

ADHD: Tampa Dr. Nelson Mane Warns, “Are you aware that ADHD medication may stunt your child’s growth?”

While most are aware that the stimulant medications prescribed for ADHD can cause side effects such as decreased appetite, weight loss, dry mouth, constipation, insomnia and nervousness. Many are not aware that there is some evidence to suggest these may stunt your child’s growth. As a Doctor who treats children with ADHD, I am always dealing with children on these medications and feel parents should be informed. Let’s look at information from Drugs.com.

Concerta Side Effects:

Get emergency medical help if you have any of these signs of an allergic reaction: hives; difficulty breathing; of your face, lips, tongue, or throat.

Stop taking Concerta and call your doctor at once if you have any of these serious side effects:

- *fast, pounding, or uneven heartbeats;*
- *feeling like you might pass out;*
- *fever, sore throat, and headache with a severe blistering, peeling, and red skin rash;*
- *aggression, restlessness, hallucinations, unusual behavior, or motor tics (muscle twitches);*
- *easy bruising, purple spots on your skin; or*
- *dangerously high blood pressure (severe headache, blurred vision, buzzing in your ears, anxiety, confusion, chest pain, shortness of breath, uneven heartbeats, seizure).*

Less serious Concerta side effects may include:

- *stomach pain, nausea, vomiting, loss of appetite;*
- *vision problems;*
- *sweating, mild skin rash;*
- *dizziness;*
- *nervous feeling, sleep problems (insomnia); or*
- *weight loss.*

This is not a complete list of side effects and others may occur. Tell your doctor about any unusual or bothersome side effect.

Also, most people are not aware that the American Heart Association recommends a heart check before putting a child on methylphenidate and there were some reports of sudden death and heart problems in Canada. Most are not aware of some research suggesting these medications can stunt your child’s growth. Granted more studies are needed and this is not conclusive but the studies are out there and parents should be aware.

Slowing of growth in height and weight on stimulants: a characteristic pattern.

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OBJECTIVE: The aims of the present study were to describe the growth pattern of children starting stimulant medication and to analyze the changes over time in height, weight and height velocity in a cohort of treated patients. **METHODS:** Retrospective review of growth data from files of all newly treated patients with attention-deficit/hyperactivity disorder in one pediatric practice. Forty-four boys and seven girls were treated for 6-42 months with either dexam-phetamine (n = 32) or methylphenidate (n = 19). **RESULTS:** During the first 6 months on stimulant medication 44 children (86%) had a height velocity below the age-corrected mean and there was weight loss in 39 (76%). The height and weight standard deviation score (SDS) showed a progressive decline that was statistically significant after 6 and 18 months (P < 0.001, paired t-test). The height velocity was significantly attenuated for the first 30 months (P < 0.01), being lowest during the first 6 months. The mean height deficit during the first 2 years was approximately 1 cm/year. The change in weight SDS was 2.4 times the change in height SDS after 30 months on treatment with a significant correlation (Pearson's correlation coefficient r = 0.88, P < 0.001). **CONCLUSIONS:** Stimulant medication is associated with a decrease in height and weight SDS during the first 6-30 months with a characteristic pattern on the growth chart.

Growth on stimulant medication; clarifying the confusion: a review.

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AIMS: To get an overview of the studies of growth in height in children with attention deficit hyperactivity disorder (ADHD) treated with stimulant medication, to establish the consistencies and to try to resolve the discrepancies. **METHODS:** Twenty nine studies were reviewed following a Medline search: 22 related to children, six to late adolescents or adults, and one to children and adults. **RESULTS:** Children: Eleven studies gave results consistent with height attenuation on stimulant medication: eight were longitudinal, one was cross-sectional, and two showed growth rebound on ceasing medication. Studies with negative findings were inadequately powered ($n = 3$), lacked controls or statistical analysis ($n = 3$), measured height velocity without reference to treatment duration ($n = 2$), or used inappropriate growth parameters ($n = 1$), controls ($n = 1$), or normative data ($n = 1$). Late adolescents/adults treated with stimulant medication in childhood: Two studies associated childhood gastrointestinal side effects with attenuated late adolescent or adult height; all six cross-sectional studies had negative findings. The methodologies varied widely but there was some consistency in the degree of attenuation shown in studies with positive findings. The most sensitive methods analyzed the changes in z-scores (standard deviation scores) or calculated the height deficits from paired measurements taken before and after an initial period of treatment with stimulant medication. The height deficit amounted to approximately 1 cm/year during the first 1-3 years of treatment. **CONCLUSIONS:** Further research is needed into the causal mechanisms, the rate of physical maturation, and the long term implications for final stature.

We use a sensory motor hemispheric approach that is drug free and we strive to make improvements in your child so his pediatrician can reduce this medication when appropriate. These articles were hard for me to find but they are out there and I thought parents should be informed.

Dr. Mane offers one on one consultations as well as Group Seminars for parents and children who suffer from Autism Spectrum Disorders. If you are interested in scheduling a consultation or to attend a seminar please call 813-935-4744. For more information about Dr. Nelson Mane, D.C. and his treatment approach for ASD go to <http://www.manecenter.com/ADHD.htm>.