Reality Check: Why Aren’t Shootings Sparking Debate Over Anti-Depressants?

Ben Swann’s Reality Check questions why, after the recent TV crew shooting, national debate on mind-altering drugs and anti-depressants is nonexistent.

By Ben Swann - Aug 27, 2015

The crime scene tape was still up in Roanoke, Virginia when politicians began calling—almost predictably—for tougher gun control laws.

Here’s a question: why is it always a discussion about guns and not about mental health and mood altering prescription drugs?

This is a Reality Check you won’t see anywhere else.

In response to the live TV shooting in Virginia, the usual voices began talking about the need for more gun control without knowing any facts regarding the shooter or how he got that gun.

Without question, Vester Flanagan—the man who carried out the murder of Allison Parker and photojournalist Adam Ward—was disturbed. The extent to which he was disturbed we do not know at this time. But what we do know is that, as we watch these high-profile shootings continue to grab headlines, there are important links that are being missed or ignored.

Take the Charleston shooter Dylann Roof, who Flanagan referenced in his manifesto sent to ABC News. Politicians and media talked about the gun he obtained to carry out that church shooting.

And they—and we—have talked a great deal about the Confederate flag.
But what has received very little coverage...

According to CBS News, earlier this year cops searched Roof after he was acting suspiciously inside a Bath & Body Works store. They found “orange strips” that Roof told officers was Suboxone, a narcotic that is used to treat opiate addiction.

Suboxone has a reported history of causing violent episodes in some users.


Prozac maker Eli Lilly later settled a lawsuit brought by survivors.

1999: 15-year old Oregon school shooter Kip Kinkel, who opened fire in his school cafeteria, had been on Prozac.

1999: Eric Harris, the Columbine killer, was taking Luvox.

1999: Conyers, Georgia school shooter T.J. Solomon was on Ritalin.

2005: Red Lake Indian Reservation shooter Jeff Weise was taking Prozac.

2007: Virginia Tech shooter Cho Seung-Hui, who shot and killed 32 people, was on anti-depressants and taking Prozac.

2012: Colorado theater shooter James Holmes... was reportedly heavily hooked on the prescription painkiller Vicodin. And he took a cocktail of anti-depressants before his shooting spree.

2012: Conn. school shooter Adam Lanza’s uncle said the boy was prescribed Fanapt, a controversial anti-psychotic medicine.
And those are only a few examples. There have been no less than 26 cases of mass shootings in the U.S. where the shooter has been taking anti-depressant drugs.

To be clear, we’re not saying Prozac and Vicodin are to blame. But consider the side effects of these drugs:

Prozac: nervousness, anxiety, insomnia, inner restlessness, suicidal thoughts, self mutilation, manic behavior

Vicodin: confusion, fear, unusual thoughts or behavior; anxiety, dizziness, drowsiness; headache, mood changes.

Xanax: depressed mood, thoughts of suicide or hurting yourself, unusual risk-taking behavior, decreased inhibitions, no fear of danger; agitation, hostility, hallucinations.

What you need to know is that the use of anti-depressants in America has skyrocketed. Now, 1 in 10 Americans take them, four times as many as did in the 1990s. And while millions of people do not suffer violent episodes, the drug makers warn that some people may, and do.

So when politicians want to have a “national discussion about gun control” after one of these shootings—if we’re being honest—shouldn’t we want to have a national debate about what these drugs might be doing to the minds of some people who already suffer from mental issues?

That is Reality Check. Let’s talk about that on Twitter @BenSwann_
is the prime anchor at WGCL-TV in Atlanta, GA. He can be seen anchoring live at 4 p.m., 5:30 p.m., 6 p.m., and 11 p.m. EST, Monday through Friday. A stream is available at cbs46.com.