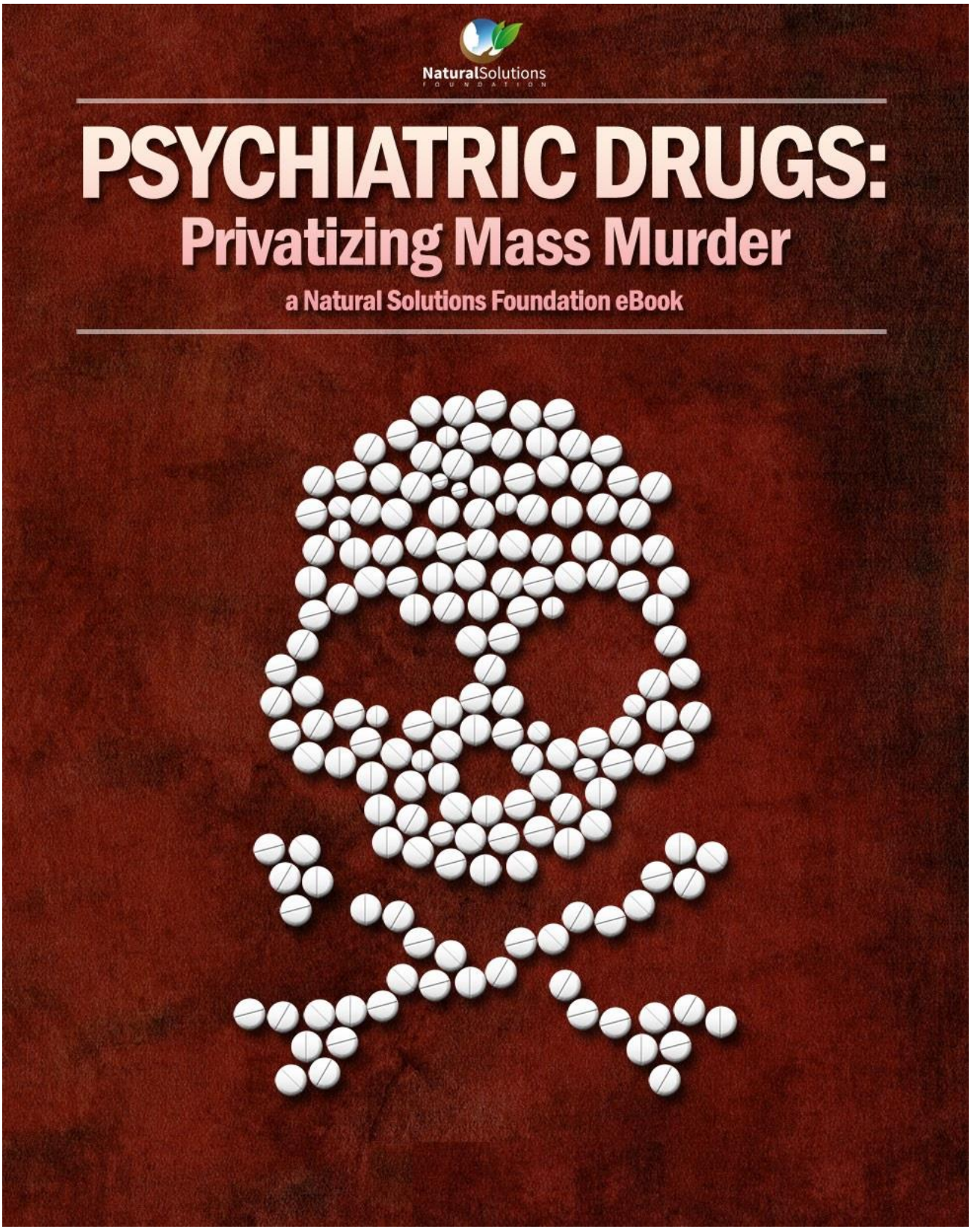
NaturalSolutions
FOUNDATION
PSYCHIATRIC DRUGS:
Privatizing Mass Murder
a Natural Solutions Foundation eBook

COPS KILLING VETS - VETS KILLING COPS

https://www.youtube.com/embed/rnizn7dEbuc

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INTRODUCTION

Maj. Gen. Albert N. "Bert" Stubblebine III, US Army, Ret. and Rima E. Laibow, MD, the Founders of the Natural Solutions Foundation,[1] are strong voices for health freedom. Dr. Rima, a drug-free physician and psychiatrist, and General Bert, a highly decorated combat and military inteilligence veteran have, over the past decade, warned Americans and the world of the threat to public order posed by the overuse of dangerous psychiatric drugs that promote homicide and suicide. These drugs are especially dangerous when given to soldiers and veterans suffering from PTSD because of the toxic mix of the brain chemistry of fear, trauma (current and past) and chemicals which are well known to potentiate death by both homicide and suicide when used even in non-traumatized people.

That potentiation is so powerful that every mass killing in the United States appears to have been perpetrated by people either currently taking, or currently in withdrawal from, these same psychiatric drugs. Gavin Long, the Baton Rouge killer of 3 on-duty policemen,

[1] Established in 2004

was taking Atavan (Lorazapam), Lunesta (ezopiclone) and Valium (Diezepam). Benzodiazapines like Atavan and Valium are known to increase the risk of suicide[2] and aggression.[3],[4] Lunesta is known to increase the risk of suicide and aggression.[5] These drugs caution that they should not be taken together or with alcohol. They do not relieve PTSD, and, in fact, worsen it. Why didn't Long's doctors know that and prescribe, instead, Medical Marijuana[6] or, better yet, the extremely well established treatment for PTSD, Cannabidiol (CBD)?[7] And just as this ebook was being published on 23 July 2016, the news is that the latest shooter was being "treated" for psychiatric problems.[8]

To my mind, the prescribing physician(s) should be held as responsible for these murders as is Gavin Long.

Fully 20% of active duty combat troops were on these drugs in 2011 when then Army Vice Chief of Staff Gen. Peter Chiarelli agreed that both active-duty and non-active duty military personnel suicides were associated with these widely used, dangerous and easy to abuse drugs.[9] In 2016, only 5 years later, despite pledges by the Army to reduce that number, according to the Army's Surgeon General, 110,000 active duty soldiers out of 391,000 enlisted members of the US Army, a shocking 28%.[10]

An even higher proportion of former service members have been prescribed these drugs for insomnia, depression, PTSD and other psychiatric and emotional dysfunction/distress. Or, worse, they have been handed these drugs in volume with neither medical oversight or responsibility in their use employed to assist, evaluate and support them.

The number of veterans on psychiatric medications has been reported at an astonishing – and horrifying – 70%, according to former Marine Gordon Duff[11] who puts it this way,

> *"The US was perfectly fine with having heavily drugged, deeply depressed, traumatically stressed people, carrying automatic weapons running around in Vietnam, where I certainly was for some period of time, or Afghanistan or Iraq or any of the other 50 or 60 countries" where the US has had boots on the ground, said Duff, a marine combat veteran of the Vietnam War.*
>
> ***"They are perfectly fine with that until they get home and actually shoot someone up. And here on a daily basis, what we are hearing is that they are shooting their families, they are shooting themselves. And what we have done is we have taken another generation, and this is another generation, we've put them in the grinder of war, we've***

[2] http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2047018/
[3] http://www.sciencedirect.com/science/article/pii/S0306460300001751
[4] http://www.druglib.com/reported-side-effects/valium/reaction_aggression/
[5] http://www.lunesta.com/
[6] http://www.ncbi.nlm.nih.gov/pubmed/26644963
[7] https://nuleafnaturals.com/pages/ptsd
[8] http://abcnews.go.com/International/wireStory/munich-prosecutors-shooter-psychiatric-care-treated-depression-40819699
[9] http://www.foxnews.com/politics/2011/01/19/concerns-raised-combat-troops-using-psychotropic-drugs.html
[10] http://www.bls.gov/ooh/Military/Military-Careers.htm
[11] http://www.veteranstoday.com/2014/04/04/70-of-us-combat-vets-on-anti-psychiatric-drugs-gordon-duff/

eaten them up, we knew it was going to happen and we're pretending that we're surprised,".[12]

Duff goes on to ask why we are surprised at the *shoot-em-up*:

> "**"One of the issues that has come up [following the mass shooting at Fort Hood by an armed active duty person on psychiatric medication] is why should people who are under psychiatric care for depression, posttraumatic stress be allowed to carry weapons. Well, another issue might well be why they were allowed in Afghanistan and Iraq while under those same medications and that same diagnoses carrying weapons pretty much continually, if we wonder why some of the issues have happened there?"**[13]

These are the vets who, both because of combat experiences and those [supposedly] unrelated to combat, are carrying these chemicals in their bodies on a daily or intermittent basis as part of their molecular cargo of decision-making and judgement neurotransmitters and molecules.

Trained in weapon use and inured to death, and hauling polypharmacy's ticking time bomb of physical and personality damage around, the vets are host to a deadly brew, too often deadly, too, to their targets. There is all too often cause for mourning when these drugs are on board. When those targets are cops, or when the vet is the cop, the results are, quite literally, cause for the deepest concern and, all too often, for the deepest mourning.

This eBook brings together warnings with practical steps to protect vets and society and to heal the soldiers and veterans who are suffering from the adverse effects of both war and psychiatric drugs.

Please Friend us at FB: /NaturalSolutionsFoundation

October 7, 2015
GUNS, DRUGS, WAR & CRIME
Your Tax Dollars at Work

[12] Ibid.
[13] Ibid.

You don't need to be a retired Major General to know that guns, drugs and war are a dangerous mix.

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In the past few days we've witnessed loud barking from the dogs of war: jets are in the air; bombs are falling across much of the Middle East, some marked with the American Eagle, some the Russian Bear. And people are dying. Sometimes the crazed thugs who think they're establishing a new Caliphate, sometimes, as tragically recently in Afghanistan, doctors and patients in a hospital building clearly marked with the required Red Cross or Crescent. And sometimes the innocent victims are right here at home, as in the latest mass shooting, this time at a community college in Oregon. Like the hospital this building was also marked as a "Gun Free Zone."

When the bombs fall and the guns shoot, humanitarian law is always at risk.

Indiscriminate discharging of ordinance always puts the innocent at risk, making the shooters criminals.

I was outraged to hear some American commentators saying that attacking the hospital was "justified" since terrorists might be hiding there, as though the Geneva Conventions did not even exist. Civilization and civilians will not survive unless we demand strict adherence to international humanitarian law.

Through the pain and grief we must move to a deeper understanding about what is happening. Why are an average of twenty two currently serving American soldiers or veterans – one every 65 minutes - killing themselves every day? Why are young American men shooting their neighbors and classmates?

In the Oregon shooting the facts as they are developing show a troubled young man who was diagnosed as autistic, thereby suggesting he was a victim of a vaccine adverse reaction. He was on multiple psychiatric drugs; tweeted at one point that he put all his pills in a baggie and didn't know which were for sleeping so he just took a bunch. Like the shooter, his victims were victims of indiscriminate, legal, but criminal polypharmacy. The shooter had also tried to kill himself when in the military and was therefore discharged. Instead of a soldier suicide, we have a discharged soldier mass shooting. Oh, and by the way, Chris Mintz, a veteran who was in the room took 5 bullets while trying to stop the slaughter. He lived.

What if Mintz had been allowed to be armed? But he wasn't armed and the perpetrator was, despite the "Gun Free Zone" sign, apparently on some random cocktail of dangerous but lawful drugs and armed.

These are, no doubt, the same FDA-approved drugs implicated in virtually every mass shooting, every soldier suicide. Guns do not kill people unless a person pulls the trigger. Drugs do not kill people unless you swallow them. And from where did the deadly notion come that a law-abiding citizen's *right* to *bear* arms doesn't apply in a magically signed "Gun Free Zone." Did Chris Mintz *consent* to the loss of his right? Is a Gun Free Zone also a Constitution Free

Zone?

Which brings us to what I identify as "the defining issue of the 21st Century" – Informed Consent. At the inception of the United States we find, in the Declaration of Independence, the stirring words that governments derive "their just powers from the *consent* of the governed."

When it comes to what you put into or on your body, the same rule of *consent* applies. In this context it is called "Informed Consent." For over a century in American law, and truly for millennia past in humanitarian law, it has been a trespass and an assault for medical personnel to engage in medical interventions without your Informed Consent.

The key here is "Informed." Are you being truly informed? When the parents of the Oregon shooter subjected their son to multiple, dangerous psychiatric drugs, had they been informed of the possible consequences to their neighbors' children or to their own? When the American gunship pilots repeatedly blasted that hospital in Afghanistan, had the doctors and patients been *informed*, or did the soldiers just ignore the *Hospital Gun Free Zone* signs? Were the pilots victims of polypharmacy. Were the generals? And if they were, so were the occupants of that Hospital Gun Free Zone.

I know one thing for certain, unless you assert your right to Informed Consent, it will be ignored, "waived" as they say in law. Unless we, together, demand that all governments (and those armed groups that want to act like governments) abide by humanitarian law, this world will become less and less civilized, leading to a collapse of world population and destruction of what any sane persons values most: freedom, peace, health, prosperity. That is what we, the sane people of the planet, all want. Tragically, perhaps terminally, the insane at the helm want something very different.

What Can I Do as an Individual?

First, make sure you have your Advance Vaccine Directive[14] card in your wallet, backpack or purse (or your child's). Follow the detailed instructions provided on exactly how to use it to assert your right to Informed Consent, protected by national and international law: http://drrimatruthreports.com/advancevaccinedirective

Second, help us educate decision makers by using our web form Action Item to make it clear that you know your rights and you want them honored. All the time: http://tinyurl.com/InformedConsentPetition

Third, join us on social media. *Like* our Facebook page, https://www.facebook.com/NaturalSolutionsFoundation and download the Health Freedom App to your smart device: http://tinyurl.com/HealthFreedomApp .

And finally, Share and Like this very important message by using this link: http://drrimatruthreports.com/?p=25942

[14] http://www.DrRimaTruthReports.com/AdvanceVaccineDirective

Being well informed on HOW to assert that Informed Consent is the first step to truly have Informed Consent.

Yours in health and freedom,
General Bert
Maj. Gen. Albert Stubblebine III (US Army, ret.)
President
Natural Solutions Foundation
.
PS — I suspect the only new gun control law we need is an Act of Congress outlawing "Gun Free Zones" which violate Americans' Right to Bear Arms. ANS

April 4, 2014
MILITARY MEDICAL BETRAYAL:
SOLDIERS, SUICIDE & PSYCHIATRIC DRUGS

Watch the Video Version of this Blog: http://youtu.be/nix_CZAfiKw

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"Nearly 1,900 military veterans are thought to have taken their own lives in just 2014 alone…"[15]
"All empires end badly." Dr. Ron Paul

Psychiatric and related medications kill by enhancing depression, psychosis, aggression, violent behavior. They permanently alter brain chemistry in the alleged service of an alleged imbalance which remains elusive while profitable, and dangerous, treatments for it abound. So while we know that drugs do not effectively or safely treat depression or PTSD or psychotic thinking or suicidality or homicidality, or anxiety or other psychiatric problems, we do know that in the presence of danger, fear, nutritional deficits, sleep deprivation and constant over-drive alert, they trigger profound neurological and physiological changes that are killing our soldiers. When our soldiers are harmed, the ripple is monumental and harms everyone whose lives they touch from

[15] http://www.businessinsider.com/veterans-suicide-2014-3#ixzz2xtAhKRit

bereaved (or murdered) family members to other members of the military to civilians brutally slaughtered by men and women literally driven out of their minds by their doctors.[16]

At least 20% of the Active Duty combat forces the US fields in its endless wars are on psychoactive medication, right now, today. Perhaps upwards of 70% of our veterans are, too.

It wasn't always that way.

Prior to the early 1990's, combat solders were prohibited from taking psychiatric medications. It was well understood that the conditions, including stress, sleep deprivation, fear and hyper-arousal, involved in combat increased the toxicity of psychiatric drugs through permanent alterations of the critically important Hypothalamic-Pituitary-Adrenal axis linking emotionally responsive centers of emotional and physical regulation. Under high stress conditions in the presence of drugs, that vital regulatory system would become fragile and easily pushed further off center with cataclysmic immunological, physiological, neurological and psychiatric results. It was clear that soldiers who took them under those conditions were prone to more homicidal, suicidal and other violent behavior as well as impaired judgement in other areas as well. What was less clearly understood at that time was that the use of these drugs under combat conditions increased the devastating long term destruction of life known now as "Post Traumatic Stress Disorder" or PTSD.

Before the First Gulf War, any warrior on meds was kept far away from combat. In the early 1990s, the military changed its rules, allowing, and, in fact, actively encouraging, Active Duty combat soldiers to take psychiatric medications to help them to continue to engage in combat. As a direct consequence of these policies, which mean that today, fully 20% of all combat soldiers are taking these disastrous medications, the horrid trend of ever increasing soldier and vet suicides has now reached pandemic proportions.

When I was on Active Duty I truly believed that our military physicians could be totally trusted and that if they prescribed medication, including psychiatric medication, it was necessary, well tested and safe. Turns out I was seriously wrong.

It was only after I retired from my last command as the Commanding General of the US Army Intelligence and Strategic Command (INSCOM) that I began to understand the profound dangers inherent in the use of psychiatric drugs and the clear, causal relationship between their use, suicide and homicide. I learned that psychiatric drugs given under conditions of high stress and anxiety actually potentiate the development of psychosis, irrational violent behavior, PTSD, depression, homicide and suicide.

The biochemistry and neurology of how and why this happens is actually quite well known and has been for some time. There is therefore absolutely no excuse for ignoring these well-established scientific facts. The cost of doing so is the vast tragedy of soldier homicides, suicides, aggression, violence, domestic and otherwise and all of the associated collateral damage.

[16] http://www.armytimes.com/article/20100317/NEWS/3170315/Medicating-military

As a professional military career officer, I am deeply distressed by a leadership which has callously and carelessly adopted policies resulting in a drugged, dysfunctional and damaged military causing outrages such as the slaughter of noncombatants and shameful blotches on our national honor like Abu Grave. Drugged men and women necessarily have lowered judgment thresholds and will commit violent and irrational acts on themselves and others without discernment. It was for precisely this reason that soldiers on psychiatric medications were deemed unfit for combat duty.

They ARE unfit for combat duty!

Since my retirement, I have learned from Dr. Rima how prescription drugs, by poisoning enzyme systems, except in the most extreme situations, and for short term use (like an emergency room or surgical suite) always cause more problems than they cure. During her nearly five decades as a psychiatrist and environmental physician, she has consistently refused to prescribe dangerous drugs (except to wean patients off them) including psychiatric drugs.

Of course, it is not just psychiatric drugs. In September 2013, CBS News obtained VA data through a records request which showed that while the overall number of patients treated by VA was up 29 percent, narcotics prescriptions had risen by 259 percent.[17]

Indeed, she clearly predicted the current, constantly escalating roll-call of suicide and homicide, military, pediatric and civilian. The second tragic Fort Hood mass shooting teaches us that.

Again.

I weep for our warriors, wounded by their own leadership through the provision of mandated, untested and dangerous vaccines, then wounded further when they are drugged with dangerous psychiatric medications known to turn people into victims, homicidal and suicidal victims.

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As it did with desegregation, the Military must take the lead in changing social norms as they effect the efficiency of our forces and the integrity of our society and its defenders. That means searching for safe, effective and natural solutions to the special medical needs of members of the Armed Forces. Rather than employing the most invasive "standard medicine" and "triage medicine" approaches to maintaining soldiers' mental and physical health, there are better, more responsible and more effective alternatives —

Those alternatives, however, work and are therefore dangerous to one of the most powerful forces in the world: Big Pharma. Dr. Stephen Xenakis, chief psychiatrist at Fort Hood in the 1980s and part of the crisis response team sent there after the mass shooting in 2009, explained the illogical, but hugely active practice of psychiatric medication of troops and vets: "The pharmaceutical companies' influence is so strong, as are the pressures from Congress to keep things just the way they are….Congress is lobbied heavily by pharma. It makes it difficult to get any endorsement or enthusiasm for any non-

[17] http://www.ibtimes.com/medicating-our-troops-oblivion-prescription-drugs-said-be-endangering-us-soldiers-1572217

pharmaceutical types of treatment."[18]

The alternatives which we know are effective are simple, easy and inexpensive. Not at all what Big Pharma has in mind for the Pentagon-as-Sugar-Daddy. They include:

[1] Meditation, Breathing, NeuroBioFeedback, Frequency, Intentionality and other Self-Regulatory Techniques, not dangerous psychiatric drugs. These techniques work to control symptoms (and work very well) but they also work to restore homeostasis and balance to the brain and body, something no drug can do.

We could, preventively, teach the regulatory skills through Bio Feedback, Neuro Bio Feedback, etc., to soldiers before they deploy. The results would be what we want, but not what the drug companies want.

Drugs and soldiers simply do not mix. Keeping troubled troops out of combat is essential. We must change the rules back to their pre-1991 status. Here is a short video where I discuss Intentionality: http://youtu.be/g1jKfpTmPIE .

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[2] Good nutrition, Sleep and Sufficient Exercise, to Supercharge the Soldier, Not Poison Him/Her rather than unsafe, unproven, toxic vaccines; and the more vaccines, the more vaccine injuries; therefore, the best way to stop vaccine injuries is to stop vaccinating! As Dr. James R. Shannon, former director of the National Institute of Health (NIH) declared, "the only safe vaccine is one that is never used."

[3] Nano Silver 10PPM, not Antibiotics, should be used to Protect Mental and Physical Health. Safe, effective Nano Silver replaces the need for dangerous antibiotics which lead to dysbiosis and yeast overgrowth, known causes of depression, triggering the use of antidepressant medication. In addition, antibiotics, including antivirals, can cause psychosis and aggression, especially under conditions that increase vulnerability like the high stress realities of combat and deployment. They produce resistant organisms leading to persistent infections and subsequent malaise and fatigue from both the infection and the treatment, further prompting psychiatric drug administration to our troops.

Dangerous medications like the anti-malarial drug Lariam™ induce psychosis and irrational, violent behavior. They are unnecessary since strong scientific documentation makes it clear that they can be replaced by Nano Silver 10 PPM with complete safety and very high efficacy.

Nano Silver 10 PPM does not cause either suicide or resistant organisms. Antibiotics do both. More here: www.NSFmarketplace.com. Consider CBDs from Hemp for neurological balance: www.DrRimaTruthReports.com/CBD-Availability.

[4] Give the Body and Brain What They Need More of: Cannabidiol (CBD).
We have built in regulators which may, under some circumstances, be in short supply. CBD is one of our most powerful and effective mood regulators. Our bodies produce it to do that and a host of other positive functions for us such as upregulating the immune system and causing new

[18] Ibid

cells to develop in the brain. With a strong scientific base, this amazing non-psychoactive molecule has no toxic side effects and should form the nutritional base of US Military Mental Health services. Not only are its effects profoundly positive, it works to prevent the damage of high stress situations to the Hypothalamic-Pituitary-Adrenal axis, helping to prevent massive problems during combat and following it.

What must we do? Our military physicians (including psychiatrists) are both officers in their respective Services and physicians, bound by medical ethics. As such, it is the moral and legal duty of the medical officers to speak out against the change in policy that are directly associated with the tragic pandemic of soldier homicides and suicides both on, and following, Active Duty.

Our combat soldiers should never be subjected to dangerous psychiatric or other drugs and, if medicated, must never be put in a position where the presence of the drug ramps up the likelihood of personal, social and emotional tragedy for everyone whose life they touch.

Health care professionals who take the HealthKeeper's Oath™[19] vow that they will not use their skills to harm people. The Physicians in the Military and related organizations (like the CIA, DHS, USPS, FEMA, etc.) have a responsibility to commit themselves to the principles of the HealthKeepers, swearing to uphold their duty both as officers and doctors.

Natural Solutions Foundation has sponsored the HealthKeepers Oath, www.HealthKeepersOath.org where thousands of health keepers, physicians and other health care givers alike, have sworn:

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"As a Health Care Worker,
Student, Administrator or Support Person
I Swear My Talents, Skills and Knowledge
Will Not Be Used to Perform Eugenicide or
Destroy the Rule of Legitimate, Ethical and Humane Law."

Modeled after the Oath Keepers (of which I am one of the highest-ranking military members, www.OathKeepers.org), the Health Keepers Oath reminds us that the horrors of Nazi, Chinese

[19] http://org.salsalabs.com/o/568/p/dia/action/public/?action_KEY=1614

and Soviet “medicine” could not have occurred without the willing support of the health care profession and demands that health care givers take professional responsibility seriously.

Every combat solder placed on a psychoactive drug is a potential homicide or suicide and a disgrace to his/her doctor.

Join me in supporting our soldiers, and everyone they touch, by protecting them from unethical medical practices which expose them to biochemical and psychological hazards which can be lethal.

We need your support to be able to continue to raise the issue of the serious ethical failings that have led to the increasing tragedies we are witnessing. Your help matters.

You can help greatly by following these simple steps:

1. Provide a copy of the Health Keepers Oath, www.HealthKeepersOath.org, to everyone you can reach who has any connection with military health care and urge them to sign and forward it to others in their fields.

2. Make a generous recurring donation to the Natural Solutions Foundation, of which I am proud to serve as President. Your support is essential to our work. http://drrimatruthreports.com/action/donate/

3. Spread the word. Friend us on Facebook: /NaturalSolutionsFoundation, Like, Share and Tweet the HealthKeepers Oath, www.HealthKeepersOath.com, Follow us on Twitter @HealthFreedomUS and @NaSolFoundation, Forward our emails as widely as you can.

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www.HealthKeepersOath.org

Dr. Rima Replies:

May 28, 2014: How Many Homicide/Suicide Producing Psychiatric Drugs Was Elliot Rodgers Taking?

This Dr. Rima Responds contribution was written in response to The Guardian's article *Seven Dead in 'Premeditated Mass Murder' Shooting Near California College Campus*[20]

Which psychoactive drugs was this young man taking, for how long and in what combination? Sadly, many people have thoughts like Elliot's. Psychoactive medication, as the black box warnings they carry in the US, Canada, UK, Australia and New Zealand makes clear, potentiates their being acted upon through suicide and/or homicide.

Guns rarely kill people. Psychoactive drugs often do, sometimes with a gun as a tool, sometimes not. Sometimes with an ax or a knife, or a bottle of pills, or a car.

I made a video called "I am Adam Lanza's Doctor"[21] in response to a blog from the mother of a young man like Adam Lanza [the video is a metaphor as I make clear in its opening section]. In it I elaborate on the dangerous use of psychiatric medication and how it is inextricably linked with the epidemic of mass murders and suicides we experience in the US and other heavily medicated societies.

I would be more than a little astonished if Elliot Rodger's despair and his desperate actions were not the result not only of psychiatric illness, but of the drugs mistakenly, but all-too-commonly, used as if they actually treated the illness.

They do not. They cause massive and irreparable harm and are generally supplemented with more and more irrational and unsuccessful polypharmacy leading to biological, neurological and behavioral chaos, sometimes resulting in death, always resulting in suffering.
There are good and effective means to help those with emotional and psychiatric illnesses which do not involve toxic chemicals. I know.

I have been practicing drug free psychiatry and medicine for nearly 45 years.

Find someone who practices nutritional/orthomolecular psychiatry and medicine and treat the issues, don't make the worse.

May 14, 2014: Dr. Rima Replies:
Did Psychiatric Drugs Kill This Woman's Kids? Probably.

[20] http://www.alternet.org/investigations/seven-dead-premeditated-mass-murder-shooting-near-california-college-campus
[21] youtube.com/watch?v=AHlQlWhHg2c

In response to The Stir's Kiri Blakeley' article *Military Mom Who Killed Her 2 Kids Didn't Want Them to Become Like Her*[22]

There is no doubt in my mind that this woman was on psychoactive drugs when she made the decision, and carried out the action, killing her children.

Every single mass murderer, in or out of schools, in the US in the last decade or more has been on psychoactive drugs or withdrawing from them. Every single one. Many, many people on these drugs kill themselves and sometimes they kill others along the way, hence the black box warnings to that effect these drugs must carry in the US, Canada, UK, Australia and New Zealand.

These drugs do not decrease deaths, they increase them. Psychoactive medication does that. Often.

As a psychiatrist who has practiced drug-free medicine and psychiatry for nearly 50 years, I can definitively state that nutrition, NeuroBioFeedback and other safe, effective means work while drugs do not. While these other means are safe and effective they differ from drugs not only because they work but because drugs can, and do, have disastrous consequences.

You really do not have to fill that prescription! And since these drugs inevitably, often permanently, damage the brain and body, they should not only never be taken, but NEVER given to children.
Never.

In response to the "I Am Adam Lanza's Mother" article that has been making the Internet rounds. I am not literally the Connecticut shooter's doctor. That is a metaphor. I have dealt with people like the shooter; I speak with experience. In this time of horrific tragedy, let your voice be heard by decision makers: http://tinyurl.com/PsychDrugsKill. Please share this link with all your circles of influence.

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December 18, 2012
I Am "Adam Lanza's" Doctor
I have treated [people like] "Adam Lanza"
Male and female, young and old, for decades.

Dr. Rima's Metaphoric Video: https://youtu.be/Ac33ysBPBcc
"Metaphor for Our Time – I am Adam Lanza's Doctor and *You* are His Neighbor."

I am a Child, Adolescent and Adult Psychiatrist. I did my psychiatric residency at Lincoln Hospital, Bronx, NY (Albert Einstein College of Medicine) and my Child Psychiatry residency,

[22] http://thestir.cafemom.com/in_the_news/172088/military_mom_who_killed_her?result=comment_added&comment_state=member&success=1#comment_5225066

alo at St. Luke's Hospital, New York, NY (Columbia University College of Physicians and Surgeons).

I have worked with Autistic people of all ages, Asperger's Syndrome people, Schizophrenic people, Bipolar people, Multiple Personality Disorder people, OCD, ADD, ADHD, and pretty much every other type of labeled person in my 46 year career since graduating from the Albert Einstein College of Medicine in New York City.

And I have never written a prescription for a psychiatric drug. Or any other type of drug, for that matter.

I have, while serving as the Acting Director for a Child and Adolescent Psychiatric Ward of a large hospital not very far from Newtown, CT, looked at the drugged, disoriented, drooling and dangerous children in my care ranging from age 4 to 16 and taken ALL of them off all psychiatric medication, weaning them carefully, of course, because I simply could not tell what we were dealing with other than drug-damaged brains and bodies of the young and very young kids I had under my care.

The nurses told me I could not do that because they could not contain the children. I asked them how they knew that since the children who were violent, homicidal and suicidal were ALL on drugs known to make them violent, homicidal and suicidal.

They told me that I could not do that and that they would go to the union to prevent me from taking the kids off their meds. I replied that the meds were not the kids' meds. They were the staff's meds since they kept the staff feeling comfortable and safe.

They went to theor Union. I had my CT physician's license, a Union Card that trumped theirs.

The 4 year old on 11 different psychiatric medications who was toe walking (a sign of neurological damage in a 4 year old) and who wanted to die stopped drooling and spinning around in circles when she came off the meds.

I was the first person to ask her why she had plunged a knife into Joey (Mommy's boyfriend)'s leg when he was asleep. She told me "He was hurting me down there [pointing to her vagina] every night and Mommy would not stop him". When the stabbing occurred, she was medicated without a single person taking a moment to ask why the act had taken place.

You see, I am old enough to have learned my craft and art BEFORE the advent of untested, highly profitable, and totally unconscionable psychiatric drugs. I read the literature on these neurological poisons and saw that the long terms studies were absent, that the pediatric studies were absent and that the advertising-supported "impartial" journals were nothing more than paper prostitutes all dressed up in shiny paper dresses and glossy ads.

I watched in horror as younger and younger children were placed on stronger and stronger drugs for less and less indication (although, admittedly, in my mind there is no justification for the use

of any psychiatric drug).

I learned orthomolecular medicine and psychiatry. That works. I learned how to listen and move people toward emotional health. That works too. I learned how to employ NeuroBioFeedback to teach the brain how to regulate itself and the body in harmony with its capacity and needs. That works fantastically well. I learned how to use frequency medicine, homeopathy, herbal medicine, intravenous nutrition and a variety of other modalities which actually support healing. They work.

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I learned how to use nutrition, diet and detoxification, for which I studied Environmental Medicine. That works.

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What does *not* work is drugging the brain with toxins which create the very symptoms for which the drugs are given in the first place.

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I have met and held "Adam Lanza's"[23] mother in my arms as she wept in fear and exhausted despair. And I have held her in my arms as she wept for the joy of having her child clear eyed and of sound mind not in moments of quick hope, but continually and consistently.

I have held "Adam Lanza's" mother's hand in court as we pressured his school to give him the education he needed, not the one that they made money on from destructive State subsidies for the correct diagnosis and another drugged kid.

I have sat with "Adam's" brothers and sisters helping them to undo the trauma that Adam-on-drugs has brought to their lives.

"Adam Lanza" and I have spent hours together as he climbed out of the pit of his own psychosis, without drugs, confinement or violence, but not necessarily smoothly, either.

And I have attended the funeral of more than 1 "Adam Lanza" whose family pressured his mom, or whose divorced parent pressured the custodial parent through the Court, to put "Adam" on drugs – and then did not even have the good grace or decency to accept responsibility for his death.

We know of absolutely no chemical imbalance to account for mental and emotional illness. We know that genes are disrupted so function is distorted by a host of causes, chief among which are heavy metals like mercury and toxic metals like aluminum and industrial poisons like formaldehyde, fluoride and foreign DNA and proteins which call forth an auto immune reaction and cause neurological disruption.

This is a type of expression of a larger cause of disability I have called "Genome Disruption Syndrome" or GDS (http://www.GDS-Therapy.com). It, not a psuedo-science "genetic drift", accounts for the changes in the human genome which are linked to increased cancer rates, autism, increased diabetes rates and the other chronic, degenerative diseases which were virtually

[23] This is a metaphore. I am not the psychiatrist of the purported Sandy Hook shooter nor have I met his family members.

unknown in our grandparents and parents childhoods. The genome is the same. The genomic disruption is by no means the same.

The actual Adam Lanza was, according to his uncle, being "treated" with Fantapt[24], a novel, and highly dangerous, anti-psychotic previously rejected by the FDA for its high side effect profile, including aggression and psychosis.[25]

But he was also vaccinated. So this Adam Lanza was toxic with thimerosal (49.6% mercury by weight), formaldehyde, fluoride, MSG, foreign DNA, diploid cells, foreign protein, Polysorbate 80 (or "TWEEN") and other systemic toxins injected into his body regardless of their toxicity and regardless of his ability to remove them from his body.

So this Adam was neurotoxic — a victim of Genome Disruption.

His mother, I must also presume, had no intent to harm him when she allowed his genome to be repeatedly overwhelmed with unnecessary and dangerous vaccines and then, similarly, with dangerous and unnecessary psychiatric medications. No, I am sure that she followed the perhaps-well-intentioned advice of experts who themselves have suspended their capacity to evaluate data and instead rely on the herd's belief that since it is said so often, the safety and efficacy of the drugs and vaccines purveyed so beautifully in the brilliantly done glossy journals and TV and magazine ads, seminars and trainings (complete with pizza and salad during a busy lunch in a windowless conference room in the clinic or hospital) must be safe and effective.

They are *neither safe nor effective* and the "Adam Lanza's" and their mothers, sisters, brothers, fathers, neighbors and, today, his grieving neighbors in Newton, CT. can all testify to that.

There is a time to say *NO*. That time has arrived. ***No* to psychiatric drugs.** There is ALWAYS a better way. More than half of the people who kill themselves are on psychiatric drugs.

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***No* to vaccines.** There could not be a *worse* way. Virtually every modern outbreak and epidemic takes place in the fully vaccinated, to which the vaccine pusher's retort is, "Well, give people *more* vaccine doses since 2 (or 3, or 4 or more) did not work. Call them boosters!" I call them Genome Disruption.

***No* to GMOs** which are likewise altering our very genome.

Psychiatric drugs kill both those who take them and those *they* turn on.

They are unnecessary and dangerous, but oh, so profitable.

See my video, blog and take action here now:
http://tinyurl.com/PsychDrugsKill

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[24] Iloperidone

[25] http://www.businessinsider.com/adam-lanza-taking-antipsychotic-fanapt-2012-12

Let your voice be heard by decision makers:
http://tinyurl.com/PsychDrugsKill

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All of our children are Adam Lanzas; all of them are his victims.

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Yours in health and freedom,
Dr. Rima
Rima E. Laibow, MD
Medical Director
Natural Solutions Foundation
www.SaveMyLifeDrRima.com

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PS: This is what General Bert Stubblebine (US Army ret.), my husband and the President of our Foundation, had to say:

"Our hearts reach out to all those who suffer at the hands of senseless violence, around the world. It must stop! It is urgent that you share this message with your entire circle of influence. Send them to Dr. Rima's powerful message about Genome Disruption and the mass killing tragedies that mar our claim to civilized status. Dr. Rima Truth Reports bring you the immediate information you need to meet the challenges of the crises of crony corporatism, to protect yourself and family. Send all your circles of influence to Dr. Rima's powerful message about Genome Disruption and the mass killing tragedies that mar our claim to civilized status. Send them here: http://tinyurl.com/PsychDrugsKill." General Bert

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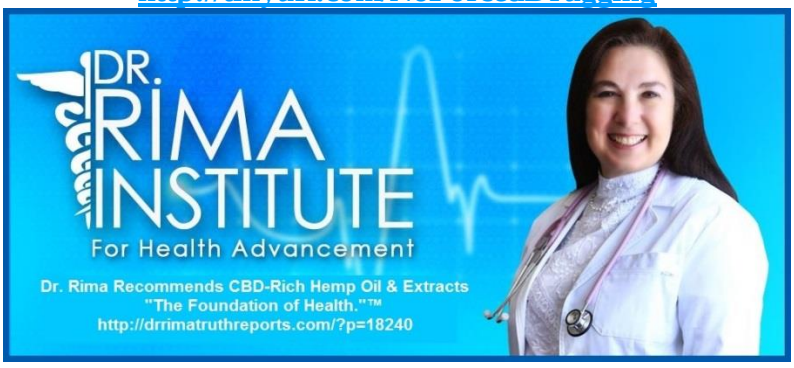
Note: This video and essay were written in direct response to the brave woman who authored "I am Adam Lanza's Mother" about her experience with a similar child. Just as she is not literally Adam Lanza's mother, so I am not claiming to be the physician who treated Adam Lanza. Readers are invited to understand that as a Child, Adolescent and Adult Psychiatrist I have treated many patients like Adam Lanza but never met him before the tragic deaths.

December 17, 2012
UPDATED: www.GDS-Therapy.com
Let Your Voice Be Heard!
Contact Your Representatives Here:
http://tinyurl.com/NoForcedDrugging



Genome Disruption Syndrome, Massacres and Psychiatric Drugs
Guns Don't Kill People. Psychiatric *Drugs* Kill People!
Tiny URL for this page: http://tinyurl.com/PsychDrugsKill
Protect Children from Forced Psychiatric Drugging!

As a mother and physician, I am horrified at the massacre at the "gun free" Sandy Hook school in Connecticut, in a community I know well.[26] My condolences to all who have suffered so unimaginably.

Yet another tragedy to lay at the feet of Big Pharma and the corrupt regulators at the FDA they control occurred this week. It was frighteningly similar, but at an even more horrific level, to other tragic mass killings in recent years.

This incident is also being cynically spun as a "reason" to suspend the fundamental human right to self-defense, recognized by the Second Amendment. Perhaps an even more fundamental issue is the mayhem and destruction caused by unnecessary, wildly dangerous toxic molecules called, as a group, "Psychotropic Medication".

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These drugs kill. They induce thoughts, impulses and actions around death. Even the shamefully dishonest FDA has capitulated to reality and added the risk of suicide and homicide as "black box side effects" of these drugs. So have the government of Canada, Australia, the UK and New Zealand.

I know of no school, theater or mall massacre which was *NOT* linked to the shooter being on, or recently discontinuing, these dangerous medications. Often the medications were required by school or court authorities, or are otherwise forced upon families, trying to deal with children who have been previously damaged by the Genome Disruptions of dangerous vaccines.

Lay out the guns. Put them at the doorsteps of the schools. Line the students up in the cafeteria, classrooms, halls. The guns will not kill them. However, put those guns in the hands of GDS victims and the outcome can be horrendous.

These drug-addled, Genome Disrupted brains respond to neurotransmitters in literally lethal ways, brains whose impulsivity thresholds are lowered far more than alcohol can lower them, people whose ability to examine and evaluate their thoughts and impulses have been severely damaged by the poisonous drugs they have been given DO kill people.

[26] Later information suggests strongly that Sandy Hook was the site of a false flag hoax. I am not certain whether anyone, including Adam Lanza, was actually killed that day.
The point of this article is unchanged. When real shooters shoot, it generally involves psychiatric medication.

The evidence is clear from their use in the military.

As Maj. Gen. Bert Stubblebine (US Army Ret.), President of the Natural Solutions Foundation, has noted with horror, these are the same drugs, the use of which would have, two decades ago, taken soldiers off the front lines. Today, 20% or more of all combat soldiers now use them. How many war crimes are attributable to this dangerous psychiatric drugging? It is a further tragedy that so many soldiers and vets are killing themselves, reacting to the drugs they are given exactly as the "side effect" literature says. More than 70% of all vets are believed to be on these same drugs.

Half of all suicides in the United States occur when people are on these drugs, given out like PEZ candies: pop open the container, gulp one, two, three or more down rather than use sensible, safe and inexpensive options to assist people with overwhelming issues.

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Of course, unthinking physicians (but I repeat myself!) fail to read, understand and heed the FDA's Black box warnings, failing to identify the very symptoms they should be on the alert for as attributable to the drugs!

So when "side effects" occur, they are the trigger for more drugs, often a cocktail of death and despair.

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What are called "side effects" are often the symptoms of Genome Disruption Syndrome — the failure of the brain to properly process neurotransmitters because the brain has been damaged on a deep level, resulting in the accumulation of toxins and distorted proteins, the "plaque" seen in many degenerative brain conditions.

There is, in my opinion, absolutely no reason to write a drug prescription for someone with psychiatric or psychological symptoms and issues. And these drugs are being given out for reasons so trivial that it is hard to believe a thinking being is on the other end of the pen writing the prescription. Oh, sorry, generally they are NOT thinking beings. They are physicians who are NOT required to think, only to write prescriptions.

Harsh? Not really when you consider that every instance of psychotropic (psychoactive) medication is caused by a doctor or doctor substitute giving a prescription to a patient. The

patient makes a mistake which can be, quite literally, fatal and fills the prescription. Bad enough, but the next mistake compounds the situation in ways that could kill not only the patient, but everyone in his gun-sight: he takes the pill.

In almost 50 years of medical and psychiatric practice I have never found it necessary to write a prescription for a medication, psychiatric or otherwise.

We have better ways: NeuroBioFeedback, Orthomolecular Medicine, Yoga and Meditation, effective psychotherapy, detoxification, frequency medicine, acupuncture and more. They work. Since there are no toxins, they totally prevent brain damage from these toxins, they prevent suicides and homicides and they prevent the Genomic Disruption which leads to permanent brain damage, even after administration of the poison is stopped. The very genes are changed by these disastrous compounds. That is what I have identified as "Genome Disruption Syndrome" caused by what Foundation President, Maj. Gen. Bert Stubblebine (US Army, Ret.) has called the "Genomicidal Technologies," among which is the dangerous brew of psychiatric drugs linked to violent behavior.

So those pills kill the people behind the triggers and the people in front of them, as well.

Isn't it time to stop poisoning ourselves and our children? Isn't it time to tear up the prescription and look for healthy ways of becoming well? If we fail to stop this epidemic of deadly drugging, we will have to face the consequences in yet more violence, not just on the battlefield, but perhaps most tragically in the theaters, malls and even schools.

I believe it is time to act.

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Help us educate decision makers about this serious threat to Health Freedom.
Protect Children from Forced Psychiatric Drugging!
http://tinyurl.com/NoForcedDrugging
.
More information is in my GDS White Paper, which is a free download here:
http://www.healthfreedomusa.org/wp-content/uploads/GDS-White-Paper.3.1.pdf

www.GDS-therapy.com

March 6, 2014

Drug Free Psychiatry vs Murder by Prescription Pad

I have been practicing totally drug free psychiatry and medicine since my graduation from medical school in 1970 (Albert Einstein College of Medicine, NY). On my first day of medical school in 1966 my pharmacology professor revealed the astonishing fact that all drugs work by poisoning enzyme systems: if we like the results, we call it a therapeutic benefit. If we don't, we call it a side effect but, in truth, there are only cascades of side effects.

I made the personal decision that I would never, outside of an emergency room or surgical suite, use a substance that would poison the very engines of life (which is what our enzymes are) and would commit myself to finding better, safer, more effective ways to help people heal.

I did my post graduate training in Child, Adult, and Adolescent Psychiatry just as the multitude of drugs that made psychiatry a "real" [although highly fraudulent and massively dangerous] medical specialty was becoming available.

Shamefully, psychiatrists, doctors who should have known far better, since they were well trained in scientific method and deductive reasoning, were, at a profound ego and powerful financial levels, so desperate for recognition by other doctors, who spurned and scorned the entire branch of psychiatry and all of its practitioners, that the illustrious psychiatric profession raced to embrace every new ineffective, dangerous and debilitating drug they could get their prescription pads around.

Biological psychiatry was a fraud from the day it was born and continues to be so today.

There simply are no safe psychiatric drugs and there simply is no justification for their use in adults or children except for carefully created and manipulated willing gullibility on the parts of BOTH doctors and patients.

When the magician comes to town with his nostrums, colored hankies and magically appearing coins, the only reason people believe his deception is, fundamentally, because they want to.

Every patient who became worse on a psychiatric drug, but whose deterioration was rationalized as the indication for yet more medication was a victim of self-deception on the part of the doctor who allowed him/herself to be bullied by peer pressure and lulled by personal gain (more patients, more prescriptions, more pay, more perks). Self-deception and well-financed, beautifully orchestrated pharmaceutical deception.

Every child placed on drugs which inevitably change and damage the child is, in my opinion, the victim of a preventable crime.

Every suicide, homicide, school or workplace shooting in which the murderer was on psychoactive drugs was a *crime* perpetrated *not* by the weapon wielder, but by the person who wielded the pen and wrote the prescription pad. They are the victims of DSM: Diagnostic and Statistical Murder I-VII.

For shame. *For shame* because there are better, safer, natural ways.

They include the remarkably effective disciplines of Orthomolecular Medicine and Psychiatry, Environmental Medicine, NeuroRegulation (e.g., NeuroBioFeedback), nutritional intervention, detoxification, frequency medicine, essential oils, psychotherapy and similar effective paths to health, not deterioration and more toxic medications.

They work. Safely. Precisely, Gently. They work precisely because they support the body, the mind and the cohesive unit that they form called, by some, the soul.

How do I know? Because I have been using them successfully for nearly 50 years and teaching others to do the same.

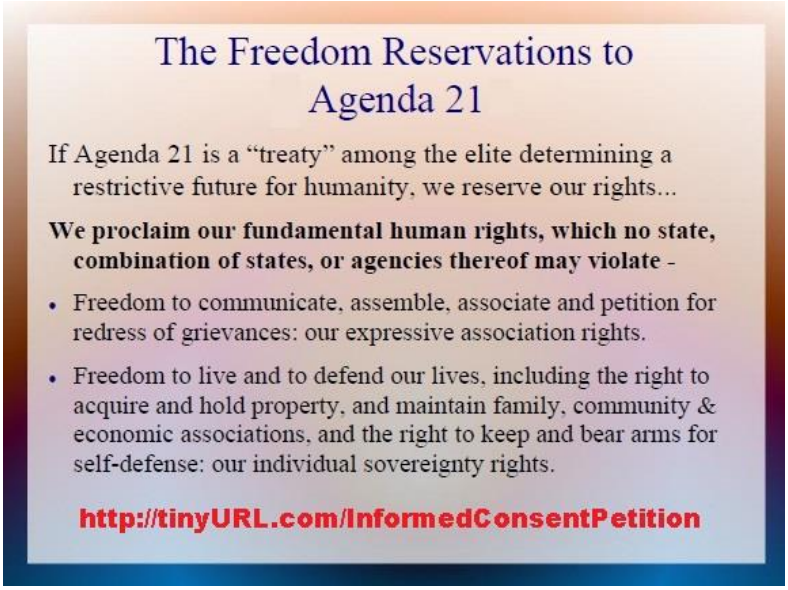
I buy my own coffee mugs, clip boards, pens and vacations, thank you. Big Pharma provides nothing for me but patients who are considered to have "failed their medication" and are looking for health and well-being without toxic chemicals.

As the Medical Director of the largest Health Freedom organization in the world, the Natural Solutions Foundation, www.DrRimaTruthReports.com, I make sure we offer people information on natural health options based on the premise that each of us owns our own bodies and has the inalienable right to make our own health choices (and, as parents, those of our children) including unhindered access to the free flow of information.

Government and industry conspire to suppress that information. The results are a society damaged in massive numbers by chemical mind altering substances of no real merit and a lot of very happy shareholders, doctors and executives.

I urge all conscientious health care providers, especially including my psychiatric colleagues, to join me in taking the *Health Keepers Oath* —www.HealthKeepersOath.org — pledging never to use our healing skills to oppress and suppress.

March 6, 2013
THE HORRORS OF THE AGENDA 21 MINDSET



Agenda 21 Immediate Action item! http://tinyurl.com/ReservingRights

Agenda 21 impacts our lives in many ways; some small, and some quite relentlessly horrid.

"Think globally; enslave locally."

The depopulation agenda focuses on intimate aspects of our lives, including health, schooling, protection, and the way we organize our communities.

Imagine what it would feel like to learn that your child had been shot at school. Then imagine sitting next to his hospital bed day after day praying that he did not die and wondering what life would hold for your child if your prayers were answered and he lived.

See my blog entry, http://tinyurl.com/PsychDrugsKill.

Mark Taylor's mother knows what we can only imagine.

Her son was shot at Columbine CO. And lived. And then told the world what he knew: that Eric Harris and Dylan Klebold were being sexually abused by adult authority figures, and placed on psychiatric drugs to control them. That there was a roof top shooter. That Harris and Klebold were just a small part of a huge pedophilia ring stretching from shore to shining shore, from the neighborhood to the greatest men and women in the land.

National News. International Reach. And then, one day, your son is imprisoned against his will and yours in a psychiatric hospital, involuntarily over medicated, poisoned with psychiatric drugs and separated from you through court order for no medical or rational reason.

And then imagine what it feels like when your child's doctor comes up to you in your church and, tears running down her face, tells you that she drugged your child because she was ordered to and that if you ever got him away, you and he should run – far.

And then imagine the nightmare of court-ordered corruption, the damage to your child's brain and body from court ordered psychiatric medications for years on end. Life-long harm.

But you keep on fighting for the truth and for your child. You write letters, send petitions, pray fervently. Then, one day, and international human rights organization contacts you and says, "Mother, you are right. Your boy has been the continuing victim of human rights abuse. He has been imprisoned and abused to silence him – and we will help!" We all must help!

Think that this nightmare could only happen to Mark Taylor and his family? Think again.

You can help support this brave family and read his story here at: www.FreeMarkTaylor.com.

And then make forced drugging a thing of the past, not a threat in your future. Click the following link, to help make sure that none of us ever faced forced drugging, vaccination or psychiatric abuse. Easily contact your representatives here: http://tinyurl.com/NoForcedDrugging.

By the way, Mark Taylor brought suit against Big Pharma and won. His case must have considerable merit, wouldn't you think? Yet he is being destroyed personally and physically by a government bent on … what? and willing to use whatever it has at hand to accomplish … what?

His mother, Donna, needs a Colorado lawyer to represent her in a hearing in a few weeks because she is too ill to continue representing herself on Mark's behalf. She also needs the money necessary to stay where Mark is so that he can have some contact with her. The stress of the situation has caused her to develop blood pressure problems and she is on disability.

And now imagine a world in which what is happening to Mark Taylor happens to anyone who speaks out, raises the wrong questions or the right ones once too many, does not go along to get along.

Welcome to the once and future world of Agenda 21 — a world without individual rights.

How does Mark Taylor's horrifying ordeal connect with Agenda 21?

Visit www.TRUTHAboutAgenda21.com to learn what Agenda 21 is and how it can make you into Mark Taylor once it is established securely enough.

Now, one last imagination for today: Imagine that you lived in a world where human rights prevailed and the "rights" of humans provided a harmonious balance with each other and the rest of the planet. What we call, *Agenda 1 – Freedom Reservation of Rights.*

That's where we are headed, with your help. Of course, what it takes is speaking out, informing everyone you can reach, mobilizing them to take the Action Items, subscribe to the Health Freedom Action eAlert here, www.DrRimaTruthReports.com , and making Agenda 21 quite literally, vaporize!

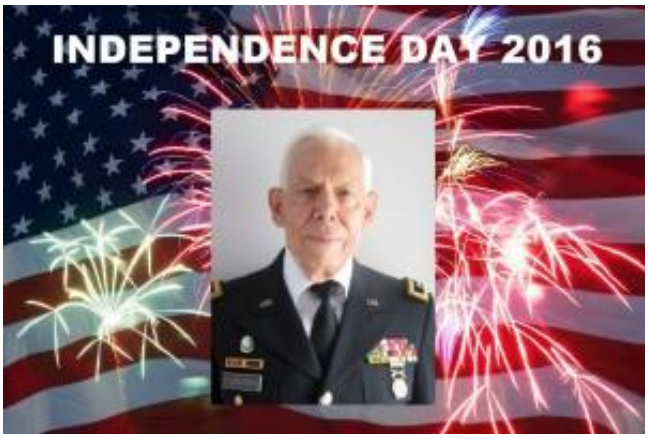
July 3, 2016

DRUGGED & MIND-CONTROLLED?

Prepare to be Shocked

I Do Not Believe Anyone Has Made

This Connection Before!



Share with this Link: http://drrimatruthreports.com/?p=29631

Independence Day. Seriously?

[Scroll Down for the eBook]

Dr. Rima Recommends CBD and Nano Silver 10 PPM for Real Independence

www.NSFmarketplace.com

Do we have anything to set off fireworks about if we've been tricked into adding mind control agents to our bodies to weaken our social bonds? The bad news is that it looks like that deceitful trick has been working since 1953. The good news is that we can end it right this minute: never use Acetaminophen again.

Here's the bottom line: Acetaminophen is a *mind control drug* (science, not conspiracy theory, I am afraid) that actually keeps fluoride, another mind control drug, in our bodies longer.

The net result? Apathy, lack of empathy, lowered IQs and docility on the one hand and a need for ever-increasing stimulation to generate the urgently-needed brain chemicals we depend upon for life.

.

What if I told you the usual gang of suspects is behind it all and gave you proof?

Well, scroll down below to read or to download my gift eBook to you this Independence Day. With dozens of references, you will find shocking information that you need to know.

And, oh, by the way, the really good news is that you do not need acetaminophen when you've got CBD's on board! Find CBDs here:www.NSFmarketplace.com

While you're at it, throw something extra into the kitty to help keep Natural Solutions Foundation bringing you information like this! Give generously here: http://drrimatruthreports.com/action/donate/

Thanks.
Yours in health and freedom,

General Bert

Below you can get a free copy of the eBook. If you are not already on our email list, or if you haven't received a newsletter in a while (yes, we get blocked!), please enter your information into the contact form so we can stay in touch, and remember to like us on Facebook: https://www.facebook.com/NaturalSolutionsFoundation/

Assert Your Right to Informed Consent

APPENDIX

More Information

Comprehensive list of Warning Label requirements through 2008 in the US, Australia, UK and New Zealand through 2008: http://www.cchr.org/sites/default/files/International_Warnings_on_Psychiatric_Drugs_Suicide_Homicide.pdf

Drugs associated with Violent Behavior. A 2010 study reported that 484 drugs that accounted for 780,169 serious adverse event reports of all kinds, including 1,937 cases meeting the violence criteria determined by the researchers. There were 387 reports of homicide, 404 physical

assaults, 27 cases indicating physical abuse, 896 homicidal ideation reports and 223 cases described as violence-related symptoms.
Besides Pfizer's Chantix, 11 antidepressants, three ADHD meds and five hypnotics or sedatives were linked to 79 percent of the violence cases.
Thomas J. Moore, Joseph Glenmullen, Curt D. Furbert, "Prescription Drugs Associated with Reports of Violence Towards Others," Public Library of Science ONE, Vol. 5, Iss. 12, December 2010.

Studies on Psychiatric Drugs and Violence, Selected Bibliography 1995-2011.

Here is a selection of studies from various countries on psychiatric drug-induced violence, homicidal ideation/actions, aggression, mania/psychosis, and hostility:

1. **United States, February 22, 2011:** The Journal of Clinical Psychiatry published a study where researchers found that, across all disorders, **overall suicidality incidence was similar between** Paroxetine (**Paxil**) **and placebo.** In addition, **a higher frequency of suicidal behavior** occurred with Paroxetine (**Paxil**) in treatment of major depressive disorder.[27]
2. **France, June 07, 2011**: A study published in the European Journal of Clinical Pharmacology found that "...**benzodiazepines** and **[antidepressants** that affect serotonin] are the main pharmacological classes able to induce **aggressive behavior**."[28]
3. **United States, December 01, 2010:** A study in PLoS One took the Food and Drug Administration's Adverse Event Reporting System data, and extracted all "serious adverse event" reports for drugs with 200 or more cases received from 2004 through September 2009. Of the 484 drugs identified, 31 drugs were disproportionately associated with **violence.** These drugs, accounting for 79% of all the violence cases, including **11 antidepressants, 6 sedative/hypnotics and 3 drugs for attention deficit hyperactivity disorder**. The specific cases of violence included: **homicide, physical assaults, cases indicating physical abuse, homicidal ideation, and cases described as violence-relates symptoms.[29]**
4. **United States, April 14, 2010**: A study published in the Journal of the American Medical Association concluded that some anti-anxiety drugs have a higher risk of suicidal acts/**violent deaths** then others. They also acknowledge that anti-anxiety drugs in general can have psychotropic effects, including **mood and behavior changes**.[30]
5. **Canada, May 01, 2010:** The Archives of General Psychiatry published a study that compared the **risk of suicide and suicide attempts** associated with specific antidepressants. After reviewing Canadian health care records, they found equal event rates across antidepressant agents (such as **Paxil**), which supports the U.S. FDA's decision to treat all antidepressants alike in their advisory on antidepressants **increasing the risk of suicidal thoughts and behavior.** [31]
6. **Canada, April 12, 2010:** A study published in Pediatrics was done on 20,906 children from British Columbia (BC), who were new users of antidepressants, of which 16,777 (80%) had never used an

[27] David J. Carpenter, MSc, PharmD, et al., "Meta-Analysis of Efficacy and Treatment-Emergent Suicidality in Adults by Psychiatric Indication and Age Subgroup Following Initiation of Paroxetine Therapy: A Complete Set of Randomized Placebo-Controlled Trials," Journal of Clinical Psychiatry, February 22, 2011.
[28] [1] Nadege Rouve, Haleh Bagheri, *et al.*, "Prescribed drugs and violence: a case/noncase study in the French PharmacoVigilance Database," European Journal of Clinical Pharmacology, June 7, 2011.
[29] Thomas J. Moore, Joseph Glenmullen, Curt D. Furbert, "Prescription Drugs Associated with Reports of Violence Towards Others," Public Library of Science ONE, Vol. 5, Iss. 12, December 2010.
[30] Elisabetta Patorno, et al., "Anticonvulsant Medications and the Risk of Suicide, Attempted Suicide, or Violent Death," Journal of the American Medical Association, Vol. 303, No. 14, April 14, 2010.
[31] Sebastian Schneeweiss, MD, et al., "Variation in the Risk of Suicide Attempts and Completed Suicides by Antidepressant Agent in Adults," Archives of General Psychiatry, Vol. 67, No. 5, May 2010.

antidepressant before. The children were aged 10 to 18, and had a recorded diagnosis of depression. During the 9-year study period, the **suicide risk** among all BC kids aged 13 to 17 averaged 0.052 suicide deaths per 1,000 people. **The rate of suicides that the authors observed after initiation of antidepressant use was 5 times higher.** The authors concluded: **"Our analysis supports the decision of the Food and Drug Administration to include all antidepressants [such as Paxil] in the black box warning regarding increased suicidality risk for children and adolescents initiating use of antidepressants."**[32]

7. **United States, February 1, 2009:** The journal Pediatrics published a study that found spontaneous case reports of patients treated for ADHD with amphetamine/dextroamphetamine (**Adderall**), atomoxetine (**Straterra**), or Methylphenidate (**Ritalin/Concerta/Daytrana**) indicated a likely causal association between each of the drugs and treatment-emergent onset of signs and symptoms of **psychosis** or **mania,** notably hallucinations, in some patients. The authors concluded, "Patients and physicians should be aware that **psychosis** or **mania** arising during drug treatment of attention-deficit/hyperactivity disorder may represent adverse drug reactions."[33]
8. **United Kingdom, November 01, 2006:** The British Journal of Psychiatry published a study that found **five percent of children taking antidepressants (such as Paxil) were involved in self-harm or suicidal events, compared with three percent of those taking dummy pills.** [34]
9. **United Kingdom, September 01, 2006:** A study published in Public Library of Science Medicine determined that **newer antidepressants** could increase the **risk of violence in people taking them.** They looked specifically at GlaxoSmithKline's **Paxil** and concluded the drug raises the **risk of severe violence** in some people.[35]
10. **United States, August 01, 2006:** The Archives of General Psychiatry published a study which found that **children taking newer antidepressants like Paxil, were 1.52 times more likely to attempt suicide and 15 times more likely to succeed in the attempt than those not taking the drugs.**[36]
11. **United Kingdom, August 22, 2005:** The journal BMC Medicine published a study that reported, "The data strongly suggests that the use of SSRIs [newer antidepressants] is connected with an increased intensity and suicide attempts per year." It also found that **Paxil was 7 times more likely to induce suicide in people taking it than those taking placebo.**[37]

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[32] Sebastian Schneeweiss, et al., "Comparative Safety of Antidepressant Agents for Children and Adolescents Regarding Suicidal Acts," Pediatrics, April 12, 2010.

[33] Andrew D. Mosholder, MD, MPH, et al, "Hallucinations and Other Psychotic Symptoms Associated With the Use of Attention-Deficit/Hyperactivity Disorder Drugs in Children," Pediatrics, Vol. 123, No. 2, pp. 611-616, February 2009.

[34] Bernadka Dubicka MD, Sarah Hadley MSc and Christopher Roberts PhD, "Suicidal behaviour in youths with depression treated with new-generation antidepressants – Meta-analysis," British Journal Of Psychiatry, Vol. 189, November 2006.

[35] Healy M.D., David, Herxheimer, Andrew, Menkes, David B., "Antidepressants and Violence: Problems at the Interface of Medicine and Law," Public Library of Science Medicine, September 2006.

[36] : Mark Olfson, MD, MPH, et al., "Antidepressant Drug Therapy and Suicide in Severely Depressed Children and Adults," The Archives of General Psychiatry, Vol. 63, August 2006.

[37] Ivar Aursnews, et al., "Suicide attempts in clinical trials with Paroxetine randomized against placebo," BMC Medicine, August 22, 2005.

12. **United States, September 01, 2004**: A study in the journal Pediatrics revealed that 33% of the patients they studied that were exposed to Atomoxetine **(Strattera) exhibited** extreme irritability, **aggression, mania or hypomania [mild-mania]**.[38]
13. **United States, August 20, 2004:** A Columbia University review of the pediatric clinical trials of Sertraline, Citalopram, Venlafaxine, Bupropion**,** Paroxetine (**Paxil**), Fluoxetine, Fluvoxamine, Nefazodone and Mirtazapine found that **young people who took them could experience suicidal thoughts or actions**. Dr. Tarek Hammand of the FDA's Division of Neuropharmacological Drug Products performed an analysis based on the Columbia University review, and stated that his analysis also "…indicates a statistically significant association of suicidal events with antidepressant drug treatment in short-term pediatric clinical trials for all indications." [39]
14. **United States, January 26, 2004:** Drug Safety Research issued a special report **on newer antidepressants** that concluded, "The higher than expected numbers of suicidal and **aggressive behaviors** observed in some clinical trials of **antidepressants** in children also can be seen in spontaneous adverse event …. The data show that suicidal/**aggressive**
15. **behaviors** are reported in both adults and children, but more than twice as often in children."[40]

16. **United States, May 01, 2003:** GlaxoSmithKline submitted a report to the FDA that showed that **children given Paxil** (Paroxetine) were **more likely to become suicidal than those given placebos. It also showed that the drug did not improve their depression any better than placebo.**[41]

17. **United States, January 01, 2001:** The Journal of Clinical Psychiatry published a study where the authors found that a significant proportion of psychiatric hospitalizations they reviewed were due to **antidepressant** associated **psychotic or manic symptoms**.[42]

18. **United States, July 01, 1997**: In a Journal of Clinical Psychiatry study, Dr. John Zajecka reported that discontinuation [withdrawal] symptoms after treatment with **Prozac** can cause **"aggressiveness and suicidal impulsivity."**[43]

19. **United Kingdom, December 01, 1995:** In the British journal The Lancet, Dr. Miki Bloch of the National Institute of Mental Health and colleagues gave a report on **patients who became suicidal and homicidal after stopping Paxil, including one man who was distraught over thoughts of harming "his own children."**[44]

20. **1991 FDA hearings into antidepressants causing suicide and violence**
http://www.youtube.com/cchrint#p/c/B9EA75455D155D89/6/FxJomeak4V4

21. **Fox National News Special Report's from Douglas Kennedy Deadly Drugs –**
http://www.youtube.com/watch?v=9S-7aNPf33A

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[38] Theodore A. Henderson, M.D., Ph.D. and Keith Hotman, M.D., "Aggression, Mania, and Hypomania Induction Associated with Atomoxetine," Pediatrics, Vol. 114, No. 3, September 2004.
[39] "Follow-up Consult of August 16, 2004 by Andrew Mosholder on Suicidality in pediatric clinical trials with Paroxetine and other antidepressant drugs," letter from the Office of Drug Safety, August 16, 2004.
[40] Thomas J. Moore, "Antidepressant Drugs and Suicidal/Aggressive Behaviors," Drug Safety Research - Special Report, Washington, D.C., January 26, 2004.
[41] Gardiner Harris, "Antidepressant Study Seen to Back Expert," The New York Times, August 20, 2004.
[42] Adrian Preda, MD., et al., "Antidepressant-Associated Mania and Psychosis Resulting in Psychiatric Admissions," Journal of Clinical Psychiatry, Vol. 62, No. 1, January 2001.
[43] J. Zajecka, K. Tracy, and S. Mitchell, "Discontinuation Symptoms After Treatment with Selective Serotonin Reuptake Inhibitors: A Literature Review," Journal of Clinical Psychiatry, Vol. 58, July 1997.
[44] M. Bloch, S. V. Stager, A.R. Braun and D. R. Rainbow, "Severe Psychiatric Symptoms Associated with Paroxetine Withdrawal," The Lancet, Vol. 346, December 1995.