

Ethical issues of treating children with ADHD medications: Implications of high rates of misdiagnosis



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ADHD and Rates of Misdiagnosis

- Definition of Attention Deficit Hyperactive Disorder (ADHD)
 - DSM-V: “persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.”¹
- ~11% of children 4-17 yrs. have been diagnosed with ADHD as of 2011¹²
- 62% of referrals for suspected ADHD were not confirmed by a specialist²
- The CDC’s PLAY Study found that only 39.5% of children receiving medication for ADHD in SC and 28.2% in OK met the case definition for ADHD³

Given misdiagnosis rates, if a child is diagnosed with ADHD, we must consider two risk/benefit scenarios before giving medication

NO ADHD

ADHD

Risks

- Do not know the medication’s effects on children without ADHD
 - React differently to other stimulants such as caffeine⁴
- Might be gifted and bored. Should be placed in more challenging classes^{5,6}
- High levels of comorbidity with other psychiatric disorders that cause damage if not treated correctly¹
 - Conduct disorder, antisocial personality disorder
- Changes might be permanent¹⁰
- Side Effects of unnecessary medication⁷

Benefits

- Improve performance in school^{14,15}
- Cognitive enhancement
- Lessen burden on the teacher and parents

Mixed

- Personality changes
 - Increase risk taking⁸
 - Decrease sociability⁸
- Hinder Creativity?

Mixed

- Personality changes
 - Decrease Risk Taking⁹
 - Unknown effects on sociability
- Hinder creativity?

Risks

- Changes might be permanent¹¹
- Do not know long term effects in clinical trials⁷
- Side effects of the medication⁷

Benefits

- Behavioral problems and grades in the classroom improve^{14,15}
- Economic cost of not treating children who need the medication¹²
- Lessen burden on the teacher and parents
- Lowering impulsivity could help reduce the risk of injury¹²
 - Children with ADHD are at a higher risk for injury than healthy children¹²

How do you decide when risks and benefits are mixed?

Child’s Quality of life > Ease of Care

Increase advantages and decrease disadvantages for the child regardless of what they decide to pursue
Parents and teachers should try to divorce themselves from their own self-interests

Additional Concerns for Young Children

- Untested and unapproved for children under the age of 6 years old (Ritalin)⁷
- Differential effects in early childhood¹³
- Less input in the decision making process
- Less reliable diagnosis – more chance you end up in the category of misdiagnosis

Who should make these decisions?

Citations and Acknowledgements

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