

Non-drug ADHD treatments don't pan out in study

January 30 2013, by Barbara Bronson Gray, Healthday Reporter



But some experts still believe behavioral therapy can help the whole family.

(HealthDay)—Many parents pursue costly and time-consuming treatments to help their children with attention-deficit/hyperactivity disorder. Now, a new study finds little evidence that non-drug interventions reduce key symptoms of ADHD.

A multinational team of experts identified no positive effects from <u>psychological treatments</u> including mind exercises (cognitive training), neurofeedback and behavioral training (<u>positive reinforcement</u>). And the researchers discovered only small benefits associated with dietary treatments: supplementation with omega-3 and omega-6 <u>free fatty acids</u>, and elimination of artificial food coloring.

Still, parents shouldn't be discouraged, said study co-author Dr. Emily Simonoff.



"I think our findings allow a much more informed discussion than did previous work because we've been able to demonstrate that what we once thought worked is more limited and more questionable," said Simonoff, a professor of child and adolescent psychiatry at King's College London.

Simonoff thinks the study conclusions need to be interpreted in the context of a child's particular situation.

"I think people need to talk with their child's clinician," she said.

"Evidence is never a substitute for having a discussion about your own child and what is right for your child and your family."

ADHD diagnoses are on the rise. Between 1997 and 2007, diagnoses among U.S. children and teens increased between 3 percent and 6 percent a year, according to the U.S. Centers for Disease Control and Prevention. According to the American Psychiatric Association, between 3 percent and 7 percent of U.S. children have the condition, which makes it hard to focus in school and to sustain friendships. Currently, a combination of medication and behavior therapy is the recommended treatment, according to the CDC.

The new review, an analysis of 54 studies by the European ADHD Guidelines Group, compared "blinded" and "unblinded" ratings for several dietary and psychological treatments. "Blinded" raters are unaware of the treatment used, while "unblinded" judges know of the therapy. It is thought that blinded ratings eliminate bias.

The study, published online Jan. 30 in the *American Journal of Psychiatry*, found that treatments were rated more effective in the unblinded tests, which appears to invalidate the conclusions.

Even after learning of the study findings, some people might say it can't



hurt to try a particular therapy. But Simonoff warned of potential negative side effects.

"Adverse effects are often associated with pharmacological therapies, but other interventions can have them as well," she said. "For example, does a highly selective diet limit the way a child can play and socialize, making them feel different from their friends? And for parents, if a child doesn't improve under these therapies, does it affect how the parents feel about themselves?"

Dr. Andrew Adesman, chief of developmental and behavioral pediatrics at Steven and Alexandra Cohen Children's Medical Center of New York in New Hyde Park, agreed: "The danger in saying it won't hurt [to use non-drug therapies] is, where do you draw the line and what's the rationale?"

Attempting other therapies "instead of something that works," he said, results in lost time and money, false hopes, and missed opportunities.

Adesman said, however, that he was surprised that behavioral therapy was not found to be effective. "Unlike neurofeedback, elimination diets or attention training, the American Academy of Pediatrics does recommend behavioral therapy for ADHD in children," he said. "It involves psychologists working with parents to elicit better behavior in their kids, using positive and negative reinforcement, like time-outs."

Even if therapy doesn't improve the core symptoms of ADHD, such as attention span and impulsiveness, it may provide other benefits to the child and family, such as teaching effective communication strategies, Adesman said.

He also encourages parents to be open to the potential benefit drug therapy may provide.



"When I hear parents say they'll consider medicine only as a last resort, that's dangerous," he said. "Parents should confer with their child's pediatrician and discuss a range of treatment approaches and recognize that often the reason a medicine is suggested is not because of a physician's bias but rather because the data is generally stronger than for other treatments."

The European ADHD Guidelines Group received support for the study from Brain Products GMBH and drug makers Janssen-Cilag, Lilly, Medice, Shire and Vifor Pharma.

More information: Learn more about ADHD from the <u>U.S. Centers</u> for Disease Control and Prevention.

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Citation: Non-drug ADHD treatments don't pan out in study (2013, January 30) retrieved 3 July 2023 from https://medicalxpress.com/news/2013-01-non-drug-adhd-treatments-dont-pan.html

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