ADHD Drugs Ineffective Over The Long Term

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Apart from being ineffective over the long term, ADHD (attention deficit/hyperactivity disorder) drugs may also undermine your child's physical growth, a BBC television program, Panorama, has revealed. Scientists seem to be saying that claims made about ADHD drugs some years ago were overstated.

A long-term monitoring program involving 600 kids across the United States since the beginning of the 1990s was shown in the TV program - with some of its results. It is called the Multimodal Treatment Study of Children with ADHD. The study concluded that over the long term, such ADHD drugs as Concerta and Ritalin have no demonstrable benefit for children - long term means after three years of taking the drug(s).

The use of ADHD drugs in much of the developed world has doubled over the last five years - many say it has become a cure-all for bad behavior.

In 1999 studies had claimed that a one-year course of ADHD medication is more effective for a child with ADHD than behavioral therapy. These studies had a strong influence on how doctors would treat their patients. According to Professor William Pelham, University of Buffalo, USA, the findings were exaggerated.

Pelham says he believes the beneficial impact of medication in the first study was exaggerated. It had been thought that kids would have better outcomes if they were medicated for longer - however, it is not the case, there were no beneficial effects at all.

ADHD medications also stunt a child's growth, he/she runs a very high risk of losing height and weight, compared to children who do not take the medication.

Pelham said "In the short run they will help the child behave better, in the long run it won't. And that information should be made very clear to parents."

According to Pelham, behavioral therapy and a simple diet of Omega-3 may help a child as a first move.

What is ADHA?

ADHD (Attention Deficit Hyperactivity Disorder) is one of the most common neurobehavioral disorders of childhood and can persist through adolescence and into adulthood. We do not know what causes it.

A person with ADHD has a chronic level of inattention, impulsive hyperactivity, or both such that daily functioning is compromised.

The symptoms of the disorder must be present at levels that are higher than expected for a person's developmental stage and must interfere with the person's ability to function in different settings (in school and at home).

A person with ADHD may struggle in vital areas of life, such as peer and family relationships, and school or work performance.

The American Psychiatric Association's Diagnostic and Statistical Manual-IV, Text Revision (DSM-IV-TR) estimates that 3%-7% of children suffer from ADHD. Some studies have estimated higher rates in community samples. ADHD is diagnosed approximately three times more often in boys than in girls.

Three types of ADHD have been established according to which symptoms are strongest in the individual. These types are described below:
1. PREDOMINANTLY INATTENTIVE TYPE: It is hard for the individual to organize or finish a task, to pay attention to details, or to follow instructions or conversations. The person is easily distracted or forgets details of daily routines.

2. PREDOMINANTLY HYPERACTIVE-IMPULSIVE TYPE: The person fidgets and talks a lot. It is hard to sit still for long (e.g., for a meal or while doing homework). Smaller children may run, jump or climb constantly. The individual feels restless and has trouble with impulsivity. Someone who is impulsive may interrupt others a lot, grab things from people, or speak at inappropriate times. It is hard for the person to wait their turn or listen to directions. A person with impulsiveness may have more accidents and injuries than others.

3. COMBINED TYPE: Symptoms of the above two types are equally predominant in the person.

As many as half of those with ADHD also have other mental disorders. These comorbidities of ADHD (other disorders that occur along with ADHD) can make it harder to diagnose and treat ADHD. They may also present further challenges to the individual with ADHD.

Used by mental health professionals, the DSM-IV-TR provides criteria for diagnosing ADHD. This diagnostic standard helps ensure that people are appropriately diagnosed and treated for ADHD. Using the same standard across communities will help determine the public health impact of ADHD.

Criteria for the three primary subtypes are:

**AD/HD - INATTENTIVE TYPE**
-- Fails to give close attention to details or makes careless mistakes.
-- Has difficulty sustaining attention.
-- Does not appear to listen.
-- Struggles to follow through on instructions.
-- Has difficulty with organization.
-- Avoids or dislikes tasks requiring sustained mental effort.
-- Loses things.
-- Is easily distracted.
-- Is forgetful in daily activities.

**AD/HD - HYPERACTIVE TYPE**
-- Fidgets with hands or feet or squirms in chair.
-- Has difficulty remaining seated.
-- Runs about or climbs excessively.
-- Difficulty engaging in activities quietly.
-- Acts as if driven by a motor.
-- Talks excessively.
-- Blurs out answers before questions have been completed.
-- Difficulty waiting or taking turns.
-- Interrupts or intrudes upon others.

**AD/HD - COMBINED TYPE**
-- Individual meets both sets of inattention and hyperactive/impulsive criteria.

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