ATTENTION DEFICIT AND COMORBID DISORDERS

FREQUENCY OF ROLANDIC SPIKES IN ADHD

The frequency of rolandic spikes in nonepileptic children with attention deficit hyperactivity disorder (ADHD) was compared with a control group of normal school-aged children in a study at the University of Frankfurt, Germany. The EEGs of 483 ADHD outpatients between 2 and 16 years evaluated prospectively showed rolandic spikes in 27 (5.6%); (23 boys and 5 girls, mean age 7.9 years). Seizures during follow-up occurred in 1 (3.7%) of the 27 patients with ADHD plus rolandic spikes, and none of the 456 ADHD children without rolandic spikes. Sex ratio and global functioning were similar in ADHD patients with and without spikes. ADHD children with spikes presented earlier and exhibited more hyperactive-impulsive symptoms than those without spikes. ADHD-combined type was more common than ADHD inattentive type in children with rolandic spikes. One third of the patients in both groups had comorbid conduct or oppositional defiant disorder. (Holtmann M, Becker K, Kentner-Figura B, Schmidt MH. Increased frequency of rolandic spikes in ADHD children. Epilepsia 2003;44:1241-1244). (Reprints: Dr med M Holtmann, JW Goethe-University of Frankfurt/M, Department of Child and Adolescent Psychiatry, Deutschordenstrasse 50, D-60590 Frankfurt/M, Germany).

COMMENT. Approximately one in 20 children with ADHD have rolandic spikes in the EEG, and boys out number girls by 4:1. The authors recommend EEG recordings in ADHD patients with cognitive and behavioral problems, even without clinical seizures or family history of epilepsy. Stimulant therapy in conservative doses may be safe in children with ADHD and well-controlled epilepsy. Further study is required to determine if AED treatment is justified in ADHD patients with rolandic spikes but without seizures.

ADHD AND OPPOSITIONAL DEFIANT DISORDER

The outcome of 131 children with ADHD (101 males, 30 females; mean age 5 years, range 3 to 7 years) with and without oppositional defiant disorder (ODD) was determined in a prospective study at the University of Goteborg, Sweden. Full DSM-IV criteria for ODD were present in 60% of ADHD patients, and only 10 were free of all symptoms of ODD. ADHD combined subtype, males, and children of divorced parents and of mothers with low socioeconomic status were particularly at risk of ODD. ADHD patients with ODD showed more ADHD symptoms than those without ODD. (Kadesjo C, Hagglof B, Kadesjo B, Gillberg C. Attention-deficit-hyperactivity disorder with and without oppositional defiant disorder in 3- to 7-year-old children. Dev Med Child Neurol Oct 2003;45:693-699). (Respond: Cristopher Gillberg MD, PhD, Department of Child and Adolescent Psychiatry, Goteborg University, Kungsgatan 12, SE-411 19, Goteborg, Sweden).

COMMENT. The prevalence of association of ADHD and ODD indicates the importance of inclusion of work-up for both disorders in children presenting with either diagnosis.