

'Kids on Pills' – The Long-Term Impacts of Medicating Children

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STORY AT-A-GLANCE

- › Rates of mental illness in children are rising rapidly, with psychotropic drugs being the conventional solution. The documentary "Kids on Pills" examines treatment options and long-term impacts of medicating children
- › U.S. doctors are more likely to diagnose children with conditions like bipolar disorder and prescribe multiple medications, while European doctors tend to be more conservative in their approach
- › Children in the U.S. often receive cocktails of powerful psychotropic drugs that have numerous side effects and health risks, with minimal evidence of benefit in many cases
- › The long-term effects of polypharmacy in children remain unclear. Some experts warn these drugs alter brain development when prescribed at young ages, causing lasting changes
- › Alternative therapies like occupational therapy and family-based interventions are encouraged. As parents, you must advocate for your children and consider nondrug approaches to address behavioral issues

Rates of mental illness in children have risen at an alarming rate, and the conventional solution? Psychotropic drugs. Today, it's no longer uncommon for children to receive a cocktail of medications to manage their mental health. But is this really the best course of action? Or are we just subjecting our children to severe side effects while inadvertently worsening their mental health in the long run?

The 2022 documentary "Kids on Pills: Happiness Out of a Bottle" from Only Human¹ takes a closer look at the treatment options for children with mental disorders. Directed by Stefanie Schmidt and Lilian Franck, the film compares how American and European children are treated and medicated for these conditions, and what the long-term impact on their health might be.

Rate of US Children with Bipolar Disorder Has Increased 4,000%

The documentary follows the lives of several children who have sought treatment from Massachusetts General Hospital in Boston for their mental health disorders. The doctors in Boston have been the subject of criticism and controversy for several years due to their early diagnosis of mental disorders among children, some only a few years old.

Siblings Anna and Will Birtwell, 9 and 6 years old respectively, have been diagnosed with bipolar disorder (manic depression), and often struggle with unpredictable mood swings. Their mother, Kelli, narrates:²

"The tiniest thing would set off a two-hour rage or crying fit. She [Anna] might start saying things that someone says when they're depressed. For instance, one week would be drawing butterflies and flowers and rainbows and all sorts of things that [are] happy. And then the next week, she would take a black crayon and scribble and rip the paper through, and she would say just things like 'I don't want to be alive anymore.'"

Jaylene Quijada, also a patient at Massachusetts General Hospital, was diagnosed with bipolar disorder when she was just 3 years old. In her case, the manic aspects of the condition are more evident. Jaylene's psychiatrist, Dr. Robert Doyle, who is also the chief medical director at the hospital, comments:³

"Looking back, she was the most classic bipolar kid, with these full-blown, manic, giddy laughing, out of control, unable to be redirected children I've ever seen."

However, physicians in Europe diagnose psychiatric irregularities like this differently. According to Dr. Martin Holtman,⁴ who has a clinic in Frankfurt, if the factors used to diagnose bipolar disorder in the U.S. were to be considered as mere behavior descriptions instead, then the children would be diagnosed with milder disorders such as attention deficit hyperactivity disorder (ADHD).

Holtman recounts how young American patients in Frankfurt might be given psychostimulants for their ADHD, but when these children go to the U.S. for vacation, they return with additional prescription medications, saying they've been diagnosed in the States as bipolar.⁵

Children in America Often Fall Victim to Polypharmacy

Polypharmacy refers to the use of multiple medications to address a health condition, and it is becoming prevalent among both the elderly and the youth. According to a recent study published in the *Journal of Pediatrics*,⁶ out of 302 pediatric patients surveyed, 68.2% have experienced polypharmacy.

In the featured documentary,⁷ Jaylene's mother, Elizabeth, shared how Doyle has prescribed various types of medications to manage her daughter's condition:

"About [age] 6, she started with the anxiety. So, I mentioned that to him [Doyle] and he said, 'Well, let's give her an antianxiety medication.' So, at that point, he gave her Lorazepam to calm her down. That didn't do anything. It just made her more hyper; it just made her more stimulated. So, he said, 'Well let's try Klonopin.' We tried that — [it] didn't help her. Nothing would help.

So, at that point we went back and forth. He just kept mixing the medication[s], like the Risperdal. That was the only thing that really helped her. So, we just kept upping the dose, upping the dose, splitting the doses up to see if that would help."

Doyle adds that he even tried giving Jaylene small doses of lithium — a mood stabilizer with side effects like memory problems and seizures.⁸ It even poses a risk for kidney

failure when used long-term.⁹ But it still didn't work out, as Jaylene started to become confused and couldn't think clearly, causing him to halt the lithium treatment.¹⁰

Meanwhile, Anna, who has been taking a new drug called Abilify to curb the manic side of her condition,¹¹ is shown to be struggling with severe mood swings and crying fits. Her mother says that according to her doctor, the new drug works to get rid of "the manic side" of the condition, but as a result, the depression manifests more, causing Anna's intense outbursts.¹²

Indeed, U.S. children are now being plied with powerful drugs to treat mental health concerns. Rarely do these medications address the root of the problem. Plus, they create new issues of their own. The result? More symptoms that are then treated with additional medications.

Giving Children a Cocktail of Drugs Provides Very Little to No Benefit

There's no doubt that overprescribing medications is ultimately setting children up for a downward spiral of increasing side effects and worsening health. The documentary mentions some of the side effects of psychotropic drugs on children, including weight gain, growth dysfunction, sleep problems, nervousness and mood swings. Medicated children are also at higher risk of diseases like heart disease and diabetes.¹³

What's even more alarming is that drug cocktails have been shown to provide very little or no benefit. For example, a 2021 review published in the *Journal of Child and Adolescent Psychopharmacology*¹⁴ found that when selective serotonin reuptake inhibitors (SSRIs) were added to other ADHD treatments, there was only "minimal evidence of benefit for mood or anxiety comorbidities."

In addition, the drug Strattera (atomoxetine) led to "mixed reports of benefit, including the only small RCT [randomized controlled trial] showing no benefit." The study also highlighted that taking drug combinations frequently resulted in more side effects — as expected.

And although six million children in the U.S. are now taking psychotropic medications,¹⁵ many of these drugs are not approved for use in children. According to the featured film:

"Doctors can justify prescribing other medications earlier as 'individual healing attempts' – this is a regular occurrence in the U.S., which accounts for the majority of the 17 million children taking psychotropic drugs worldwide."¹⁶

Dr. Dominik Riccio, director of the Center for the Study of Psychiatry and Psychology, explains why giving antipsychotic medications to children could be particularly damaging:¹⁷

"When you give an antipsychotic drug to anyone, especially children, you are causing an imbalance. It's an exogenous substance that you're putting into the brain and you're causing a purposeful imbalance.

You're doing very damaging things, in my opinion, to the child because you're shutting down the centers of the brain that are responsible for creativity, for loving, for emotion, for feeling – the very things that make us human beings and discriminate us from the animals."

The Long-Term Effects of Polypharmacy in Children Are Still Unclear

Eleven-year-old Raul, who has ADHD and bipolar disorder, has been on a cocktail of psychotropic drugs since he was diagnosed. According to his adoptive parents, Tessa and Terrence Williams, some of the prescription medications he was given include antianxiety medications like Buspar, stimulants like Concerta and Ritalin (methylphenidate), and even Depakote, an antiseizure drug.¹⁸

They also describe an incident in which Raul's outbursts took a turn for the worse, and he became violent and had a seizure. He was hospitalized in the psychiatric ward for a month. Terrence shares how he was "very upset" as he was hopeful that the medications

were working. "We thought perhaps we were turning a corner, but they actually really [went] downhill," he said.¹⁹

The film states that without definitive studies, the long-term consequences of these drugs cannot be concluded, and with incidents like Raul's, it's often unclear whether it's the illness or the medication that's really responsible for the behavior.²⁰

European doctors also highlight the long-term risks associated with prescribing psychotropic drugs to young children. According to Dr. Bruno Müller-Oerlinghausen, a clinical psychopharmacologist, these drugs are "excitatory potent" — patients who take them often experience sleep disturbances, coordination problems, agitation and even suicidal thoughts.²¹

Dr. Gerald Hüther, a German neurobiologist who has done in-depth studies on Parkinson's disease, also voices his concern about long-term methylphenidate use among young children, saying:²²

"Medication that changes the functioning of the brain, and is prescribed very early, also leads to the alteration in the maturation of the brain. If one prescribes the same psychotropic medication for an adult, then it's as if one sets a wobbling train back on the tracks. But the tracks are all already there.

If these drugs are given to a child whose brain is still in the stage of development, then it's as if it affects the building of the tracks. That means the train can drive somewhere else and that is then also verifiable."

Nondrug Approaches for ADHD

In Europe, even though they still prescribe drugs to children, doctors are more conservative than U.S. doctors when it comes to prescribing multiple medications at a time. According to Holtman:

"We're not quick to prescribe medication. In most cases, we don't give high doses. We don't give several types of medication. The Americans almost always

*don't just take one type of medication. You could say they are taking a cocktail of drugs. So, we are being careful."*²³

In addition, seeking alternative therapies are encouraged, such as enrolling in rehab centers where children with ADHD work with their family and other families to develop traditional values, such as trust and strengthening the child-parent relationship to manage their condition. Jens Missler, whose young children Marc-Andre and Jan-Phillip have both been diagnosed, says:²⁴

"I don't think that you can call it a general remedy. You try to integrate into daily life what you have learned as much as possible. It won't always be easy, that's obvious, but of course, you have to see what you alone have got out of it. We have to see what he wants to put into practice for himself, at his age and of course, how far we can propel him in that direction."

Marc-Andre, before doing therapy, was unable to do simple tasks like catching a ball or hopping on one foot. After two years of occupational therapy, his concentration has improved, as well as his dexterity and ability to focus on one task at a time.²⁵

Yet, there's no doubt that the urge to seek medication as a primary treatment is also increasing in Europe. Despite his successes in occupational therapy, Marc-Andre's parents are planning to put him on methylphenidate, as he is set to begin school in a few months.²⁶

Be Your Child's Advocate

In 2008, physicians from Harvard Medical School and Massachusetts General Hospital made headlines after it was discovered that they received millions of dollars of funding from pharmaceutical companies. It's a clear indication of how Big Pharma is pulling strings to ensure that medications become the first line of treatment for adults and children alike.

In the documentary, Dr. John Abramson, a former psychologist and author of the book "Overdosed America," comments:²⁷

"There's definitely a relationship to the funding system of how the knowledge is produced and disseminated that creates the impression that physicians who are trying their best to help children will realize that goal by using drugs and expensive drugs instead of by doing what they did before these expensive drugs became the recognized therapy for pediatric bipolar disease."

Advocating for your child is your responsibility as a parent; it is imperative that you stand up against allowing powerful corporations to rake in profits at the cost of your child's well-being. If your child is dealing with an emotional or mental challenge, I recommend seeking help from a trustworthy physician who does not consider psychotropic drugs as the first choice of treatment.

"The treatment of children with psychotropic drugs is a science that is still partly experimental. Only the future will tell if the parents of these children have made the right decisions, and by then it will be too late to go back," the film concludes.²⁸

You must also realize that most behavioral problems in children are related to an unhealthy diet, emotional upset and exposure to toxins. For example, paying attention to the health of your and your child's gut microbiome is crucial. Research shows that the makeup of gut flora at birth and during a child's first year of life plays a key role in the development of neurodevelopmental disorders like ADHD.²⁹

Other toxic substances that have been associated with an increased risk of ADHD include lead, phthalates, BPA, pesticides and air pollution, as they disrupt brain development and neurotransmitter systems, affecting your child's behavior and cognitive function. For more information on this, I recommend reading my article, "[Why Do 1 in 9 Children Now Have ADHD Diagnosis?](#)"

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