

Neurofeedback and Persistence of Symptoms

IN THIS ISSUE, our research update highlights identifying factors that influence changes in ADHD symptoms over time, as well as a clinical trial testing the effectiveness of neurofeedback against medication.

INFLUENCES ON ADHD PERSISTENCE

What childhood factors predict whether ADHD persists into adulthood?

Although fifty to sixty percent of children with ADHD continue to have symptoms into adulthood, little is known about factors that predict which children will continue to meet criteria versus which children will experience major symptom reductions. This study attempted to identify child and family factors that might help us understand influences on symptom persistence versus remission into adulthood.

The authors found that higher childhood ADHD symptom severity, more co-occurring disorders (oppositional defiant disorder, for example), and greater parent mental health problems were the strongest predictors of persistence of ADHD symptoms into adulthood. This study suggests that interventions focusing on these three factors in childhood might help to prevent the longer-term persistence of ADHD symptoms and impairments.

Roy, A., Hetchman, L., Arnold, L.E., Sibley, M.H., Molina, B.S.G., Swanson, J.M., & Howard, A.L. (in press). Childhood factors affecting persistence and desistence of attention-deficit/hyperactivity disorder symptoms in adulthood: Results from the MTA. *Journal of the American Academy of Child & Adolescent Psychiatry*, epub ahead of print.

EFFECTIVENESS OF NEUROFEEDBACK

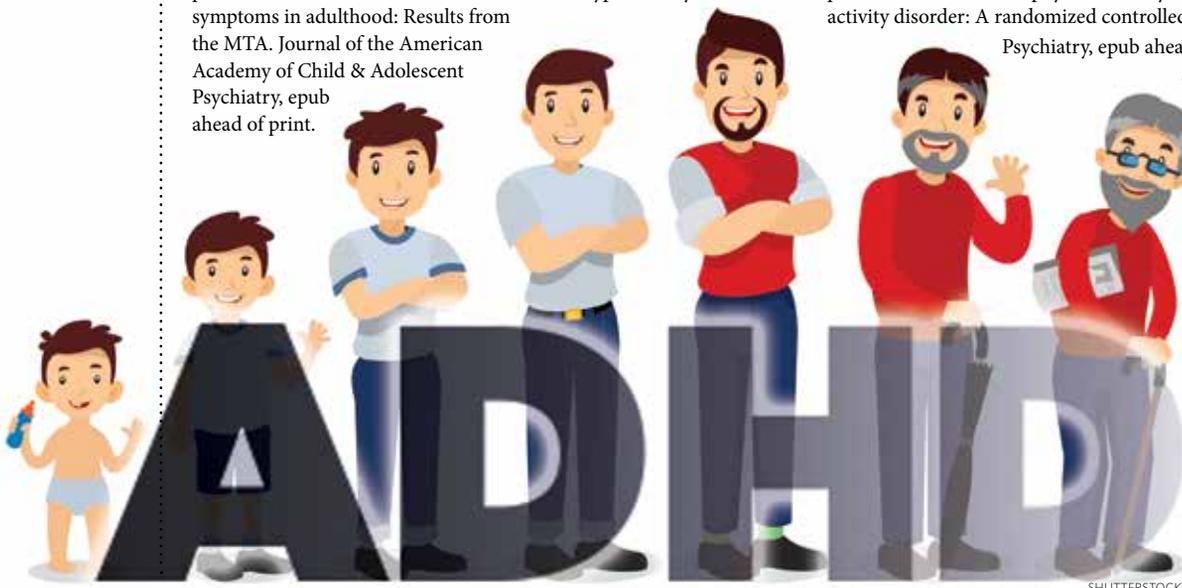
Is neurofeedback an effective alternative to medication?

Although an increasing number of families are trying neurofeedback as an intervention for ADHD, very little research has been done to test its effectiveness, especially not against the gold-standard treatment for ADHD: medication. This double-blind, randomized controlled trial compared the effectiveness of theta/beta neurofeedback, medication (methylphenidate), and a control activity (physical activity) on parent and teacher ratings of ADHD symptoms in children who were 7-13 years old.

The researchers found that optimally titrated medication produced greater reductions in parent- and teacher-reported ADHD symptoms compared to neurofeedback or physical activity. The authors concluded that the data do not support neurofeedback as a viable primary treatment for ADHD, especially given its expensive and time-consuming nature.

Geladé, K., Janssen, T.W.P., Bink, M., van Mourik, R., Maras, A., & Oosterlaan, J. (in press). Behavioral effects of neurofeedback compared to stimulants and physical activity in attention-deficit/hyperactivity disorder: A randomized controlled trial. *Journal of Clinical Psychiatry*, epub ahead of print. 

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