



Written by [Raven Clabough](#) on May 19, 2014

Published in the May 19, 2014 issue of [the New American](#) magazine. Vol. 30, No. 10

Inside Track

CDC: One in 13 Children Taking Psych Meds

Data from the Centers for Disease Control reveal that there continues to be a significant increase in the number of school-age children on psychiatric medications to treat emotional or behavioral problems. A new health study shows that 7.5 percent of children between the ages of 6 and 17 are on psych meds based on data collected from interviews between 2011 and 2012 with parents of over 17,000 children.



“Over the past two decades, the use of medication to treat mental health problems has increased substantially among all school-aged children and in most subgroups of children,” the report’s authors explained.

Unfortunately, the survey did not identify which diagnoses were being treated by the medications, but estimates indicate that a majority of the drugs are to treat ADHD symptoms, a point that critics are likely to seize upon. As [noted](#) by the UPI, “The study may lend credence to critics who say America’s children are over-diagnosed with ADHD — and subsequently over-prescribed and over-medicated.”

According to the American Psychiatric Association, five percent of American children have ADHD, but studies reveal more than 11 percent of American children are diagnosed with the condition.

What may be more alarming is that there is increasing evidence that ADHD may not be the epidemic that some are claiming, and in fact, may not even be an actual condition.

Dr. Richard Saul, who has been practicing behavioral neurology for 50 years, and is the author of the new book [ADHD Does Not Exist](#), writes in a March 14 *Time* [piece](#),

The fifth edition of the DSM [*Diagnostic and Statistical Manual of Mental Disorders*] only requires one to exhibit five of 18 possible symptoms to qualify for an ADHD diagnosis. If you haven’t seen the list, look it up. It will probably bother you. How many of us can claim that we have difficulty with organization or a tendency to lose things; that we are frequently forgetful or distracted or fail to pay close attention to details? Under these subjective criteria, the entire U.S. population could potentially qualify.

Saul’s analysis confirms what critics have been saying regarding the growth in the rate of mental illness issues: that it may in fact be the result of expanded medical terms and definitions.

Slate.com warned of such a thing last April:

Beware the DSM-5, the soon-to-be-released fifth edition of the “psychiatric bible,” the Diagnostic and Statistical Manual. The odds will probably be greater than 50 percent, according to the new manual, that you’ll have a mental disorder in your lifetime.



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Although fewer than 6 percent of American adults will have a severe mental illness in a given year, according to a 2005 study, many more — more than a quarter each year — will have some diagnosable mental disorder. That's a lot of people. Almost 50 percent of Americans (46.4 percent to be exact) will have a diagnosable mental illness in their lifetimes, based on the previous edition, the DSM-IV. And the new manual will likely make it even "easier" to get a diagnosis.

The expanded definitions have resulted in significant increases in diagnoses of mental disorders, particularly ADHD. Dr. Saul writes, "The *New York Times* reported that from 2008 to 2012 the number of adults taking medications for ADHD increased by 53% and that among young American adults, it nearly doubled."

But Saul contends that the diagnosis of ADHD overlooks the real problems. As Kyle Smith at the *New York Post* [reports](#):

One girl he [Saul] treated, it turned out, was being disruptive in class because she couldn't see the blackboard. Correct diagnosis [sic]: myopia. She needed glasses, not drugs.

A 36-year-old man who complained about his addiction to online games and guessed he had ADHD, it turned out, was drinking too much coffee and sleeping only four to five hours a night. Correct diagnosis: sleep deprivation. He needed blackout shades, a white-noise machine and a program that shut all his devices off at midnight.

Smith concluded, "One by one, nearly all of Saul's patients turned out to have some disease other than ADHD, such as Tourette's, OCD, fragile X syndrome (a genetic mutation linked to mental retardation), autism, fetal alcohol syndrome, learning disabilities or such familiar conditions as substance abuse, poor hearing or even giftedness."

Some believe that the increase in these prescriptions results from parents looking to find an easy solution to their children's behavioral problems.

"There's a societal trend to look for the quick fix, the magic bullet that will correct disruptive behaviors," said David Rubin, M.D., associate professor of pediatrics at the Perelman School of Medicine at the University of Pennsylvania in Philadelphia. "But for those looking for a quick solution to escalating behaviors at home, the hard truth is there is unlikely to be a quick fix."

Psychologist and parenting columnist John Rosemond echoes this sentiment, asserting that childhood misbehavior resulting from lack of discipline is incorrectly diagnosed as ADHD. As such, it is turning a discipline problem into a psychological problem.

Consumer Reports indicates, "Doctors are prescribing antipsychotics even though there's minimal evidence that the drugs help kids for approved uses, much less the unapproved ones, such as behavioral problems. And to make matters worse, the little research there is suggests the drugs can cause troubling side effects, including weight gain, high cholesterol, and an increased risk of type-2 diabetes."

Consumer Reports also notes that the increase in the prescribing of antipsychotics can be attributed to several other factors, including aggressive drug marketing that overhypes the benefits of the pharmaceuticals and downplays their risks:

Antipsychotics have become huge moneymakers for the drug industry. In 2003, annual U.S. sales of the drugs were estimated at \$2.8 billion; by 2011, that number had risen to \$18.2 billion. That huge growth was driven in part by one company — Janssen Pharmaceuticals — and its aggressive promotion of off-



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label uses in children and elderly patients, relying on marketing tactics that according to the federal government, crossed legal and ethical lines.

And the NCHS study reports that children from poorer families are more likely to be medicated, a point observed by Dr. Rubin last year.

“Use is really high among kids in the Medicaid system where decent non-drug services may be difficult to find,” says Rubin, who also points out that even kids with private insurance often don’t have coverage for psychiatric care or counseling.

Research shows that doctors are prescribing the drugs for “off-label” uses such as for ADHD and other diagnosed behavioral problems, which involve a significantly higher percentage of children than schizophrenia and bipolar disorder.

“What started out as a treatment with some level of evidence for a small sub-group of youth with significant development disabilities ... has been extended to cognitively normal kids without any strong evidence,” Rubin said.

Critics observe that the side effects of anti-psychotic drugs could worsen — or in some cases actually cause — symptoms of mental illness.

According to the Citizens Commission on Human Rights International (CCHRINT), there is abundant evidence proving a connection between psychotropic medications and violent crimes, and government officials are well aware of the connection: “Between 2004 and 2011, there have been over 11,000 reports to the U.S. FDA’s MedWatch system of psychiatric drug side effects related to violence,” says CCHRINT, including 300 homicides.

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