

Britain: Ritalin ban recommended for children under five years of age

Liz Smith
9 September 2000

The National Institute for Clinical Excellence (NICE), an independent watchdog that rules on the appropriate use of drugs, is to recommend that Ritalin should not be given to children under five years of age. Whilst it may still be prescribed for older children, there will be clearer definitions of the conditions for its use.

Ritalin (methylphenidate), an amphetamine-like stimulant, was referred to NICE by Health Secretary Alan Milburn. It is prescribed for children who are diagnosed as having Attention Deficit Hyperactivity Disorder (ADHD).

ADHD is defined as “developmentally inappropriate inattention and impassivity, with or without hyperactivity”. Symptoms attributed to the condition include distraction, impatience and difficulty concentrating. It occurs in children of both sexes, but is diagnosed four times more frequently in boys. However, it is a condition whose clinical recognition is disputed by some in the medical profession.

In the last decade prescriptions for Ritalin virtually doubled every year. However, last year only 157,900 prescriptions were issued compared to 126,500 the year before following growing fears over the increasing use of drugs to treat hyperactivity among children, some as young as two. Steve Baldwin, professor of clinical psychology at Teeside University, has consistently opposed the prescription of Ritalin. He said, “There's definitely the start of a levelling off. Doctors are getting very worried about prescribing it.”

In the BBC documentary entitled *Kids On Pills*, screened earlier this year, Baldwin described the effect of Ritalin on children: “Apparently the child is improving but what's really happening is there is less behaviour and the emotion is cut off and the feeling is cut off, and what we're left with is children that behave like robots and zombies.”

Parents concerned about the side effects the drug is

having on their children have taken out court proceedings against doctors and drug companies. In the North-West, a group of parents are trying to bring to account doctors they claim have ignored the manufacturer's recommendations that Ritalin only be prescribed for children over five, and then only for a month at a time. In Texas, parents are taking action against Norvatis Pharmaceuticals, the manufacturer of Ritalin, for an alleged failure to warn of its impact on children's cardiovascular and nervous systems. Overload, a charity based in Scotland, is pursuing action against various National Health Service Trusts in connection with the side effects suffered by children while on psychotropic drugs.

A new lobby group, Stimulants Are Not The Answer (Santa), has also been set up to press for legislative changes that will tighten up the availability of Ritalin. Their website (www.santa.inuk.com) opposes the notion that ADHD is caused by a brain disorder for which stimulant medication is the only effective answer. They stress that to find the right treatment; ADHD should not be regarded as a single specific disorder but an umbrella term for all kinds of possible problems that can lead to uncontrollable behaviour. The problem must generally be viewed as a social/psychological issue, rather than a biological one, they insist.

Santa's coordinator Eileen Tracy recently told the *Independent* newspaper; “In France they have hardly any incidence of ADHD. If you want to put a child on a stimulant, you have to go to a hospital, you can't just go to a GP [General Practitioner].”

Richard DeGrandpre, an American pharmacopsychologist, author of *Ritalin Nation*, says that ADHD is not a medical condition but a result of today's rushed society, which causes vulnerable children to crave stimuli. He says that whilst Ritalin is chemically different to cocaine, its effects are the same. It works by feeding the craving with a backdrop of stimulation, but gives the

children the opposite of what they need, which is a calmer, quieter, more engaged routine to wean them away from their need for continual sensation.

Recently a study published in the *Journal of Sleep Research* cited sleep deprivation among children as another factor that leads a number of them to be misdiagnosed as either having ADHD or suffering a mental illness. The study carried out in Holland found that large numbers of children are either not sleeping long enough, or their sleep is of poor quality. According to their findings, one in four children aged between nine and 14 years of age do not feel rested at school and 15 percent have sleep problems.

The main cause cited for this increase in sleep problems was the turning of bedrooms into entertainment centres with television and video games, more permissiveness about bedtimes and working parents returning home late and keeping children awake longer in order to enjoy time with them. The report concluded: "Children who feel better rested display a more positive self-image, more achievement motivation, have more control over their aggressive behaviour, are less bored and are more receptive to their teacher."

Professor Gregory Stores, head of research into child sleep disorders at Oxford University, said that children's sleep suffers as a result of them being wound-up before settling. He explained that the symptoms of many sleepless children were misleading because they are unlike those of adults. Such pupils deprived of sleep tend to display hyperactivity, as well as being irritable, depressed, inattentive and disruptive. As a result they can be wrongly diagnosed as having ADHD and be put on Ritalin, which only makes the problem worse.

Extreme neglect due to poverty and instability in the home is also a common contributory factor to sleeplessness and hunger, which leads to many of the behaviour patterns described by Stores.



To contact the WSWs and the
Socialist Equality Party visit:

wsws.org/contact