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No one likes the idea of medicating children but studies say Ritalin is safe

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A wise person likes to hear both sides of an argument before forming an opinion on a subject of which they have little experience, which is why I want to devote this week's column to Attention Deficit Hyperactivity Disorder (ADHD).

Recent reports in the media have highlighted an explosion in the number of children on medication (Ritalin) for ADHD and hinted that the condition is over-diagnosed and over-treated. But a growing number of doctors think the opposite: despite keen media interest and better awareness among teachers and healthcare professionals, they are worried that too many children with ADHD are never picked up.

ADHD is not a new condition. The term may have appeared only in the past 20 years but the characteristic features (see below) were recognised well before they were grouped together into a disorder. It is only in recent years that the significance of the condition has been fully appreciated.

The latest figures suggest that about one British child in 30 between the ages of 5 and 15 is affected, and it is three times more common in boys. Most cases are fairly mild and lead only to minor disruption, but the outlook at the more severe end can be bleak - for the individual, his or her family and society.

Children with ADHD are more likely to have low self-esteem, to be poor achievers and to have been excluded from one or more schools. As adults they are likely to struggle to hold down jobs and maintain relationships. ADHD is closely associated with drug and alcohol abuse, delinquency and trouble with the law. A recent review indicated that 45 per cent of youth offenders and 30 per cent of adult offenders have ADHD.

To compound matters, children with ADHD often have other behavioural and developmental problems - a third will have dyslexia (and, conversely, a third of those with dyslexia will have ADHD), and around a quarter will also have features of autism.

Milder cases may need no specialist input beyond some basic parental and educational guidance (children with ADHD do not respond well to confrontational discipline - you are generally better off using the carrot than the stick). But more severe cases need much more extensive educational and psychological support, and if that doesn't help, as it often doesn't, then it is time to consider medication.

The media has latched on to the fact that there are now 650,000 children taking Ritalin in the UK, compared with 9,000 at the start of the 1990s. But the rise is understandable given the change in awareness, evidence of long-term

of long-term harm and that Ritalin (and related drugs) are now a mainstream rather than an experimental therapy. No one likes the idea of medicating children, but studies suggest that Ritalin is a very safe drug and the effect on children (their behaviour and realisation of potential, etc) can be miraculous. Experts are not so much concerned by the number of children on the drug, but by the similar number who should be but are not because they have slipped through the net.

Like many behavioural and developmental problems, ADHD remains poorly understood. We know that there is an important genetic component (children of a parent with ADHD have a 50 per cent chance of developing it themselves) and scans show that affected children have brains structurally and functionally different from those of their peers.

It is not down to bad parenting (although this can compound the problem), nor is it as simple as too many additives or too few fish oils, although some parents find that cutting out the former and supplementing the latter helps.

I have been around long enough to remember when most doctors regarded dyslexic as little more than a middle-class adjective for "thick". Times have changed, in the NHS and in our schools, and I suspect we will look back on today's cynical coverage of ADHD in much the same way.

The National Institute for Health and Clinical Excellence (NICE) has produced guidelines on the diagnosis and management of ADHD - download a free copy at nice.org.uk

Telltale signs of ADHD

- Hyperactivity - sufferers can't sit still and are always talking.
- Inattention - difficulty in concentrating or sticking to tasks; they make lots of simple errors in classwork, are easily distracted and don't seem to listen when spoken to.
- Impulsiveness - they find it hard to wait in turn, often blurt out answers before the end of questions and butt into other people's games or conversations.
- All children will exhibit this sort of behaviour at times but in ADHD it is persistent and severe enough to disrupt school and home life.
- Not all children have all three symptoms. Hyperactivity tends to be prominent in boys, while girls are often more troubled by inattention.