The Link Between Antidepressants and Teen Suicide Is Controversial

Benedict Carey

Benedict Carey is a contributor to the International Herald Tribune

Since the late 1980s, debate has raged concerning the prescription of antidepressants to children and adolescents. While some have argued that antidepressants increase suicide risk in young people, others have interpreted rising teen suicide rates as the result of antidepressant restrictions. For both the Food and Drug Administration and concerned parents, armed with few definitive scientific findings to consult, this debate continues to raise questions regarding the ethics and economics of psychopharmacology.

U. S. public health officials, psychiatrists, grieving parents, outraged former patients and others are addressing the most bitterly divisive question in psychiatry: Do the drugs that doctors prescribe to relieve depression make some people more likely to commit suicide? [In December 2006] the Food and Drug Administration decided to convene a government panel for the first time since 2004 to consider the question.

Impassioned testimony [in 2004] led the agency to require antidepressant drugs to carry strong warnings that they could
increase suicidal thinking or behavior in some children and adolescents. Now the agency is considering whether to require similar warnings for adult patients.

At one level, the debate is about science, which has not provided clear answers.

Roots of the Debate

The controversy began in the late 1980s, soon after Prozac was introduced as the first in a new generation of antidepressants. Over the next 15 years, the debate came to transcend questions about side effects and labeling. It became a clash of cultures. Psychiatrists say the debate has scared patients and their families away from the very medications that could save their lives. Critics say psychiatry relies too much on drugs and on drug company money that pose a danger to public health.

“It’s like a religious war,” said Edward Shorter, a medical historian at the University of Toronto who is the author of the definitive “History of Psychiatry.” “The only time I can remember when people argued over an issue with this kind of fervor,” Shorter said, “was back in the 1960s and 1970s, when scientists were challenging psychoanalysis.”

Fervor Spreading

The fervor has spread beyond academia. Family doctors and psychiatrists in private practice have more trouble than ever getting their depressed patients to try medication. Dr. Andrew Leon, a psychiatric researcher at Weill Medical College of Cornell University who is a paid scientific adviser for the pharmaceutical industry and the government, was a member of the 2004 panel and was on the panel conducting the hearing [in 2006]. “Sitting up there and having the public yell that you’re killing their children is no fun,” he said. “But I suppose that has become a part of the process now.”