

What proportion of children treated with medications for ADHD also receives psychotherapy?

Global Medical Education Update

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Gellad et al. Geographic variation in receipt of psychotherapy in children receiving attention-deficit/hyperactivity disorder medications. JAMA Pediatr. 2014 Nov;168(11):1074-6. PubMed PMID: 25243391.

Why this paper is important?

It is not known what proportion of children on ADHD medications also receives psychotherapy. Mental health clinicians are often accused of “just medicating” children with ADHD and, therefore, need to know the facts.

This paper should make the mental health profession, our professional associations, and advocacy groups think more about whether these children are getting optimum treatment.

Background

ADHD is common and a lot of children are on ADHD medications.

Non-pharmacological treatment may be preferred by many parents.

A combination of medication and psychotherapy is probably best for most patients.

Methods

This was a database study based on insurance claim data for commercially insured children.

Children and adolescents, up to 17 years of age, were included if a prescription for an ADHD medication had been filled for them and they had been continuously enrolled in an insurance plan during a one year period.

Individuals with comorbid autism or pervasive development disorder were excluded.

County level data on supply of licensed psychologists was also obtained.

Counties with very few children on ADHD medications (generally, smaller and more rural counties) were excluded.

The primary outcome was the receipt of at least one outpatient psychotherapy visit (individual, group, or family) in that year, identified using current procedural terminology codes.

In addition, the authors also looked at receipt of four or more therapy visits and at eight or more therapy visits.

Statistical adjustments were made for age, sex, and the presence of comorbid psychiatric conditions.

Results

301,530 children receiving ADHD medication were included in the analyses.

The mean age was about 12 years and 70% were male.

25% of these children at least one psychotherapy visit in the same year that they had filled a prescription for an ADHD medication.

This percentage varied greatly from one county to another.

13% of children had at least four therapy visits.

7% of children had at least eight therapy visits.

Interestingly, the percentage of children receiving psychotherapy was not closely associated with the number of licensed psychologists in that county.

Conclusions

Only a quarter of commercially insured children receiving ADHD medication received any psychotherapy.

In almost 200 counties, less than 10% of children receiving ADHD medication received therapy.

Medication-only treatment is consistent with guidelines for school-aged children, but it may not be ideal for many patients.

Clinical Commentary

We need to be thoughtful in “triaging” children and adolescents with ADHD to the appropriate type of therapy. That is, we need to think about which patients with ADHD may be treated with medication alone and which ones must get psychotherapy in addition.

When psychotherapy is provided, general supportive psychotherapy should not be considered to be adequate. The psychotherapy should be specific to the problems of that child or that family, and must be delivered with enough skill and frequency to have a clear benefit.