

Evidence shows family therapy can work just as well as medication to treat attention problems in children and adolescents

Bjornstad G, Montgomery P

The Bottom Line:

There is some evidence to show that behavioural family therapy works just as well as medication in treating the core symptoms of [Attention Deficit/Hyperactivity Disorder \(ADHD\)](#) in children and adolescents. This may be an attractive option for many families, who would rather their children not take medication. However, the findings came from only two studies so more research is necessary.

What problem is being addressed?

[Attention Deficit/Hyperactivity Disorder \(ADHD\)](#) affects approximately 5% of school-aged children. Of that group, about 10 to 13% of children and adolescents with ADHD are unable or unwilling to take the medications usually prescribed for this condition. It is important to know if there is an alternative treatment that is as effective as medication.

What intervention is being tested?

This review looked at the evidence for the effectiveness of family therapy in managing the core symptoms of ADHD. Family therapy was compared to either no treatment or a standard treatment that included a medication component for some participants.

What is the *real scientific* evidence?

The systematic review conducted on this topic included only two studies, both of them involving behavioural family therapy. This therapy uses elements of parent/child training based on behavioural principles to teach parents how to manage their children's behavior.

Results from the two studies suggested that if medication is not desirable, then behavioural family therapy can be just as effective as treatment using medication, and is more effective than a placebo (a treatment with no effect).

There was no difference in effectiveness between the behavioural treatment and the usual treatment, which, for about 2/3 of the families, included medication.

+++

The preceding is a summary of:

Bjornstad G, Montgomery P. *Family therapy for attention-deficit disorder or attention-deficit/hyperactivity disorder in children and adolescents*. The Cochrane Database of Systematic Reviews 2005, Issue 2. Art. O.: CD005042.pub2. DOI: 10.1002/14651858.CD005042.pub2.