WHEN WILL WE REALIZE THAT CERTAIN DRUGS CAUSE MASS MURDERS TO STRIKE

List of recent mass murders taking aim - depression drugs

1. Dr. Luis, West Islip - January 15, 2012 - 7-year-old Gabriel Johnson swallowed the contents of a medicine bottle and died. The medicine bottle contained the antidepressant Prozac, which is often prescribed for children.

2. Tennessee: October 24, 2011 - A 4-year-old girl in Tennessee was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

3. Connecticut: December 14, 2012 - A 15-year-old girl in Connecticut was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

4. Illinois: September 22, 2013 - A 12-year-old girl in Illinois was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

5. Florida: February 13, 2013 - A 14-year-old girl in Florida was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

6. California: September 1, 2011 - A 15-year-old girl in California was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

7. Texas: December 13, 2014 - A 12-year-old girl in Texas was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

8. New York: April 18, 2014 - A 14-year-old girl in New York was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

9. Ohio: February 1, 2013 - A 16-year-old girl in Ohio was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

10. Michigan: September 21, 2012 - A 15-year-old girl in Michigan was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

11. Georgia: February 1, 2013 - A 14-year-old girl in Georgia was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

12. Florida: April 18, 2014 - A 14-year-old girl in Florida was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

13. New Jersey: October 15, 2013 - A 15-year-old girl in New Jersey was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

14. Massachusetts: March 8, 2012 - A 15-year-old girl in Massachusetts was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

15. Pennsylvania: June 28, 2013 - A 16-year-old girl in Pennsylvania was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

16. New York: March 1, 2012 - A 15-year-old girl in New York was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

17. Ohio: September 21, 2012 - A 15-year-old girl in Ohio was found dead with antidepressants in her system. It is suspected that the antidepressant may have contributed to her death.

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Sandy Hook shooter, Adam Lanza, was on anti-depressants and the Orlando shooter was also unsurprisingly and probably taking only antidepressants.
Guns Don't Kill People

People on SYNthetic Medication Kill People
But a Prozac user can be different. His reality check is interfered with. In his new reality it is logical to kill for the simplest of reasons. The shooter in Montreal said that there was too many girls in his engineering class. Normal people would choose other ways to handle such a conflict. The fact that these mass murders have little sweat or nervous reaction gives us proof of the pharmacological nature of this tragedy.

The problem is not the mental disease, but the illogical cure. Once again the synthetic pharmacology Industry has focused on the symptom (depression) and the sales. The side effects are observed most often too late. This letter contains the explanation for the recent catastrophe.

But for over a year now this letter is not published by anyone. The Media has been bought. The world media is not doing its job. The media has been bought and is controlled by the big corporations like Big Pharma.

Now the new research shows that Prozac is no better than a placebo in treating depression. This story is a better one to remove Prozac from the market. The exposure of deaths would not only continue the legal attack on damages that Big Pharma is occurring, Vioxx, DES, anti-cholesterol drugs, heart medications and a host of others. There is an ever growing awareness of just how much of a problem the incompatible synthetic pharmaceuticals are. This is a most vital story to tell, and tremendous cover up and conspiracy of the drug company.

But there is a larger story. The entire world press is bought and will not cover stories like this, will not cover stories of the international pedophile cartel, will not cover stories of Equal Economic Education, will not cover the angel. The greatest news story is that the news is not the news. Big Money and large corporations filter the news and they control the dribble of what we see. Every journalist should be ashamed, is there not one of them willing to step forward with honesty and integrity.

This letter must not be suppressed. This treatise requires more in-depth evaluation that cannot honestly be done from inside the Chemical companies. Please give this correspondence the proper treatment and allow others to read it.

Professor Desire Dubount

the Sexual Warrior

Witch
Top Ten Legal Drugs Linked to Violence

By Maia Szalavitz Jan. 07, 2011

When people consider the connections between drugs and violence, what typically comes to mind are illegal drugs like crack cocaine. However, certain medications — most notably, some antidepressants like Prozac — have also been linked to increase risk for violent, even homicidal behavior.
As WND has reported, Charleston church shooter Dylann Roof was a known drug user who was caught with the powerful mind-altering narcotic Suboxone when apprehended by police during an incident on Feb. 28.

Suboxone is used to treat addiction to opioid drugs such as heroin. Its adverse effects include anxiety, irritability, depersonalization, confusion, suicidal thoughts and irrational, sometimes violent behavior.

Other drugs linked to mass killers have more often been geared toward treating mental illness. According to a data set of U.S. mass shootings from 1982-2012 prepared by Mother Jones magazine, of 62 mass shootings carried out by 64 shooters, the majority of the shooters (41) were noted to have signs of possible mental illness — the precise kinds of mental illnesses that psychotropic medications are prescribed for.

It is a well-documented fact that in the 1980s, a shift occurred in the direction of treating the mentally ill. Rather than institutionalize them, the preferred method was to “mainstream” them, encouraging them to function in society while being treated with a mind-numbing array of new anti-depressants being developed by the pharmaceutical industry.

WND has compiled a list of killings committed by persons who had used mind-altering drugs or recently come off of them at the time of their crimes:
Bradley Stone, a former Marine in suburban Philadelphia, shot and killed his ex-wife Nicole Stone, her mother and her grandmother, and he "chopped" Nicole’s sister, her husband and their 14-year-old daughter to death with an ax. Nicole Stone’s 17-year-old nephew was the lone survivor of the three-home massacre. Stone was being treated for mental health issues. After the six slayings, he committed suicide with a lethal mixture of depressants, antidepressants and schizophrenia medications, his autopsy revealed. Police found Bradley Stone’s body in the woods a week before Christmas, 2014, a day after he killed his six victims, police told the New York Daily News.

Aaron Ray Ybarra, 26, of Mountlake Terrace, Washington, allegedly opened fire with a shotgun at Seattle Pacific University in June 2014, killing one student and wounding two others. Ybarra said then he “feels he identifies with one of the Columbine killers, whom he identified as Eric Harris,” counselor Deldene J. Garner wrote later in a chemical dependency assessment filed in Edmonds Municipal Court. Ybarra had been referred to the counselor following his arrest in July 2012 for driving drunk on an Edmonds sidewalk. He reported “being diagnosed with Psychosis and Obsessive Compulsive Disorder,” the report said. On occasion, "voices scared him," Ybarra told the counselor. He said he’d been prescribed with Prozac and Risperdal to help him with his problems.

Jose Reyes, the Nevada seventh-grader who went on a shooting rampage at his school in October 2013 was taking a prescription antidepressant at the time, and had told a psychotherapist that he was teased at school, the Associated Press reported. Reyes, 12, opened fire Oct. 21 at Sparks Middle School, killing a teacher and wounding two classmates before committing suicide. His doctor had prescribed 10 mg of Prozac once daily, according to police reports. Toxicology reports indicated that at the time of autopsy the suspect had a generic form of Prozac, Fluoxetine in his system consistent with the prescription given.
- **Adam Lanza**, the 20-year-old shooter who killed 20 students and six adults at Sandy Hook Elementary School on Dec. 14 in Newtown, Connecticut, had been prescribed several psychiatric drugs, including Fanapt, a controversial anti-psychotic medicine, the Business Insider reported. “Fanapt is one of a many drugs the FDA pumped out with an ability to exact the opposite desired effect on people: that is, you know, inducing rather than inhibiting psychosis and aggressive behavior,” Business Insider reported.

- Reno Hospital shooter **Alan Oliver Frazier**, 51, killed his doctor and wounded one other person before killing himself in December 2013 in Reno, Nevada. Frazier took Prozac but didn’t like being dependent on the medication and would sometimes stop using it, his ex-girlfriend told the Associated Press.

- Navy Yard shooter **Aaron Alexis** sprayed bullets at office workers and in a cafeteria on Sept. 16, 2013, killing 13 people including himself. Alexis had been prescribed Trazadone by his Veterans Affairs doctor. Trazadone is a generic antidepressant that is seldom used anymore to treat depression but is widely prescribed for insomnia, experts told the Washington Post.

- **James Holmes** killed 12 people and wounded 58 in the July 20, 2012, tragedy in Aurora, Colorado. Thirty-eight days before the attack, the psychiatrist treating suspect James Holmes told a police officer that her patient had confessed homicidal thoughts and was a danger to the public, according to court documents unsealed in April 2013 and reported on by the Denver Post. The psychiatrist, Dr. Lynne Fenton, also told the officer that Holmes had stopped seeing her and had been threatening her in text messages and e-mails, the documents state. The officer, Lynn Whitten, responded by deactivating Holmes’ key-card access to secure areas of University of Colorado medical campus buildings, according to search-warrant affidavits. Police found medications in his apartment, including sedatives and the anti-anxiety drug clonazepam. They also found the antidepressant sertraline, the generic version of the antidepressant Zoloft.

- A 20-year-old woman accused of opening fire and shooting three people in a Gig Harbor, Washington, grocery was charged with murder in October 2012, after one of the victims died. Laura Sorenson appeared in Pierce County Superior Court, where prosecutors filed a charge of first-degree murder against her two months after the death of David Long, 40. Sorenson is accused of walking into the Peninsula Market just before 1 p.m. on Aug. 11, 2012 and firing at customers until she was tackled to the ground. Witnesses told police that Sorenson said something about “killing”
people prior to pulling out a revolver from her purse and firing four to five shots. After the shooting, Sorenson revealed to detectives she has a mental condition and is on medication, court documents said, adding she wanted to kill herself and wanted to know what it felt like to kill someone else first, the Komo News reported.

- The mentally ill gunman who killed a worker and wounded several others at a University of Pittsburgh Medical Center psychiatric hospital in March 2012 had previously threatened staff at an affiliated hospital with a baseball bat. Medical records and other information show 30-year-old John Shick, held a grudge, believing he had misdiagnosed illnesses ranging from a bad ankle to pancreatitis to erectile dysfunction, Allegheny County District Attorney Stephen Zappala Jr. said. Shick twice went to UPMC Shadyside hospital in February with the bat and threatened the staff, and yet Pittsburgh police were not called, Zappala told the Associated Press. Zappala said investigators hadn’t yet determined why Shick targeted UPMC’s Western Psychiatric Institute and Clinic, where he was treated twice after he was kicked off the Duquesne University campus for harassing female students with repeated requests for dates. At the second visit, a clinic doctor urged Shick to resume medication for schizophrenia — after his mother told doctors he stopped taking it months before. Shick walked out and skipped a follow-up appointment in December. “His contacts at UPMC began to get more serious and disturbing after that,” said Deputy District Mark Tranquilli, who handles homicide cases for Zappala. In Shick’s apartment, investigators found 43 drugs used to treat 20 conditions, from anti-depressants to medicines for intestinal worms.

- Mohamed Merah fell in a hail of bullets in a March 22, 2012 raid after shooting seven people at a Jewish school in Toulouse, France, after telling police who sought his surrender that he regretted not “going back to the Jewish school” which would have enabled him to kill more children, according to comments reported by the French newspaper Journal du Dimanche. Merah had been prescribed psychotropic drugs and sleep aides “to calm his stress,” a doctor said.

- It was reported in March 2012 that Staff Sgt. Robert Bales had killed 15 innocent civilians in Afghanistan, a horrific crime that men in his unit said went beyond the pale even for someone suffering from PTSD. It was later revealed by his wife that Bales was being treated with anti-depressants. She and her husband were both on antidepressants, “as is the rest of the army population….okay maybe not everyone. Just the ones that have been in for several years now, the ones who will actually admit when things are really screwed up,” she told the Daily Beast.
Anders Breivik, known as Norway’s “laughing gunman,” killed 77 people, many of them children, in 2011. Norway officials amassed pages and pages of analysis of the horrific crime, but almost nobody noticed that the smirking Breivik was taking large quantities of mind-altering chemicals, the Daily Mail reported. In this case, the substances are an anabolic steroid called stanozolol, combined with an amphetamine-like drug called ephedrine, plus caffeine. The authorities and most of the media were more interested in his non-existent belief in fundamentalist Christianity, the Mail reported.

Anabolic steroids were also used heavily by David Bieber, who killed one policeman and tried to kill two more in Leeds, England, in 2003, and by Raoul Moat, who last summer shot three people in Northumberland, killing one and blinding another. Steroids are strongly associated with mood changes, uncontrollable anger and many other problems.

Jeff Weise, culprit of the 2005 Red Lake High School shootings, had been taking “antidepressants.”

Columbine mass-killer Eric Harris was taking Luvox – like Prozac, Paxil, Zoloft, Effexor and many others, a modern and widely prescribed type of antidepressant drug called selective serotonin reuptake inhibitors, or SSRIs. Harris and fellow student Dylan Klebold went on a hellish school shooting rampage in 1999 during which they killed 12 students and a teacher and wounded 24 others before turning their guns on themselves. Luvox manufacturer Solvay Pharmaceuticals concedes that during short-term controlled clinical trials, 4 percent of children and youth taking Luvox – that’s 1 in 25 – developed mania, a dangerous and violence-prone mental derangement characterized by extreme excitement and delusion.

Patrick Purdy went on a schoolyard shooting rampage in Stockton, California, in 1989, which became the catalyst for the original legislative frenzy to ban “semiautomatic assault weapons” in California and the nation. The 25-year-old Purdy, who murdered five children and wounded 30, had been on Amitriptyline, an antidepressant, as well as the antipsychotic drug Thorazine.

Kip Kinkel, 15, murdered his parents in 1998 and the next day went to his school, Thurston High in Springfield, Ore., and opened fire on his classmates, killing two and wounding 22 others. He had been prescribed both Prozac and Ritalin.

In 1988, 31-year-old Laurie Dann went on a shooting rampage in a second-grade classroom in Winnetka, Ill., killing one child and wounding six. She had been taking the antidepressant Anafranil as well as Lithium, long used to treat mania.
• In Paducah, Kentucky, in late 1997, 14-year-old **Michael Carneal**, son of a prominent attorney, traveled to Heath High School and started shooting students in a prayer meeting taking place in the school's lobby, killing three and leaving another paralyzed. Carneal reportedly was on Ritalin.

• In 2005, 16-year-old **Jeff Weise**, living on Minnesota's Red Lake Indian Reservation, shot and killed nine people and wounded five others before killing himself. Weise had been taking Prozac.

• 47-year-old **Joseph T. Wesbecker**, just a month after he began taking Prozac in 1989, shot 20 workers at Standard Gravure Corp. in Louisville, Kentucky, killing nine. Prozac-maker Eli Lilly later settled a lawsuit brought by survivors.

• **Kurt Danysh**, 18, shot his own father to death in 1996, a little more than two weeks after starting on Prozac. Danysh’s description of own his mental-emotional state at the time of the murder is chilling: “I didn’t realize I did it until after it was done,” Danysh said. “This might sound weird, but it felt like I had no control of what I was doing, like I was left there just holding a gun.”

• **John Hinckley**, then age 25, took four Valium two hours before shooting and almost killing President Ronald Reagan in 1981. In the assassination attempt, Hinckley also wounded press secretary James Brady, Secret Service agent Timothy McCarthy and policeman Thomas Delahanty.

• **Andrea Yates**, in one of the most heartrending crimes in modern history, drowned all five of her children – aged 7 years down to 6 months – in the family bathtub near Houston. Insisting inner voices commanded her to kill her children, she had become increasingly psychotic over the course of several years. At her 2006 murder re-trial (after a 2002 guilty verdict was overturned on appeal), Yates’ longtime friend Debbie Holmes testified: “She asked me if I thought Satan could read her mind and if I believed in demon possession.” And Dr. George Ringholz, after evaluating Yates for two days, recounted an experience she had after the birth of her first child: “What she described was feeling a presence ... Satan ... telling her to take a knife and stab her son Noah.” Ringholz said, adding that Yates’ delusion at the time of the bathtub murders was not only that she had to kill her children to save them, but that Satan had entered her and that she had to be executed in order to kill Satan. Yates had been taking the antidepressant Effexor. In November 2005, more than four years after Yates drowned her children, Effexor manufacturer Wyeth Pharmaceuticals quietly added “homicidal ideation” to the drug’s list of “rare adverse events.”
Christopher Pittman murdered his grandparents at age 12 and was sentenced to 30 years, a punishment his defenders said was excessive for someone his age who was being given heavy doses of anti-depressants leading up to the shooting.

- **12-year-old Christopher Pittman** struggled in court to explain why he murdered his grandparents, who had provided the only love and stability he'd ever known in his turbulent life. "When I was lying in my bed that night," he testified, "I couldn't sleep because my voice in my head kept echoing through my mind telling me to kill them." Christopher had been angry with his grandfather, who had disciplined him earlier that day for hurting another student during a fight on the school bus. So later that night, on Nov. 28, 2001, he shot both of his grandparents in the head with a .410 shotgun as they slept, then burned down their South Carolina home, where he had lived with them. "I got up, got the gun, and I went upstairs and I pulled the trigger," he recalled. "Through the whole thing, it was like watching your favorite TV show. You know what is going to happen, but you can't do anything to stop it." Pittman's lawyers would later argue that the boy had been a victim of "involuntary intoxication." They said his 30-year sentence was excessive for someone his age and claimed the "heavy doses of anti-depressants he was taking sent his mind spinning out of control." Doctors had him on Paxil and Zoloft just prior to the murders. Paxil's known "adverse drug reactions" – according to the drug's FDA-approved label – include "mania," "insomnia," "anxiety," "agitation," "confusion," "amnesia," "depression," "paranoid reaction," "psychosis," "hostility," "delirium," "hallucinations," "abnormal thinking," "depersonalization" and "lack of emotion," among others.

The preceding examples are some of the best-known offenders who had been taking prescribed psychiatric drugs before committing their violent crimes — there are many others logged at SSRIS Stories: Anti-Depressant Nightmares.
Orlando shooter spent last days researching anti-psychotic drugs

Omar Mateen, the man who murdered 49 people and wounded 53 in Orlando, Florida, may have spent his final days feeling his mind slip. An acquaintance says that Mateen had drastically changed his appearance the day before the massacre.

Trends Orlando nightclub massacre
The morning before Mateen opened fire at Pulse, an LGBT nightclub, an acquaintance claims that he was behaving strangely. An unidentified source told Reuters that Mateen had shaved his head and face and “didn’t seem himself.”

The acquaintance was familiar with Mateen as a resident at the PGA Village in Port St. Lucie, Florida, where Mateen worked as a security guard for G4S. The resident explained that he had passed Mateen several times a week and had exchanged small talk with him for the past three years.

Three weeks prior to the attack, Mateen appeared to behave erratically. When the PGA Village resident asked if he was alright, he said Mateen told him that he had spent the night researching psychiatric mediation.

“He’d been real worried about whether or not he’d slipped into psychosis,” the source told Reuters. “He wasn’t as friendly. He was obsessed with researching medication online.”
Orlando shooter, US military Fort Hood shooter each linked to psychiatric medicine

(NaturalNews) US Military Main Nidal Malik Hasan shot and killed thirteen folks and wounded 30 others in a violent assault at a Texas Military base this previous week. He reportedly opened hearth on the Fort Hood military base with none explicit motive or motivation. In reality, as a psychiatrist, he had endorsed many different troopers on how to deal with the results of utmost violence (dropping limbs, psychological anguish, and so forth.).

As a military psychiatrist, he was additionally allowed to prescribe highly effective psychiatric medication to each his sufferers and himself. Many psychiatrists self-medicate, and Hasan was extraordinarily anxious about the opportunity of being despatched abroad by the military, in accordance with statements from relations (Reuters, under). Though official affirmation will in all probability by no means be made, it appears altogether doubtless that Hasan was treating himself with highly effective psychotropic medicines.

The mainstream media, not surprisingly, has totally failed to boost this query. But it surely’s being raised by unbiased media like Jail Planet (http://www.prisonplanet.com/was-fort-hood-ki…), the place author Paul Joseph Watson says, “Psychiatrists have a historical past of ‘self-remedy’ due to the straightforward entry they should psychotropic medication. In nearly each main mass capturing over the previous 20 years, since anti-depressant medicine grew to become well-liked, the killer has been on SSRI’s – serotonin reuptake inhibitors.”

An informative article in The Examiner additionally asks the identical query: Was Main Hasan on thoughts-altering prescription drugs when he opened hearth? (http://www.nottheexaminer.com/x-8358-Detroit…).

In the meantime, a examine within the journal Psychotherapy and Psychosomatics reveals that sixteen% of psychiatrists self-medicate (http://www.cchrint.org/2009/eleven/05/was-fort-h…).

Given all of the psych medication linked to such acts in earlier shootings, such a hyperlink appears not solely in all probability, however probably.
It has been a busy week for violent, drug-induced outbursts within the USA. Orlando shooter Jason Rodriguez is now confirmed to have been on psychiatric drugs when he went on a capturing spree in an Orlando workplace constructing final week, killing one individual and wounding 5 others.

In a televised interview with Fox Information, the previous mom-in-regulation of Rodriguez goes on the document saying, “He was beneath remedy …for management of the mind.” That video phase is accessible right here:

Thoughts-altering drugs made Rodriquez “paranoid,” she explains.
(http://www.foxnews.com/story/zero,2933,572605,zero…)

This paranoia and appearing out of violence towards others is a traditional facet impact of SSRI medicine usually used to “deal with” melancholy. These highly effective, thoughts-altering medicines have been linked to almost each main taking pictures that has taken place in the USA over the past twenty years, together with the Columbine, Colorado college shootings.

Hearken to my hip-hop track, SSRIs – S.S.R.Lies, which explains extra:
http://www.naturalnews.com/SSRIs_S_S_R_Lies….

What’s clear about each the Orlando capturing and the Fort Hood capturing is that there is a psychiatric drug connection to each. Neither of these males was appearing rationally. One thing “flipped a swap” of their brains. That one thing was nearly definitely a psychiatric drug.

Till we halt the chemical holocaust being perpetrated towards our world by the psychiatric drugging trade, we’ll proceed to see extra of these violent, drug-induced shootings happen. Rely on it. Psych medication trigger violence. And the extra psych medication are prescribed, the extra violence we’ll see.

In accordance with Medwatch statistics, sixty three,000 individuals within the U.S. have dedicated suicide whereas on antidepressant medicine (that is greater than ten instances the variety of Individuals who’ve died from H1N1 swine flu, by the way in which).
(http://www.naturalnews.com/022930_drugs_anti…)
The mainstream media completely refuses to let you know the reality concerning the hyperlink between psychiatric medication and violent killings, however it’s the plain connection in almost each single capturing that is taken place in latest reminiscence: The Virginia Tech capturing (http://www.naturalnews.com/021798.html), the Stephen Kazmierczak Illinois taking pictures (Stephen Kazmierczak), the Omaha mall taking pictures (http://www.naturalnews.com/022330.html), and so forth.

In December, 2007, I made this public prediction:

“There shall be extra. I hate to be correct about this grisly prediction, as a result of I grieve for the households of these misplaced to pharmaceutically-induced violence, however the fact is that till we cease drugging our youngsters with psychotropic medicine, the shootings are usually not going to cease.”

And certainly, there have been extra. So long as these harmful, thoughts-altering psychiatric medication proceed to be prescribed to sufferers, they are going to proceed to drive individuals to violence. Extra harmless lives will probably be misplaced whereas Huge Pharma pockets billions of dollars in earnings from the exact same medication which are main folks to lethal violence.

**Was the Orlando Shooter on Antidepressants?**

It may be inappropriate, and I may of course be wrong in this particular case, but one must wonder whether psychiatric medicines are a contributing factor in the epidemic of public shootings in America. I believe that it turns out that I was correct, that Jason Dalton Dalton was in fact on Prozac. Psychiatry now believes, and public opinion upholds, that their medicines are cures not causes, and that what we need is more “mental health care,” say, to treat people like me who see a possible cause, lives at stake, and try to raise these questions publicly, so that if these medicines are in fact crucial contributing factors, we might be more careful about them in the future. Seeing is of course dangerous, because one might speak a thing contrary to received opinion, which is of course also a characteristic of madness.

Again, the reasons that I question psychiatric medicine in relation to public shootings is that I know some other things that others do not know, and these comprehensive ideas come together to lead to a possibility, for those who care. The epidemic of public shootings began at the same time that psychiatry
switched from the “therapy” idea to the drug-them-all-for-profit idea. I also see financial interests, such as those of the drug companies, exerting a great influence upon both our politicians and our news media. But most of all, perhaps, is that long experience and the road that I have taken have shown me, I believe, that we do not have knowledge about the soul even as we do about bodily medicine, so that, as I say, we literally do not know what we are doing when we drug people. Our trust in the mental health profession, like our trust in the priests that once was a part of common opinion, has been gravely misplaced. I know, perhaps, because I have seen what they study to excel in psychiatry, (which is literally the “healing” of the psyche or soul) and I have also spent time with those like Carl Jung, Socrates and Jesus, who know what they do not know but also know some things we do not know, and care enough to take the risk to try to tell us.

If, for example, antidepressants were taking weak or bad souls and “dropping the floor out from under them,” or “pushing them over the edge” by making them suicidal in addition, things would be just as they appear: The shootings would happen, and no one would raise the question, except perhaps for a few who see the matter from this side, like Andrew Thibault or Julie the Mad Blogger. And for ourselves, we would let it go, but it is hard to see ones nation suffer and things be destroyed in these ways while no one will even raise the questions.

It is of course difficult to tell whether the medicines given for one malady actually make it worse or just fail to cure it, and also difficult to tell whether these cause other problems, so that the side effects are worse than the original problem. But it is not difficult to tell that Purdue Pharmacy made 31 Billion dollars off one kind of 12 hour Oxy while delivering many of our youth to the porch of the heroin dealers, nor is it difficult to tell that we have a little problem with campaign finance in this country, so that Congress would be reluctant to fix this if it were the problem. Nor is it difficult to see that a failure of common sense integrity on one matter can have a trickle down effect into matters one would never have been able to think out and foresee, because we just do not have the time, integrity and brain cells to think out everything. Nor is it difficult to see that there are a lot of people who would do a lot of things to protect a 31 Billion Dollar interest. Look what those GM CEO’s did to hide the ignition switch problem. Oh, but these are rich people, and they would not be rich if they did not have virtue, and far more than any of the poor? They clearly spend their leisure time pursuing the mysteries of engineering for the good of the customer, or the study of the soul for the good of mankind regardless of profit, for they already have enough money, and do not need to be slavish to earn even more. They might even, whodathunkit, ignore the question of whether antidepressants are causing the epidemic of public shootings, though the companies might privately correct the problem without acknowledging their error, which would be better than nothing. And when they cash their six figure checks, everyone will know that they have made the right choices. You see, we understand too something about the weakness to which America is subject, though we perhaps do not see these weaknesses as well as our enemies do.
So far, we have heard that this man had “Bi Polar Disorder,” a severe case of mood swings once called manic-depression.; This is just a description of symptoms dressed up in scientific sounding language, and by those too who have never thought it profitable, say, to study tragedy and comedy. Everyone knows that we have alternating good moods and bad moods, and those who do not cultivate the soul are more subject to moods than those who do. Severe mood swings are something we notice too in those long subjected to psychiatric medicines, like the twitches they like to ignore, though the government may at least make the companies list these things as “side effects.” Public shootings are consistent with the known and listed side effects of antidepressants. From the fact that there was such a name, “Bi-polar,” applied to this man, I can reason that it is likely that he had some contact with the “mental health profession,” and from that I can reason that it is likely he has been given their psychiatric drugs. But I am still sticking to my first guess, which is that like Jason Dalton, it will turn out that this murderer was on antidepressants.

It is amazing that when a question arises which might cost the drug industry the opportunity for ill gotten gain, there is suddenly all sorts of reverence for privacy. For marketing purposes, no one cares if the most private conversations are broadcast through our T. Vs and computers and phones, but these murderers have such privacy that we the people are just forbidden the crucial information needed to determine whether antidepressants are the key factor in the epidemic of public shootings. Again, without my consent, a conversation with a friend about a molestation that occurred when he was eight and did not discuss with me for thirty was captured through my television and computer (which I do not own), and this is just fine with everyone. Congress will do nothing to protect privacy because the spy-marketers are making money and Congress is getting a cut. And really, what do we have to hide, especially from our enemies? But let a question of murder arise that might get in the way of profiteering at the public expense, and suddenly we have such reverence for privacy and the Fourth Amendment that we cannot even collect statistics on whether these shooters are not literally all on antidepressants, which would look bead for the industry indeed, and the profession of gathering six figures for drugging people after fifteen minute interviews- which, in case you do not know, has become the common practice in this iatria of the psyche.
New Information About Adam Lanza’s Mental Health Treatment Reveals Multiple Drugs

New information regarding Sandy Hook shooter, Adam Lanza, has recently been made public, adding to the already growing list of questions surrounding the Newtown shooting incident and Connecticut’s subsequent rush to increase mental health services.

With the March 10th release of *The New Yorker* article, “The Reckoning: The Father of the Sandy Hook killer searches for answers,” by Andrew Solomon, serious questions have been raised about the State Police investigation and the statements provided by personnel of the Yale Child Study Center, where reportedly Lanza was last treated.

The Reckoning author, Andrew Solomon, reports the following:

“Kathleen Koenig, a nurse specialist in psychiatry at Yale, gave some follow-up treatment. While seeing her, Adam tried Lexapro, which Fox had prescribed. Nancy reported, “on the third morning he complained of dizziness. By that afternoon he was disoriented, his speech was disjointed, he couldn’t even figure out how to open his cereal box. He was sweating profusely…it was actually dripping off his hands. He said he couldn’t think...He was practically vegetative.” Later the same day, she wrote, “He did nothing but sit in his dark room staring at nothing.” Adam stopped taking Lexapro and never took psychotropics again, which worried Koenig. She wrote, “While Adam likes to believe that he's completely logical, in fact, he's not at all, and I've called him on it.” She said he had a biological disorder and needed medication. “I told him he's living in a box right now, and the box will only get smaller over time if he doesn’t get some treatment.”

Remember that, until 2007, Lanza’s primary psychiatrist was Dr. Paul Fox who, in 2012, accused of having sexual relations with his patients, surrendered his license to practice medicine in New York and Connecticut, destroyed his records and moved to New Zealand.
Now Solomon is reporting that Dr. Fox had prescribed the antidepressant, Lexapro, and reportedly was working with the Yale Child Study Center’s Kathleen Koenig on Adam’s case. Nancy Lanza apparently was very concerned about what appeared to be an adverse reaction to the mind-altering Lexapro and wrote copious notes about Adam’s behavior while on Lexapro. More importantly, Solomon is reporting, apparently based on information gleaned from his extensive interviews with Peter Lanza, that Adam never took psychotropics again.

This important information does not jibe with the information Yale’s Kathleen Koenig provided to investigators and made public in the State’s Police Report of the shooting incident. Most importantly, the public only now, 15-months after the fact, is being made aware of a second psychiatric drug prescribed to Lanza and a second adverse reaction.

Five days after the shooting incident, investigators interviewed Kathleen Koenig. According to the police summary of Koenig’s interview the following was revealed.

“Koenig prescribed medication: Celexa – antidepressant/anti-anxiety.”

“Koenig recommended Adam Lanza participate in follow-up visits.”

“Koenig described Nancy Lanza’s response to her recommendations as “non-compliant.”

“Specifically, immediately after prescribing a small dose of Celexa to Adam Lanza, Koenig received a phone call from Nancy Lanza which reported her son was “unable to raise his arm.” Nancy Lanza was reporting her son was attributing this symptom to the medication. Nancy Lanza stated due to her son’s symptoms, he would be discontinuing use of the medication. Koenig attempted to convince Nancy Lanza that the medication was not causing any purported symptoms which Adam Lanza might be experiencing. However, Nancy Lanza was not receptive to Koenig’s reasoning. Nancy Lanza missed at least one scheduled appointment (unknown date) and failed to schedule subsequent appointments for Adam Lanza. Koenig did contact Dr. Paul Fox and agreed that his behavioral-based therapy would remain the primary course of treatment for Adam Lanza. She stated that Adam Lanza never returned for follow-up visits.”
According to the State Police Report, Koenig acknowledges that she had prescribed Adam Lanza the mind-altering drug, Celexa, and that Nancy Lanza had “immediately” reported what she believed to be serious adverse reactions to the drug. This is where it gets interesting.

If Lanza never returned to the Yale Child Study Center for follow-up visits and Koenig believed Nancy Lanza was “non-compliant,” when was the Lexapro prescribed? Based on Solomon’s reporting it certainly appears that the Lexapro had been prescribed while Adam was being treated at Yale, yet the Lexapro incident apparently was not reported to investigators by Koenig.

Additionally, Koenig was advised on two occasions that Lanza had adverse reactions to psychiatric drugs prescribed to him – the Celexa and Lexapro. Why was information about the adverse reaction to Celexa provided to State investigators and not the adverse reaction to Lexapro?

On both occasions, when confronted with Nancy Lanza’s report of an adverse reaction to a drug, Koenig apparently pooh-poohed these concerns stating, “he had a biological disorder and needed medication,” and she “attempted to convince Nancy Lanza that the medication was not causing any purported symptoms which Adam Lanza might be experiencing.” Ultimately, it seems that Koenig labeled Nancy Lanza “non-compliant,” when in reality it appears this mother was acting responsibly.

One has to wonder how informed Koenig is when it comes to psychiatric drugs. First, there is no medical/scientific evidence to support Koenig’s claim that any psychiatric disorder is “biological.” Secondly, the information provided by Nancy Lanza about the adverse reaction to the Celexa actually is one of the serious side effects of the drug – “stiff, rigid muscles.” Adam had complained that he could not lift his arm. And Nancy Lanza also told Koenig that Adam was “sweating profusely.” This also is an adverse side effect of Lexapro.

Unfortunately, Solomon did not provide information in his article about the date the Lexapro was prescribed. However, because Solomon wrote that “Adam stopped taking Lexapro and never took psychotropics again, which worried Koenig,” we can assume that it was during the time that Adam was receiving treatment at the Yale Child Study Center.
Based on the fact that Adam did not “participate in follow-up visits” to the Yale Child Study Center after the Celexa incident, then the above information seems inaccurate. According to Koenig’s statement to police, Celexa was the only drug that Adam received and that was the end of the relationship with the Yale Child Study Center.

Beyond the fact that the data provided by Solomon about Koenig’s statements appears to be contradicting the State Police Report, what also becomes abundantly clear is that Koenig appears to be completely unwilling to accept, as real, Nancy Lanza’s reports about the medication. Koenig does not recommend discontinuation, nor does she recommend that the adverse reactions be reported to the FDA’s MedWatch drug reporting system.

More bizarre, though, given that the Yale Child Study Center appears to be pivotal in Lanza’s mental health care, is that Dr. Ezra Griffith (a psychiatrist) of Yale University was chosen by Connecticut Governor Dannel P. Malloy to sit on the Sandy Hook Advisory Commission, which is tasked with making recommendations about mental health care in the state. Furthermore, the Yale Child Study Center testified before the Advisory Commission. Is this not a serious conflict of interest?

Nevertheless, the point is, of course, that there is a problem with the information about Adam Lanza’s mental health care. Specifically, when did Adam Lanza stop taking psychiatric medication? In fact, what medications had Lanza been prescribed throughout his life? Why has no information about Lanza’s mental health for the last five years of his life been made public? Did Nancy Lanza uncharacteristically decide to stop providing mental health treatment for Adam after his negative experience at the Yale Child Study Center?

No one knows. And that is why all of Lanza’s mental health records need to be made public. Until that time, more information about Lanza’s mental health treatment and prescribed drugs will surely leak out. In the meantime, though, important mental health decisions, affecting the entire country, will be made by lawmakers.

As often is the case when it comes to these tragic school shootings, lawmakers irresponsibly act first then, maybe, consider the facts later. What Ablechild is learning, though, is that the “facts” of this incident keep changing, making it all the more important for the public to demand absolute transparency of all information regarding Lanza’s mental health records.
It is no secret that almost immediately Lanza's mental health treatment was questioned. Specifically what mental health disorder(s) did he suffer from and what “treatment” and medications had been prescribed over the course of his life.

Given that most of the psychiatric drugs available at that time had not been approved for children and that they also carried serious FDA “black box” warnings for serious behavioral adverse reactions, these questions are not unimportant.

In fact, without this information no governing body can responsibly claim the need for “increased mental health services” based on the shooting incident at Newtown. Without knowing Lanza’s mental health history, lawmakers are subjecting the public to unnecessary and costly mental health services with zero information to support the action.

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