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Program to prevent teen suicide misguided

I am a parent concerned about a new program being considered by the Minnesota Legislature, the so-called "TeenScreen" suicide-prevention program (HF 196 and SF 789).

While promoted as a suicide-prevention program, its implementation likely would not prevent suicides, but actually could result in more suicides and also in the mislabeling of children with mental disorders and in the placement of children on dangerous, mind-altering psychiatric drugs.

The U.S. Preventive Services Task Force has found no evidence that screening for suicide risk reduces suicide attempts or mortality. On that score, funding TeenScreen would be a waste of state tax dollars.

Most important, those found to be at risk after an initial screening would be referred to a psychiatrist. This is particularly distressing as the data released by a survey, printed in JAM Academy Adolescent Psychiatry in 2002, showed that nine of 10 children who see a psychiatrist are given psychiatric drugs. This is most dangerous as the FDA has found that antidepressants play a causal role in pediatric suicides, and that children given psychiatric drugs are twice as likely to commit suicide as those given a placebo. Witness the fact that all school shootings have been linked to psychiatric drugs. As a result, the FDA has ordered drug manufacturers to place a black-box warning on antidepressant labels. The black-box warning is the most serious measure the FDA can take regarding a prescription medication, short of an outright ban.

While preventing suicide is a noble goal and any suicide is a needless loss, TeenScreen, drugs and psychiatrists are not the mechanisms to achieve that aim.

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