



Written by [Rebecca Terrell](#) on August 18, 2014

## What Caused Robin Williams' Suicide?

The tragic suicide of actor and comedian Robin Williams (shown) has sparked rampant speculation about what made him end his life. His history of substance abuse and addiction is making headlines. Most fingers of blame point to his struggles with depression and bipolar disorder, though Williams never confirmed he was diagnosed with any mental condition. In fact, he denied a diagnosis of clinical depression during an [NPR interview](#) in 2006.



Few have mentioned the possible role of prescription drug side effects, until Williams' friend and former colleague Rob Schneider sent a tweet over the weekend blaming the Parkinson's meds he was taking. The [Daily Mail](#) reports that a spokesman for Williams' family offered no response to Schneider's conjecture, but then quoted a "source" as saying:

Robin had recently left rehab. He was on medication for anxiety and depression and had also started taking drugs to combat the early onset of Parkinson's.... A lot of Robin's friends are convinced that the cocktail of prescription pills he was on somehow contributed to his mental state deteriorating as quickly as it did. Robin had always suffered from depression and addiction but the diagnosis and treatment of his Parkinson's was new, as was the combination of drugs he was on.

If true, this report gives a compelling and plausible answer to what led Williams to commit suicide. Anti-anxiety and anti-depressant drugs have a great deal in common with meds used to treat Parkinson's disease; they all act on chemicals in the brain called neurotransmitters that allow cells to communicate. Neurotransmitters regulate both physical and emotional processes such as mood, appetite, the sleep-wake cycle, memory, and even body temperature and breathing. Dr. Peter Gotzsche, medical researcher at the Nordic Cochrane Center, published an [article](#) in January explaining that by using these drugs, "we create a chemical imbalance, an artificial condition that the brain tries to counteract."

Gotzsche was writing specifically about psychotherapeutic meds, but drugs that treat Parkinson's disease work in a similar manner. For example, a popular anti-Parkinson agent is carbidopa-levodopa, which increases levels of the neurotransmitter dopamine in the brain. It's useful because dopamine affects the body's ability to control muscular movement, and the point is to help reduce the involuntary shaking and rigidity Parkinson's patients suffer. The downside is a number of side effects that range from annoying to life-threatening. [Research](#) links imbalances of dopamine to destructive behaviors such as suicide and aggression.

And so it goes with other prescription drugs and the neurotransmitters they affect. Writing for [The New York Review of Books](#) in 2009, Harvard medical professor Dr. Marcia Angell explained a few. "For example, the [anti-depressants] may cause episodes of mania, because of the excess of serotonin," she said. "Antipsychotics cause side effects that resemble Parkinson's disease, because of the depletion of dopamine (which is also depleted in Parkinson's disease)." She pointed out these side effects are often treated with other neurotransmitter-regulating medicines. Unfortunately, "many patients end up on a cocktail of psychoactive drugs prescribed for a cocktail of diagnoses."



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Warning labels on these meds caution patients to watch for a plethora of neurological side effects including agitation, nightmares, psychosis, aggression, and impulsive behavior. Adverse effects such as suicide and other life-threatening behavior are so common that the U.S. Food and Drug Administration requires psychotherapeutic drug manufacturers to label their products with black box warnings — the most drastic measure short of pulling a drug from the market.

According to Angell, the risk of suicide is particularly severe when patients first start or stop taking medicines that regulate neurotransmitters, because the body has not had time to adjust to resulting imbalances. Was this the case with Williams' "cocktail of prescription pills"? It's a reasonable question, especially considering the [Daily Mail's](#) source quote: "Robin had always suffered from depression and addiction but the diagnosis and treatment of his Parkinson's was new, as was the combination of drugs he was on."

Toxicology tests may provide clues. The [coroner's office](#) in Marin County, California, where Williams lived, says it will take up to six weeks before they are complete.



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