CLINICAL CAPSULES

ADHD Can Arise After Head Injuries

Secondary attention-deficit hyperactivity disorder was diagnosed in 15 of 103 children (15%) aged 5-14 years who were assessed 12 months after a traumatic head injury, said Jeffrey E. Max, M.B., of the University of California, San Diego, and his colleagues.

Secondary ADHD was significantly associated with several new-onset disorders, such as personality change, 6-12 months after the injury. Of 82 children who returned after 24 months, 17 (21%) were diagnosed with secondary ADHD, and many of the same new-onset conditions remained (J. Am. Acad. Child Adolesc. Psychiatry 2005;44:1041-9).

Children with lower preinjury adaptive function and greater preinjury psychosocial adversity were more likely to develop secondary ADHD. But the condition was not associated with age, sex, preinjury psychiatric disorder, or family psychiatric history.

Popular Ethnic Students Likely to Smoke

Popular nonwhite middle-school students were significantly more likely to smoke than were less popular peers, according to data from 1,486 sixth- and seventh-grade children in 16 southern California schools, said Thomas W. Valente, Ph.D., and his associates at the University of Southern California, Alhambra.

The ethnic makeup of the schools was primarily Hispanic and Asian; when classified as white or nonwhite, the association between popularity and smoking was significant among nonwhite children only. Popularity was associated with increased smoking by an adjusted odds ratio of 5.1 and with an increased susceptibility to smoking by an adjusted odds ratio of 5.6 (J. Adolesc. Health 2005;37:323-9). Popularity was assessed by asking students to name their closest friends and to name students who would be good leaders for a classroom project.

Bipolarity Affects Bowel Behavior

Encopresis and enuresis were more common in a cohort of 93 children and adolescents aged 7-16 years with early adolescent bipolar disorder I phenotype, compared with 81 children with ADHD and 94 healthy controls, wrote Tricia Klages and her colleagues at Washington University in St. Louis.

There were no significant differences in age, gender, or pubertal status among the groups. Encopresis (15% vs. 3%) and enuresis (22% vs. 6%) were significantly more common among prepubertal and early adolescent bipolar disorder I phenotype (PEA-BP) children compared with healthy controls. Although both conditions were more prevalent among PEA-BP children compared with ADHD children, the differences were not statistically significant (J. Am. Acad. Child Adolesc. Psychiatry 2005;44:1050-7). Maternal hostility appeared to be a significant factor; it was noted for 59% of subjects overall, and was significantly more common in children with encopresis than with nonencopretic children (92% vs. 56%).

Teen Opioid Treatments Compared

A combination of buprenorphine and behavioral intervention was significantly more effective than clonidine and behavioral intervention for the treatment of opioid dependence in adolescents, said Lisa A. Marsch, Ph.D.—who conducted the study while at the University of Vermont, Burlington—and her colleagues.

The randomized, double-blind, controlled study lasted for 28 days and included 36 adolescents aged 13-18 years who met the DSM-IV criteria for opioid dependence (Arch. Gen. Psychiatry 2005;62:1157-64). The flexible dosing procedure was based on weight and self-reported opioid use. Overall, significantly more adolescents in the buprenorphine group stayed in treatment (72%), compared with the clonidine group (39%). In addition, 61% of the buprenorphine group participated in the naltrexone phase of the study, which required three opioid-negative urine samples within a week, compared with 5% of the clonidine group.

CBT Benefits Endure for OCD Patients

Cognitive-behavioral therapy provided relief for children and adolescents with obsessive-compulsive disorder at 12-18 months' follow-up, said Paula Barrett, Ph.D., of Griffith University in Brisbane, Australia, and her associates. In a study of 48 participants aged 8-19 years, 70% of those in individual therapy and 84% of those in group therapy were free of OCD diagnosis at 12 months (J. Am. Acad. Child. Adolesc. Psychiatry 2005;44:1005-14). There were no significant changes in these numbers at 18 months, which suggests that children who were diagnosis free at the end of the treatment period tended to remain healthy.

Most of the patients (83%) received no additional treatment, including therapy or medication, in the time between the end of the CBT program and follow-up.

—Heidi Splete