



# Working With Families Who Inquire About Complementary and Integrative Medicine for ADHD



## WHEN A PARENT WISHES TO DISCUSS COMPLEMENTARY AND INTEGRATIVE MEDICINE (CIM)

While the evidence base for the effectiveness of CIM as a treatment of the ADHD core symptoms of hyperactivity, inattention, and impulsivity is lacking, this information is provided to clinicians as a framework for discussions with patients and parents.

Approximately 50% to 64% of parents of children with ADHD report using complementary and integrative medicine (CIM) to treat ADHD symptoms. The most common CIM interventions vary by geographic location, availability, and parental demand, and they may change frequently. Families may voice a desire to investigate or use CIM, for one or more stated reasons, such as

- To maximize a child's potential
- To improve overall health and quality of life
- To avoid the potential side effects of stimulant medications
- To complement more conventional therapies
- To have more control over treatment
- To do “everything possible” for the child

Parents often wish to discuss CIM use with their child's primary care clinician but hesitate to do so for a variety of reasons, including the belief that clinicians do not feel the need to know about CIM use and the perception that most clinicians know very little about CIM. Such discussions, however, provide an opportunity to learn about and understand a family's values and attitude toward treatment and can greatly enhance the therapeutic alliance.



## ARMED TO DISCUSS CIM: A FRAMEWORK FOR CLINICIANS

### Ask

Ask parents about their experiences with CIM: “Have you tried any nonmedical treatments to help your child's attention or behavior? For example, some families use special diets, avoid certain foods, or add certain vitamins or other supplements.”

- a. If yes: “What have you tried and how useful was it?”
- b. If no: “Are you interested in trying these kinds of therapies or have you considered using them? If so, which ones?”

### Respect

1. Use an integrative approach that emphasizes health and wellness of the child in the context of the family.
  - a. Better sleep hygiene, more exercise, and good nutrition are all part of a healthy lifestyle for everyone.
  - b. Consider thinking about the positives of trying some complementary or integrative therapies.
2. Understand what parents see as important treatment goals (eg, cure, manage symptoms better, prevent negative outcomes related to ADHD, minimize dosage or side effects of stimulant medication, promote child's health and build resilience, promote family's well-being and quality of life, simplify treatment).



**ARMED TO DISCUSS CIM: A FRAMEWORK FOR CLINICIANS (continued)**

**Monitor**

1. Establish measurable outcomes of treatment. What are the parents' priorities for change (eg, target symptoms or behaviors for the child; how parents, siblings, and teachers respond to child's behaviors)?
2. Clarify expectations for treatment. What is a realistic degree of improvement within a given time frame (eg, expecting a child who currently requires reminders for every step of the morning routine to become completely independent within a week is unrealistic)?
3. Reevaluate the therapy if there is no response or harm.

**Educate**

**Families**

1. Encourage parents to bring in their own research on CIM to discuss with the clinician. Their research includes what they have read and what they have learned from other families and their own experience.
  - a. Differentiate between scientific-sounding marketing and actual scientific evidence.
  - b. Appraise the scientific evidence cited for all interventions.
  - c. Discuss potential risks and benefits of all reasonable therapies for the child and family unit. What potential trade-offs might there be for trying a CIM therapy before a behavioral intervention or stimulant medication (eg, potential time lost from other therapies, draining of family's financial resources, effect on high-stakes educational testing)?
  - d. Decide whether to recommend use of intervention, tolerate it, monitor it closely, or discourage it depending on whether the therapy is likely to be effective and safe.

**Clinicians**

2. Become familiar with specific CIM therapies used by your patients.
3. Search available databases for potential interactions with other medications, herbs, or supplements.
4. Consult the Resources section on the next page.



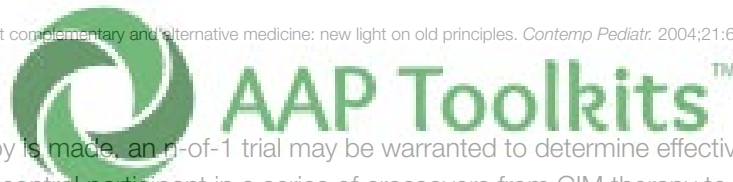
**ARMED TO DISCUSS CIM: A FRAMEWORK FOR CLINICIANS (continued)**

**Distribute**

Provide credible information about CIM (see the Resources section later on this page).

		Is the therapy effective?	
		YES	NO
Is the therapy safe?	YES	RECOMMEND	TOLERATE
	NO	MONITOR CLOSELY OR DISCOURAGE	DISCOURAGE

Derived from Kemper K, Cohen M. Ethics meet complementary and alternative medicine: new light on old principles. *Contemp Pediatr.* 2004;21:65.



If the decision to try the therapy is made, an n-of-1 trial may be warranted to determine effectiveness. In such a trial, the child serves as his or her own control participant in a series of crossovers from CIM therapy to routine care or placebo (if available), using objective measures and blinded raters (eg, teacher, non-primary caregiver). N-of-1 trial is traditionally used for stimulant medications and can be adapted for other therapies as long as they act immediately. It does not work well for long-term therapies such as vitamin or mineral supplements or fish oil supplements, which may take weeks or months to build up in the system.

**RESOURCES**

**General Information (for Parents and Professionals)**

- Center for Drug Information and Natural Products at the Massachusetts College of Pharmacy and Health Sciences: 617/732-2759 or [www.mcphs.edu/patient-centers/center-for-drug-information-and-natural-products](http://www.mcphs.edu/patient-centers/center-for-drug-information-and-natural-products)
- Drug, herbs and supplements. MedlinePlus website. <https://medlineplus.gov/druginformation.html>. Accessed March 11, 2019
- Kemper KJ. *Mental Health, Naturally: The Family Guide to Holistic Care for a Healthy Mind and Body*. Elk Grove Village, IL: American Academy of Pediatrics; 2010
- National Center for Complementary and Integrative Health fact sheets: [www.nccih.nih.gov](http://www.nccih.nih.gov)
  - “Children and the Use of Complementary Health Approaches”
  - “Finding and Evaluating Online Resources”



## RESOURCES (continued)

### General Information (for Parents and Professionals) (continued)

- “Safe Use of Complementary Health Products and Practices”
- “6 Things to Know When Selecting a Complementary Health Practitioner”
- “5 Tips: What Consumers Need to Know About Dietary Supplements”
- National Institutes of Health Office of Dietary Supplements: <https://ods.od.nih.gov>

### Evidence and Alerts for Safety, Interactions, and Effectiveness

- CAM on PubMed database of citations and abstracts of peer-reviewed scientific studies: <https://nccih.nih.gov/research/camonpubmed>
- Chan E. Quality of efficacy research in complementary and alternative medicine. *JAMA*. 2008;299(22):2685–2686
- Committee on the Use of Complementary and Alternative Medicine by the American Public Board on Health Promotion and Disease Prevention. *Complementary and Alternative Medicine in the United States*. Washington, DC: National Academies Press; 2005. [https://www.nap.edu/catalog.php?record\\_id=11182](https://www.nap.edu/catalog.php?record_id=11182). Accessed March 11, 2019
- Consumer protection. National Institutes of Health Office of Dietary Supplements website. <https://ods.od.nih.gov/HealthInformation/consumerprotection/sec.aspx>. Accessed March 11, 2019
- Health and fitness. Federal Trade Commission Consumer Information website. <https://www.consumer.ftc.gov/health>. Accessed March 11, 2019
- Natural Medicines comprehensive database: <https://naturalmedicines.therapeuticresearch.com>
- Quackwatch: [www.quackwatch.org](http://www.quackwatch.org)

### CIM Education Resources for Professionals

- American Academy of Pediatrics Section on Integrative Medicine: [www.aap.org/en-us/about-the-aap/Sections/Section-on-Integrative-Medicine/Pages/SOIM.aspx](http://www.aap.org/en-us/about-the-aap/Sections/Section-on-Integrative-Medicine/Pages/SOIM.aspx)
- Culbert TP, Olness K. *Integrative Pediatrics*. New York, NY: Oxford University Press; 2010
- *Evidence-Based Complementary and Alternative Medicine* journal: [www.hindawi.com/journals/eCAM](http://www.hindawi.com/journals/eCAM)
- Online Continuing Education series. National Center for Complementary and Integrative Health Online website. <https://nccih.nih.gov/training/videlectures>. Accessed March 11, 2019
- Online learning. Consortium of Academic Health Centers for Integrative Medicine website. <https://imconsortium.org/training-jobs/online-learning>. Accessed March 11, 2019
- Pediatric Complementary and Alternative Medicine Research and Education Network: [www.pedcam.ca](http://www.pedcam.ca)
- Kemper KJ. *Addressing ADD Naturally: Improving Attention, Focus, and Self-discipline With Healthy Habits in a Healthy Habitat*. Bloomington, IN: Xlibris Corp; 2010
- Kemper KJ. *Mental Health, Naturally: The Family Guide to Holistic Care for a Healthy Mind and Body*. Elk Grove Village, IL: American Academy of Pediatrics; 2010



## RESOURCES (continued)

### Consensus Statements on CIM

- American Academy of Pediatrics Committee on Children With Disabilities. Counseling families who choose complementary and alternative medicine for their child with chronic illness or disability. *Pediatrics*. 2001;107(3):598–601
- Kemper KJ, Vohra S, Walls R; American Academy of Pediatrics Task Force on Complementary and Alternative Medicine and Provisional Section on Complementary, Holistic, and Integrative Medicine. The use of complementary and alternative medicine in pediatrics. *Pediatrics*. 2008;122(6):1374–1386

### CIM Therapies for Attention-Deficit/Hyperactivity Disorder

- Chan E. Complementary and alternative medicine in developmental-behavioral pediatrics. In: Wolraich ML, Drotar DD, Dworkin PH, Perrin EC, eds. *Developmental-Behavioral Pediatrics: Evidence and Practice*. Philadelphia, PA: Mosby Elsevier; 2008:259–280
- Chan E. The role of complementary and alternative medicine in attention-deficit hyperactivity disorder. *J Dev Behav Pediatr*. 2002;23(1)(suppl):S37–S45
- Newmark S. *ADHD Without Drugs: A Guide to the Natural Care of Children With ADHD*. Tucson, AZ: Nurtured Heart Publications; 2010
- Rojas NL, Chan E. Old and new controversies in the alternative treatment of attention-deficit hyperactivity disorder. *Ment Retard Dev Disabil Res Rev*. 2005;11(2):116–130
- Special issue: novel therapies for developmental disabilities. *Ment Retard Dev Disabil Res Rev*. 2005;11(2):107–170

