CHADD RESPONDS

Findings of the National Institutes of Health Promising, But Fall Short

The National Institutes of Health Consensus Conference on AD/HD resulted in a blitz of media attention, with stories published in *Time*, *USA Today*, the *Wall Street Journal*, the *New York Times*, the *Washington Post* and a host of other daily papers around the country.

While the media focused primarily on the controversies surrounding AD/HD and the fact that no single diagnostic test can confirm its presence, the conference did confirm the following points:

- 1. AD/HD is a great public health problem, causing pronounced difficulties and impairment across multiple settings.
- 2. The risks of taking stimulant treatment have been overstated. Medications are generally safe when used appropriately, and severe risks are rare.
- 3. While untreated children did have elevated patterns of substance abuse, there is no definitive evidence of increased substance abuse risk among those taking stimulant medication.
- 4. Treatment programs have only been followed for up to 14 months the impact on the child with AD/HD over longer periods of time has not been sufficiently studied.
- 5. Medication was found to be more effective than psychosocial intervention, but a combination of the two was the most effective.
- 6. There are a wide variety of diagnosis and treatment practices, and clearer guidelines are needed. AD/HD is both underdiagnosed *and* overdiagnosed, and the quality of treatment is inadequate in many settings. Very few AD/HD children and adults receive the level of treatment found to be most effective.
- 7. Most insurance policies do not provide an adequate level of coverage for AD/HD.
- 8. The current system of care is inadequate and meets needs in only a piecemeal fashion.
- 9. More research is needed on a variety of issues, most prominently: the long-term effects of treatment; development of standardized, age-sensitive diagnostic criteria; the impact of AD/HD in adults; studies of the efficacy of a reduced dose of stimulants; and studies to determine the risks and benefits associated with treating children under age 5 with stimulants.
- 10. There is a need for more school-focused programs, including the development of models for training teachers to work with AD/HD students, and for research into the level of service these children are receiving.

CHADD's Response:

CHADD leadership was pleased with the conference's findings and its recommendations for further research. The report confirmed what parents, professionals and others affected by AD/HD have known all along – that this is a serious disorder which substantially impacts the individuals and families affected by it.

While the conference did offer validation of the disorder and its seriousness, the report offers little new information for those familiar with AD/HD. Some of the most thorough and interesting presentations, such as preliminary results of NIH's MTA study, were given little recognition in this generic report. CHADD hopes to share results from this exciting research in future issues of **Attention!**

The conference also provided little in-depth information about the effects of AD/HD on the individual and family. CHADD plans to conduct a survey in the near future that will clarify the ways that AD/HD affects siblings, marital functioning, adults in the workplace, and familial structure.

The recognition AD/HD received from the NIH is a step in the right direction. It is our hope that the federal government and scientific community will listen closely to NIH's recommendations as they consider funding much-needed research on this disorder.

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