The treatment of choice mandated under TMAP guidelines are the most expensive, profit-enhancers. TMAP is a blatant profit-enhancing scheme that is already bankrupting Medicaid budgets." (For links to reports from Massachusetts, Florida, Texas, and Illinois, visit www.ahrp.org)

Dr Peter Weiden, who was a member of the panel that created the TMAP, has second thoughts about how and why the list was created. He now admits that the guidelines were based on "opinions, not data" and says the funding sources undermine the credibility of the drug schedule since "most of the guideline's authors have received support from the pharmaceutical industry," according to the British Medical Journal.

In addition to SSRI antidepressants being dangerous, these expensive drugs are a rip-off because studies have shown they do not even work on children. The August 10, 2004, Washington Post, reported, "Two-thirds of the trials conducted by drug manufacturers found that the medications performed no better than sugar pills, but details of the negative trials were kept from doctors and parents."

Recent studies show they cause suicide. The 2005 American Hospital Formulary Service Drug Information, reports the "FDA . . . has determined that antidepressants increase the risk of suicidal thinking and behavior in children and adolescents with major depressive and other psychiatric disorders," and "a causal relationship to antidepressants has been established in pediatric patients."

The Service also reports a study of over 4,400 children . . . revealed a greater risk of suicidal behavior or thinking . . . during the first few months of treatment. The average risk was 4 percent among children receiving antidepressant drugs . . . whereas those receiving placebo had a 2 percent risk. In other words, those on antidepressants were at "twice the risk."

The SSRIs have other serious side effects as well. For instance, a review of Prozac's adverse reactions by the University of Pittsburgh, found that 23 percent of children (8-18) who were prescribed Prozac suffered mania or manic symptoms and another 19 percent became aggressive and hostile, and exhibited grinding anger and short tempers.

Brother Jeb Markets TeenScreen In Florida

Many federal and state government officials have become involved in this TeenScreen marketing scheme, which is extremely obvious in Florida. On March 23, 2004, Gov Jeb Bush's office issued a press release, claiming suicide was a leading cause of death among youth in Florida.

Charles Curie, administrator of the National Substance Abuse and Mental Health Services Agency (SAMHSA) apparently traveled to Florida from Washington to join Bush at the press conference to announce the SAMHSA's support of an initiative to conduct pilot programs in Florida through a partnership with Columbia University's TeenScreen program, to screen for mental illnesses such as depression and panic disorders that place teens at higher risk for suicide attempts, according to the press release.

At the press conference, Jim McDonough, director of the Florida Office of Drug Control, told reporters, "Suicide is in fact a widespread threat that claims the lives of thousands of Floridians each year."

McDonough, who is listed as an "advisor" to TeenScreen on its website, is attempting to implement TeenScreen statewide in Florida's public schools, but faces an uphill battle with crusader Ken Kramer.

Even without TeenScreen, parents in Florida are already complaining that school officials are pressuring them to drug their kids. In response to this complaint, the Florida House and Senate are currently considering bills that will stop that practice for families with school age children.

"It will provide critical rights and information to parents to protect their children from drugging through the school system," Ken Kramer says.

House Bill 209 and Senate Bill 1766 contain two important provisions. The first would prohibit the state from rejecting public school students whose parents refuse to put them on drugs as a prerequisite for attending school. The second provision would require full disclosure to parents if and when school administrators refer their children for psychiatric care, with the predictable recommendation to use drugs to control their childrens' behavior.

On March 23, during a Florida House of Representatives Health Care Committee meeting, McDonough testified in opposition to Bill 209 and told the committee: "Put simply, antidepressant use, properly done, does lead to lower rates of suicide."

When McDonough was asked to produce documents to prove that statement, according to Kramer, "he has been unable to provide a single document and he won't either, because there is no document or journal article or scientific study that proves his statement."

"It appears he is relying on one source of information: the psychiatrists who are pushing drugs," Kramer added.

When Mary Panton, executive director of the Citizens Commission in Florida, informed McDonough of an alarming discovery that 81 percent of children in Pinellas County who committed suicide were either on psychotropic drugs or had received psychiatric treatment, McDonough's response to the news was "that's just one county."

While testifying, McDonough said, "One of the key sources of identification is the school . . . the ability of the teacher, the administrator, the principal to note that there are problematic behaviors . . . It is because of the lack of willingness to identify and talk about it I believe that we have such instances as Columbine and the other day the massacre at Red Lake in Minnesota."

McDonough must not have done his homework because that comment does not make sense. The fact is that two of the teens he referred to were both on SRRI drugs when they became psychotic and went on the killing sprees.

On March 26, 2005, The New York Times reported that the family of Jeff Weise are left wondering about the drugs Weise was prescribed for depression. Weise's aunt, Tammy Lussier, told the Times, "She found herself looking back over the past year, when Weise began taking Prozac, the antidepressant."

Jeff Weise, 16, killed nine persons and himself in Red Lake, MN, making it the second deadliest school incident in the nation. A cultural coordinator at the school told the Washington Post that Weise was taking Prozac and had been previously hospitalized for suicidal tendencies.

"They kept upping the dose for him, and by the end, he was taking three of the 20 milligram pills a day," Lussier said. "I can't help but think it was too much, that it must have set him off." She could not understand what else had changed to explain the violence, the Times wrote.

Eric Harris, one of the teen gunmen involved in the Columbine massacre in 1999, was on the antidepressant, Luvox, when he and another teen entered the high school and killed 12 people and injured many more before taking their own lives.

Court records show Harris's Luvox prescription had been filled 10 times between April 1998 and March 1999, and that a little over three months before the shooting his dosage had been increased, which many experts say often happens prior to adverse reactions to psychotropic drugs.

Nineteen-year-old Mark Taylor, who spent nearly two months in the hospital and endured three years of follow-up surgeries as a result of the gunshot wounds he received at Columbine, is suing Solvay Pharmaceuticals, the maker of Luvox, to bring attention to what he believes was the cause of Harris' deadly rage.

Taylor told reporter Kelly OMeara of Insight News on Oct 10, 2002, "Eric was forced onto these drugs and I feel sorry for him, like so many other kids who are put on these drugs. I don't have ill feelings against him since I don't think you can hold him accountable, because he didn't know what he was doing."

The lawsuit claims Luvox made Harris manic and psychotic and the PDR substantiates this allegation. It lists adverse reactions for Luvox as: "FREQUENT: amnesia, apathy, hyperkinesia, hypokinesia, manic reaction, myoclonus, psychotic reaction.

"INFREQUENT: agoraphobia, akathisia, CNS depression, convulsion, delirium, delusion, depersonalization, drug dependence, emotional lability, euphoria, hallucinations, hostility, hysteria, incoordination, increased salivation, increased libido, paralysis, paranoid reaction, phobia, psychosis, sleep disorder, stupor, twitching, vertigo."

It appears that Florida lawmakers are well aware of the problem of overmedicating school children, judging by their back and forth discussion with McDonough during the March hearing.

Representative Ralph Poppell told McDonough, "I would hope that you would concur that we need to do something to get kids into a normal life and drugs are not always the way to do it."

Representative Roberson also expressed unease about drugging more kids.

"The concern that I have," he told McDonough, "is that my experience tells me that the most expeditious way for a teacher in the public school system to deal with an overactive child is to just medicate them, keep them quiet so we can move on. That happens especially in the inner city schools and I have been concerned for the longest time with this issue."

But McDonough would not give up on trying to sell TeenScreen. "Well, I think it throws a damper on . . . the school to initiate any action that would in fact lead to a recognition of mental illness. For example, one of the things that we believe would bring down the rate of suicide amongst children in the State of Florida is screening," he said.

"Because of the wording of the bill . . . We cannot screen for mental depression, mental illness of any type certainly for suicide ideation, etc." McDonough told the panel.

But Representative Roberson wouldn't budge either and replied, "The teachers, they are not licensed as a psychologist or as a nurse or a mental health worker to label certain behavior such as suicidal ideation, so would you agree with me that it would be preferable for a teacher to just tell the mother what he or she has observed in the classroom as opposed to labeling a child as having suicidal ideation?"

Kramer is also concerned about this aspect of the program. "What happens to all the normal and healthy children that are being wrongly labeled?" he asked, "It's tough to imagine the ramifications of a child going to school and then being told that he is bipolar or has attention deficient disorder or any of those invented, non-existent and scientifically unproven psychiatric disorders."

Many Florida Kids Saved From Invasive Screening

Kramer is leading the fight against McDonough and TeenScreen for public schools in several counties in Florida. In Pinellas County he urged parents to send e-mails to the school board to voice their objections to the program and the school board received more than 700 e-mails.

Kramer won the battle in two large counties and McDonough's efforts to implement TeenScreen failed. According to the Jan 26 Tampa Tribune, Pinellas County School Board members refused to subject students to suicide screenings, dashing any hope of introducing a controversial mental health plan in two of Florida's largest school districts.

To protect its students from issues of privacy and wrongful labeling, Pinellas County's School Board voted 6-1 to bar TeenScreen's suicide questionnaire program, the PR Web reported on Jan 30. Administrators in the Hillsborough County school district also considered the program, and determined the survey was too invasive.

I wonder if this means McDonough won't get a check from the drug companies this month.

Who Is Funding TeenScreen?

Kramer is trying to obtain TeenScreen funding records in Florida but the Florida Mental Health Institute, which lobbied with McDonough, for the program's implementation in Pinellas County, "is guarding and withholding information on TeenScreen," Kramer says.

"For some odd reason, Columbia and TeenScreen want to keep their funding sources secret," Kramer says. "To stop people from finding out how much drug company money is being funneled to TeenScreen, the university recently revised a press release on its website and removed a statement regarding its donation of \$19 million to TeenScreen," he reports.

But Kramer plans to continue his investigation and has a mediation meeting scheduled with the state Attorney General's office in an effort to obtain records that directly relate to government funding of TeenScreen.

No More Drugs

We have to stop drugging innocent children and turning them into psychotic killers. In 2000, the United States Secret Service National Threat Assessment Center conducted its own assessment of school shootings and found all indications point to kids on legal drugs.

The Secret Service document reads in part, "Prior to the incident, nearly three-quarters of the attackers either threatened to kill themselves, made suicidal gestures, or tried to kill themselves. More than half of the attackers had a history of feeling extremely depressed or desperate."

So what is being overlooked here? Students are prescribed Ritalin, Prozac and other psychiatric medication simply because they can't remain still in the classroom. Does it not stand to reason that odds favor the idea that these students were also under the influence of some psychiatric medication?

One additional statistic that just does not fit well with all of this. Recent statistics show that school violence is down. How can this be, when we have a huge increase of random killings? Could it be because a higher and higher percentage of students are being medicated with psychiatric drugs and are simply in a dazed stupor?

Because they were dealing with minors and legal drugs, the Secret Service investigators ran into a major obstacle when trying to answer these questions. "With the children committing these crimes being mostly minors and these psychiatric drugs being legal, it is difficult at best to get this seemingly hidden information," they concluded.

Evelyn Pringle is a columnist for Independent Media TV and an investigative journalist focused on exposing government corruption.

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