

[Click here to print](#)



18/11/07 - News section

Ritalin: The scandal of kiddy coke

By BARBARA DAVIES

When he was in the throes of his worst tantrums, Daniel Fletcher would rip wallpaper off the walls at home and hit and kick anyone who came near him.

Once, he put his pet mouse in the microwave. On another occasion he jumped out of a moving car.

He was first diagnosed with Attention-Deficit Hyperactivity Disorder (ADHD) at the age of two, and just three years later the little boy was prescribed the amphetamine-like drug Ritalin.

Scroll down for more...

The effect, says his mother Hayley, was a loss of appetite but no difference in his behaviour.

"So the doctor kept upping the doses until he was on six times the normal dose, yet he was still hyperactive."

Eight months ago, Daniel, now 14, was put on Risperdal - an antipsychotic drug usually given to schizophrenics.

"It was as if my son had been replaced by a doped-up zombie," says Hayley, 35, who took him off it a month later.

"I could hardly wake him in the morning. It was as if all his personality was disappearing, like a patient in a mental institution."

Last week, it emerged that around 8,000 British youngsters are being treated with this powerful tranquilliser and another, similar drug called Zyprexa - despite the fact that their dangerous side-effects range from diabetes to brain tumours.

Hundreds of thousands of others are still being prescribed Ritalin, an amphetamine-like stimulant which has the same effect as "speed" and cocaine, and which, according to new evidence from the U.S., doesn't even work in the long-term.

Ritalin is a methylphenidate which acts in a similar way to cocaine by stimulating the central nervous system, which, paradoxically, can have a calming and focusing effect.

Scientists are unclear why it works in this way, although there is some evidence that the effect is achieved by the slow release of the hormone dopamine, which controls behaviour, attention and learning.

Scroll down for more...

Recent findings also suggest that Ritalin can stunt growth as well as causing heart problems,

insomnia and weight problems.

In the U.S., there have been 51 deaths among children and adults taking Ritalin since 1999.

According to the Medicines and Healthcare Products Regulatory Agency, 11 British children on Ritalin have died.

The cause of two deaths was heart-related: one had a heart attack, the other an enlarged heart.

One was recorded as a "sudden death". One died of a brain haemorrhage; another of a swelling in the brain.

Two committed suicide, and the last died of neo-natal respiratory distress syndrome.

Not surprisingly, experts fear that inappropriate drugs are not only being used to control children's behaviour, but are being massively over-prescribed to some children who are simply naughty.

ADHD, they say, is nothing more than a symptom of Britain's time-poor society, where children of parents working long hours are cracking under the strain of family life.

There are criticisms, too, that some doctors dole out pills when therapy would be a safer option.

In the U.S., where one in ten children takes Ritalin and where doctors write two million prescriptions a month, the situation is even worse.

Scroll down for more...

A growing body of experts is even questioning whether ADHD exists at all.

"As a society, we are quick to reach for a pill," says David Healy, one of the world's leading psychopharmacology experts, and Professor of Psychiatry at Cardiff University.

"There's much less willingness on the part of the medical profession to say to parents: 'You have an awkward child. You must discipline them.'

"So we prescribe pills instead.

"The drugs used to treat ADHD are the same as speed and cocaine.

"We react with horror to the idea that our kids would use such drugs, but don't react about drugs such as Ritalin being given to them.

"There's a risk that your child won't grow as well.

"There are high risks that children will go on to use street drugs, too, because they will have grown used to their effects."

Professor Healy says anti-psychotic drugs such as Risperdal were used in the Soviet Union to extract information from political prisoners.

"People who took them would tell anything to anyone," he says.

"When you think about giving these drugs to kids, it's a whole new ball game."

Dr Tim Kendall of the Royal College of Psychiatrists, who is heading a team drawing up new NHS guidelines for ADHD, insists there is a place for drugs in treatment, but admits: "We have a situation where GPs prescribe anti-psychotics inappropriately."

Scroll down for more...

"There is no real excuse for prescribing drugs which are associated with such severe side-effects."

But even where Ritalin is used, Dr Kendall says guidelines do not make it clear when doctors should diagnose ADHD and when they should prescribe drugs.

"If you diagnose people loosely, you could end up with 16 per cent of the child population with ADHD."

"Under tight criteria, only 1.6 per cent would be diagnosed," he says.

"A generous understanding would be to say that doctors have reached a point where they don't know what else to offer, and they haven't got the right support to help parents."

Of course, the ADHD debate inevitably arouses enormous passions.

While some question the disorder's very existence and say medicating has simply replaced good parenting, for others, the idea that "bad parenting" is behind their child's problems is almost too much to bear.

Linda Shepherd, from Ipswich, whose son Zaque, 15, has been taking Risperdal since he was nine, describes the drug as a "life-saver".

"Without it, he's unmanageable," she says. "It controls his ADHD and gives us both peace of mind."

"I know there are side-effects, but for me it's a calculated risk."

"He's put on a lot of weight and is now obese because the drug makes him hungry all the time, but I think that's the lesser of two evils."

A spokeswoman for ADDISS, the Attention Deficit Disorder Information & Support Service, which believes medication has a valuable role to play, says: "Every child needs a proper evaluation and a treatment programme tailored to their problem."

"It's not one issue. It's a collection of factors. The problem is that people don't have access to comprehensive evaluation and treatment."

"But not giving them medication is worse."

Although there is no consensus on what ADHD is and, if it exists, what causes it, there is no doubt it has become a fashionable diagnosis for a host of behavioural issues.

In 1993, just 3,500 prescriptions were written for Ritalin in Britain. By 1998, there were 26,500. Last year, around 250,000 prescriptions were handed out on the NHS alone.

Such figures are underpinned by a study in 1999, which appeared to confirm Ritalin's benefits.

But eight years on, the original researchers have re-examined the children involved in the study and there is evidence the initial effects of Ritalin wore off after three years.

Ritalin was also found to stunt the growth of some of the children.

Professor William Pelham, of the University of Buffalo, New York, who was involved in the first study, says: "They had a substantial decrease in their rate of growth in terms of both height and weight.

"In the short-term, medication will help the child behave better.

"But in the long run it won't. And that information should be made very clear to parents."

Perhaps most disturbing, however, is the suggestion that ADHD is nothing more than the invention of pharmaceutical companies who have used clinical trials to create a disease that can be treated with their drugs.

Last year, the NHS spent £28 million on Ritalin alone.

Professor Healy says: "There is an active campaign by pharmaceutical companies to convince people that there's adult ADHD.

"Adults having problems are being told they have adult ADHD and are being offered drugs for it.

"Pharmaceutical companies market these drugs aggressively. How can GPs refuse to prescribe a drug 'clinically proven' to work?"

It is hardly surprising, then, that parents encouraged to give drugs to their children, rather than face up to the causes of their behaviour, usually take the easy way out.

Hayley Fletcher, who lives with her husband Andrew and their son Daniel in King's Lynn, Norfolk, remembers the moment her son's psychiatrist handed her a prescription for Risperdal.

"You assume the experts know best," she says. "But within a month, I knew something was terribly wrong.

"I couldn't wake him in the mornings. It was as if my son was disappearing before my eyes.

"I did some research and found they give this brain-altering drug to adults in mental institutions.

"Why did they give it to my son?"

"He has severe problems, there is no doubt about that, but I cannot agree with the philosophy that these children should be drugged up to the eyeballs so they cannot be a threat to society.

"That isn't what I want for my son."

Instead, Hayley persuaded Daniel's doctor to change his medication to the weaker drug Concerta, a slow-release version of Ritalin, and improved his diet with natural produce and fish oils. She also removed him from his special school and teaches him at home.

"It's been a very long, hard path," she says, "but Daniel is a different boy. The difference is amazing.

"Initially, I trusted the doctors. But really all they are doing is turning these children into zombies.

"Now that Daniel is virtually drug free he is taking the supplement Eye Q Fish Oils as part of a clinical trial, and it has made such a difference to his concentration levels."

Her son's story echoes that of Craig Buxton, 14, who featured on last week's Panorama, which exposed the use of anti-psychotic drugs on children with behavioural problems.

Craig, who lives with his parents, Alan and Sharon, in Stoke-on-Trent, was given both Risperdal and Zyprexa.

"The effects were dramatic and awful," says Sharon. "Within a month, he had started self-harming, cutting himself.

"Then he attempted suicide by cutting his wrist.

"He's taking Concerta now, and is much more stable and happy."

John Tyson, 39, a businessman from Yarm, Teesside, didn't question the paediatrician who put his 'restless, bouncy, fidgety' son John, now 15, on Ritalin two years ago.

"When it's a doctor you just smile and nod," he says.

"I knew nothing about the drug or how toxic it was. But things rapidly went downhill once John started taking it.

"He became aggressive and he couldn't cope with the word 'no'.

He became a horrible person. The doctors increased the dose and he turned into a monster.

He was headbutting walls and throwing things out of the window. The doctors said: 'You need more Ritalin.'"

Eventually, Mr Tyson turned for help to the Cactus Clinic at the University of Teesside's school of social sciences.

The groundbreaking centre uses a drug-free approach, and helps children learn appropriate behaviour.

The clinic also refuses to use the term ADHD.

"Attention disorders are not diseases, but patterns of inappropriate behaviour," says clinic manager Amanda Clarkson.

According to Mr Tyson, who cut gluten, wheat and dairy out of his son's diet and gave him mineral supplements: "After six weeks, the benefits were noticeable.

"After three months, I knew I was getting my boy back. I think it's wicked how children are being doped when there are alternatives."

The treatment, however, is not free. Parents can pay up to £600.

Money well spent, according to Mr Tyson, but he says it should be available to all on the NHS.

For the time being, however, it seems the medical consensus is that drugs do have a place in controlling children's behaviour, although next year could see dramatic changes.

NHS guidelines on ADHD and its treatment are being revised after concerns were raised that current treatment is not consistent.

The National Institute for Health and Clinical Excellence has spent two years investigating the disorder and its treatment and will deliver its preliminary findings in January.

Experts led by Dr Tim Kendall are looking at the criteria under which ADHD should be diagnosed and, if it exists, the best treatment.

Most likely, the guidelines will be aimed at reducing the over-prescription of drugs, while recognising their usefulness in extreme cases.

"We are looking at dietary interventions," says Dr Kendall.

"There is some evidence that coal tar derivatives found in things such as diet colas increase hyperactivity.

"There is some evidence that fish oils improve things.

"There is evidence that education can help teachers deal better with hyperactive children, and that parent training programmes are helpful."

The final NICE guidelines are not likely to be released until next summer.

Until then, the only winners are the pharmaceutical companies.

According to a spokesman for Janssen-Cilag, maker of Risperdal: "We don't recommend the use of Risperdal for children.

"Doctors are free to prescribe the drugs they feel are most appropriate."

Eli Lilly, U.S.-based maker of Zyprexa, says it has never promoted its use for ADHD.

And Novartis, which makes Ritalin, says: "Ritalin has a long record as a safe and effective medication.

"It is important that medication is only one part of a total treatment programme that should include psychological, social and educational measures."

For parents and children still baffled by the ADHD debate, such words bring little comfort.

"I'm not sure my son ever had anything called ADHD," says John Tyson.

"He just needed a bit of help. He didn't need to be doped."

Find this story at http://www.dailymail.co.uk/pages/live/articles/news/news.html?in_article_id=494862&in_page_id=1770

©2007 Associated New Media