

PALS NEWSLETTER

A newsletter of the Pittsburgh ADHD Longitudinal Study



FDA Recommends Warning on Stimulant Use

As many of you may have heard in the news last week, an advisory panel at the FDA has recommended that stimulant drugs, like Concerta or Adderall, carry a warning about possible dangerous effects to the cardiovascular system. Adderall has had such a warning since the fall of 2004. While we have known for many years that these drugs increase blood pressure and heart rate, the risk of serious adverse events associated with their use has been quite low (the FDA's review found fewer than one reported death or life-threatening injury for every 1 million prescriptions filled for the drugs).

Much of the advisory panel's concern seems to be from the dramatic increase in stimulant prescriptions (a four fold increase from 2000 to 2004), the increased use of these drugs with adults (a 90% increase from 2002 to 2005), and the likelihood that both of these trends will continue in the years to come. As the number of prescriptions increase, so do the number of adverse events, including the serious ones. Because adults have a higher risk of heart disease and stroke to begin with, the increase in stimulant prescriptions in this age group raises additional concerns.

For our PALS participants, it is important to note that you do not have an increased cardiovascular risk solely because you took stimulant medication in childhood--the FDA's concern was not that childhood medication causes later heart problems. On the other hand, if you are currently taking stimulant medication, you should ask your physician to reassess your medical status regarding any additional risk that stimulant medication may present, especially with respect to cardiovascular functioning.

You may remember that under Dr. Pelham's direction, the ADD clinic took a very conservative approach to medication, recommending that it be used only if non medication (behavioral) treatment was not sufficient to modify behavior, and that if used, it should

Continued on Page 2

FEBRUARY 2006

PARKING INFORMATION AT OUR NEW LOCATION-- 200 MEYRAN AVE

Reserved parking is available for **PALS participants** at the following lots:

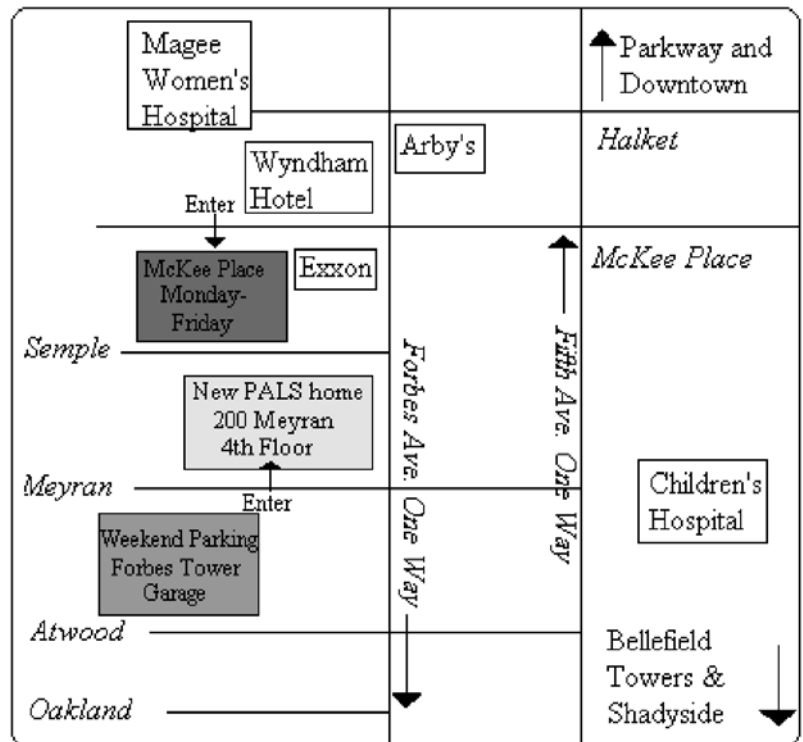


MONDAY-FRIDAY:

McKee Place parking lot (A.) behind the Exxon Station. Enter from McKee Place and tell the Attendant that you are here for an appointment at 200 Meyran Avenue.

SATURDAY AND SUNDAY:

Forbes Tower parking garage (C.) on Meyran Avenue directly across from our building. **Please bring your ticket with you and we will validate.** You will not need to pay for parking in either location.

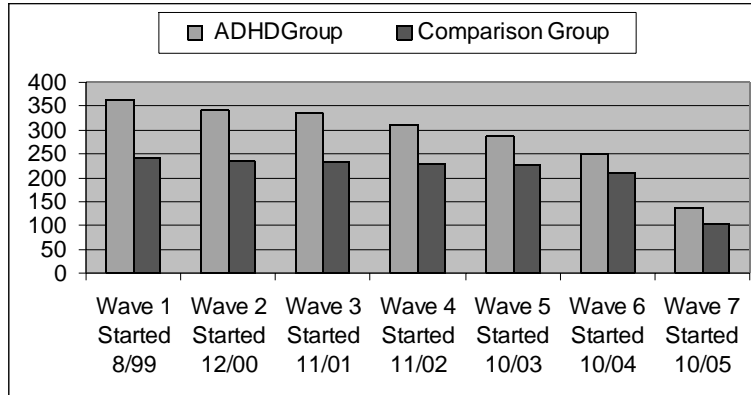


STUDY UPDATE

We are settled in our new home and have been busy conducting interviews since our move in October. In spite of sparse signage on the building, most participants have been able to find us and our reserved parking lots with little difficulty (see page 1 for map).

Visits Completed to Date

The chart shown below provides an overview of the interviews that have been completed to date at each wave, for both the ADHD group and the Comparison group. We continue to see high participation rates across both groups, and across waves, which strengthens the results of our study. Thanks to each of you for helping to make this possible.



Wave 7 Marches On

In October, 2005, we started our seventh annual round of interviews, and have completed more than 240 visits to date (approximately 39% of the entire group). Letters have gone out to everyone whose Wave 6 visit was prior to May, 2005. We

send letters 9 months after your previous year's interview, allowing a couple of months for scheduling. From a data perspective, it is helpful to interview participants at the same time each year and also to interview all of the participants in one family as close together in time as possible. The Wave 7 interviews are going well—we find that most participants are completing their interviews in approximately 2 to 2 1/2 hours. The only exception to this are the 17 and 18 year old visits—for both the teenager and the parent. As you may recall, these are longest because we add adult versions of the questionnaires to the interview at these ages.

Continued from Page 1

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only be IN CONJUNCTION with behavioral treatment. During that time period, the access to behavioral treatment through the Summer Treatment Program, parent training, and school interventions in our clinic was better in Pittsburgh than was available anywhere else in the country. Most communities did not then and still do not have access to the broad array of effective treatments for ADHD that we offered from WPIC at that time.

In the intervening years medication has become the treatment method of choice recommended by most physicians for the treatment of ADHD, and access to behavioral treatment has dramatically decreased—both here in Pittsburgh and elsewhere. The decrease has occurred in large part because of the movement to managed care programs that encouraged use of medication and discouraged concurrent or alternative behavioral approaches to treatment. Dr. Pelham was quoted in a February 10, 2006 NY Times article as saying that it "would be a very good outcome for kids with ADHD and their families" if the FDA warning prompted families to explore behavioral treatments as an alternative to drugs and if this pressure from families prompted insurers, schools, and communities to improve access to psychosocial treatments.

The FDA panel also indicated a need for more study of the long-term use of ADHD drugs and to determine if there is a conclusive link between the use of stimulant medication and cardiovascular problems.



Study Findings: ADHD and Depression

Are children with ADHD at risk for depression? We recently examined this question for the adolescents in our longitudinal research. Although this may surprise you, in general we found that as a group, the children with ADHD were not at increased risk for depression in their teenage years.

This question has intrigued ADHD researchers for some time, because results are inconsistent across studies. Clinicians and parents believe that children with ADHD *should* be at risk for several reasons. First, mothers of children with ADHD are more likely to have depression than mothers of children without ADHD. Because these kinds of problems tend to run in families, it would seem that children with ADHD should have this problem too. Second, most children with ADHD continue to have difficulties in a number of areas, including school, behavior problems, social, and family relationships, in adolescence. Presumably, self-esteem would suffer and depression could result.

We discovered in our adolescent follow-up data that only 8.8% of the teens with childhood ADHD met diagnostic criteria for a depressive disorder, versus 5.0% of the teens without childhood ADHD. Although these rates may seem different, they are not different enough to be “statistically significant”, which means that this difference could simply have occurred by chance alone.

We wondered whether persistence of ADHD symptoms, or significant behavior problems, might capture a subgroup of teens at risk for depression. Not all children with ADHD continue to have problems into adolescence. The first hypothesis was not supported. We found no differences in rates of depression between ADHD “desisters” (10.3% depressed) versus ADHD “persisters” (8.2% depressed). However, there was some support for the second hypothesis. Among the teens with diagnosable behavior problems (i.e., Oppositional Defiant Disorder or Conduct Disorder) in adolescence, we found a higher rate of depressive disorder (12.5% versus 3.6% for those without behavior problems). Moreover, we found that the children with behavior problems in childhood were more likely to have depression in adolescence. Interestingly, symptoms of depression or anxiety in childhood did not predict depression in adolescence.

Taken together, the findings suggest that as a group, children with ADHD are not at elevated risk for depression in the teenage years. Research has yet to determine whether this result would also apply to girls, because most of the individuals in our research are male. Furthermore, it is unclear whether the same finding would occur in adulthood. Previous research has found slightly higher rates of depression among adults with childhood ADHD, but this finding needs to be replicated. There does appear to be some modest risk of depression in adolescence if behavior problems are present, so parents and clinicians should be attentive to this potential problem. Treatments would thus need to target not only depression but also the behavior problems that may, in fact, be contributing to the depression vulnerability.

Important Study Phone Numbers

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If you need to change or cancel your study appointment, please call Joanne at (412) 246-5656.



200 Meyran ~ Historically speaking.... Last fall, Walter Kidney, an architectural historian with the Pittsburgh History and Landmarks Foundation provided us with some interesting information about our new home. Sadly, Mr. Kidney died in December. He was the author of nine books about Pittsburgh buildings, rivers and bridges and was considered the "dean of Pittsburgh architectural historians". In an email, Mr. Kidney told us that 200 Meyran Avenue was originally known as the Vanadium Building. It was built in 1911 by the Flannery Brothers, industrialists who promoted vanadium as a steel alloy. While the Flannery Brothers owned the building, Madame Marie Curie, who also shared an interest in minerals, visited Pittsburgh and the building. The building is the design of the architect Frederick John Osterling, who also designed the Iroquois Apartments across the street. The building originally contained a beautiful stained glass window that has recently been painstakingly restored and installed at the Heinz History Center in the Strip District. The window was created by the Rudy Brothers who came to Pittsburgh in 1894 to make windows for the HJ Heinz Company.



**Vanadium window,
by Rudy Brothers Studio, c. 1912**

Designed by the Rudy Brothers Studio of Pittsburgh, this window is an example of the American Opalescent pictorial style of stained glass, popularized by Louis Comfort Tiffany. The center of the window features an angel holding a sign reading "Vanadium". The design is developed purely by manipulating different types of glass, colors, and textures. Unlike medieval glass, where a lot of black paint was used, the only places that are painted here are the faces, the arms, and the hands. Layers of two, three, and four pieces of glass are built up to develop colors and textures. The window was a gift of the History and Landmarks Foundation and restoration was underwritten by the Hillman Foundation, Inc.

*Courtesy of the "Historical Society of
Western Pennsylvania"*

Thanks to Louise Sturgess, Executive Director,
PHLF for her assistance compiling this
information.

Need help filing your taxes?

Income Tax Assistance is available through the Volunteer Income Tax Assistance (VITA) program. VITA is a program comprised of volunteers that offer free tax assistance to people that cannot afford professional assistance in filing their taxes. Volunteers help to prepare basic tax returns for individuals with low-to-moderate incomes. To be eligible for a VITA program, individuals must have an income below \$36,000 for the 2005 tax year. For more information or to find VITA program locations in Allegheny County, contact the United Way at 412-255-1155 or visit the Pennsylvania Department of Public Welfare website at <http://www.dpw.state.pa.us> and enter the keyword "VITA".

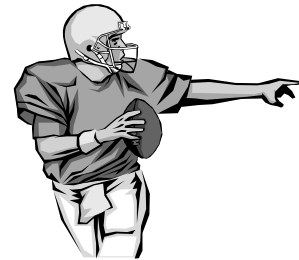


Congratulations to the Pittsburgh Steelers!



Test your Black and Gold.....

- Who caught Terry Bradshaw's longest TD pass?
- Who recovered the most fumbles in Steelers history?
- Who invented the "Terrible Towel"?
- Who is the only player to win the Steelers MVP award 3 times?
- Which Steeler had the most Pro Bowl appearances
- Who was coach Bill Cowher's favorite Steeler while he was a teenager?
- Which player holds the record for most games played by a Steeler?



HOF Center Mike Webster with 220 games.

Jack Lambert, of course!

"Mean Joe" Greene made the Pro Bowl 10 times

Rod Woodson (1990, 1993, and co-winner in 1988).

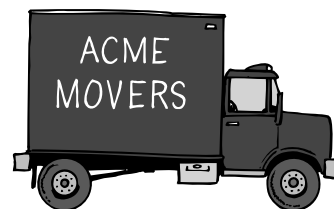
Myron Cope

Jack Ham, 21

effort at Seattle in 1981

QB Mark Malone caught a 91 yarder from Bradshaw in a losing

Answers:



Adults w/ ADD for Pittsburgh & TriState Area CHADD International Chapter #477 Upcoming Meetings

March 30, 2006

Thomas Bellucci, M.Ed., M.P.M.
"Getting Organized & Making Life Work through the Use of Technology" ADD

April 27, 2006

Brooke Molina, Ph.D., Director
ADD Research Program
Associate Professor of Psychiatry and Psychology,
University of Pittsburgh
Western Psychiatric Institute and Clinic
"The Connection between ADD, Drugs, Alcohol, & Medications" With Updates on The Pittsburgh ADHD Longitudinal Study.

Regular Meetings are held the 4th Thursday of each month at Western Psychiatric Institute and Clinic, Room 292, 3811 O'Hara St. at DeSoto St. in Oakland (7:00 to 9:30 pm). For additional information or for a complete listing of 2006 meetings, contact Leslie Stone at 412-682-6282 or slesliestone@aol.com.

If you have moved, plan on moving or changed your telephone number, please contact Joanne at (412) 246-5656 to provide us with updated information.

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