

**RESOLVED: Psychosocial treatments are unnecessary in ADHD**  
**FOR THE AFFIRMATIVE**

‘Man is a riddle  
not because he is an animal,  
not because he is a social being,  
not as part of nature and society.

It is as a person that he is a riddle – just that precisely;  
it is because he possesses personality’

**Nikolai Berdyaev (1944)**

## **Nomothetic aspects of phenomena:**

-those features of a given, particular phenomenon that are able to be validly and reliably demonstrated in groups of individuals with a particular disorder or a range of disorders

## **Ideographic aspects of the individual:**

-those features of a given, particular individual that are not able to be validly and reliably demonstrated in groups of individuals with a particular disorder or a range of disorders  
*that is*  
aspects of an individual can be truly unique

**Case studies: anecdotal, unrepeatable, uncontrolled, unrepresentative, subjectively interpreted**

Farmer A. The demise of the published case report-is resuscitation necessary? B J Psychiatry 1999; 174: 93-94

**Individual history examination may identify pattern(s) that are predictive of future behaviour, feelings and attitudes (ideographic approach), while examination of group differences (nomothetic approach) may not be applicable to the individual because psychological causation is always personal and never actuarial-generalisations are not binding on the individual**

Allport GW. 1947. The use of personal documents in psychological science.

New York: Social Science Research Council

## Per, Paul and Espen Askerlad

(Norwegian folktale, 1979)

A man once had three sons - Per, Paul and Espen Askerlad. The king wanted a magic tree cut down in the side of a rocky hill. He offered a reward of half his kingdom and his daughter's hand in marriage.

Per, Paul and Espen Askerlad set off to claim the king's reward. They soon came to the side of a hill and heard the sound of some chopping: Per and Paul thought that some 'woodcutters were just working' while Espen Askerlad decided that he *had to have a look anyway - just to find out!* He scaled the side of a hill and found a magic axe that could cut down the stoutest of trees.

“Good day, you have chopped down many trees!”, said Espen Askerlad.

“Yes, I have kept busy while I waited for someone to find me!” said the magic axe. ‘Now you have found me let us away..’.

Espen Askerlad placed the axe carefully in his backpack and joined his brothers. ‘Anything up on the hill?’ they asked. dozing in the sun. ‘Oh, only an axe..’, said Espen Askerlad.

They soon reached the king’s magic tree and Per and Paul dropped dead exhausted from trying to cut the tree down. Espen Askerlad then took out his axe and set it to work: soon, there was no tree left. The king gave him his reward and decreed that *never again should people stop wondering in vain.*

## Outline of this presentation

[1] ADHD – some key historical issues

[2] ADHD – definitional issues

[3] ADHD – current key aetiological factors

[4] a philosophical reflection on the word  
'necessary' ....

[5] a way forward – both biological and psychosocial  
treatments are necessary for the optimal  
management of ADHD

## [1] ADHD – some historical perspectives

-Clouston (1899):

**“undue brain reactivity to mental and emotional stimuli”**

-Still (1902):

**“defect of moral control due to a delay in the brain’s development”**

-Tredgold (1908):

**“inherited brain defect-neuropathic diathesis”**

-Bradley (1937):

**“benzedrine-improved behaviour and school performance”**

## [2] ADHD – definition

Diagnostic nosology-some comments:

DSM-IV definition of a mental disorder-

A mental disorder is conceptualized as

a clinically significant

*behavioural or psychological syndrome or pattern* that occurs  
in an individual

and

is associated with *present distress or disability* (impairment in one or more areas of functioning) or significantly increased risk of suffering, death, pain or disability or an important loss of freedom

## [2] ADHD-definition

Diagnostic nosology-some comments

in children and adolescents-

clinically significant, that is developmentally inappropriate, pattern of symptoms has to be associated with clinically significant impairment in social, academic, occupational or other important areas of functioning

clinically significant impairment has to be judged relative to children of the same age, gender and IQ

## [2] ADHD definition

Diagnostic nosology-some comments

within a developmental context

symptom patterns and associated impairment  
in social, academic, occupational or other important areas  
of functioning

need to be monitored longitudinally so the clinician can  
accurately assess the child

[1] within their current developmental phase and

[2] across developmental phases as each child develops

## [2] ADHD definition

### Diagnostic nosology-some comments

multi-informant report

parent,  
teacher  
child

low concordance repeatedly shown

varies between externalising and internalising disorders

externalising: parent-teacher: increased agreement

internalising: child-teacher: increased agreement

## [2] ADHD-definition

### Category versus dimension-some comments

hence

a dimensional perspective of symptom patterns used to make a diagnosis can provide additional evidence that the symptom patterns are indeed in the clinical range

normally distributed dimension:

mean, median, mode-equal

within 1 standard deviation:	68% values lie
within 1.5 standard deviations:	81.8% values
within 2 standard deviations:	95.5% values lie
within 3 standard deviations:	99.7% values lie

## [2] ADHD definition

### Category versus dimension-some comments

debate: characteristics of individuals and groups of individuals at the extremes of a normal distribution are essentially the same as those individuals that lie closer to the mean

example: hyperactivity      quantitative trait loci theory

versus category both similar and different to dimension

## [2] ADHD-definition

Comorbidity within a developmental context

-some comments

comorbid disorders in which there can be symptom overlap

ADHD:

ODD/CD

anxiety disorders

depressive disorders

learning disorders (language-based/visuo-spatial)

developmental coordination disorder

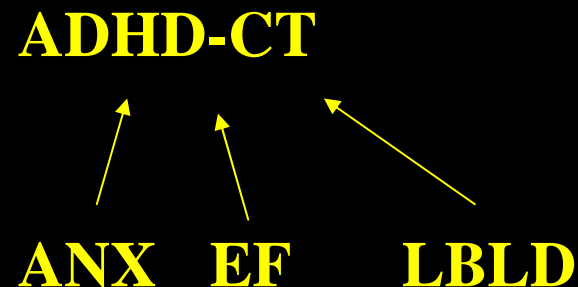
explained by developmental psychopathology constructs of equifinality and multifinality

## **-Developmental Psychopathology model**

‘an evolving interdisciplinary scientific perspective that elucidates the interplay between the biological, psychological and social contexts of normal and abnormal development across the life course’  
(Cicchetti, 2001)

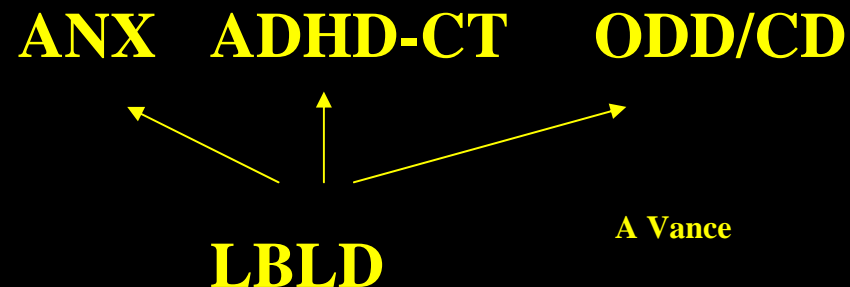
- equifinality:

more than one precursor/antecedent being associated with a given factor



-multifinality:

a given precursor/antecedent being associated with multiple factors



- risk factors and resilience factors are interdependent in a given individual (eg a hostile critical primary caregiver relationship may be a risk factor at age 3 and a resilience factor at age 13 in a given individual)
- assessment and treatment involves [1] identifying biological, psychological, social, cultural and developmental risk and resilience factors and their relative importance in a given individual and [2] biological and psychological treatments used alone or in conjunction to achieve specific goals informed by the relative priorities of these risk and resilience factors
- monitoring of treatment resides primarily with the clinician in association with the individual in the treatment process
- clear biological risk factors or resilience factors identified

## **[3] ADHD - key current aetiological risk factors**

### Executive functioning

Response inhibition: motor and cognition  
**optimise response speed and accuracy**

Working memory: verbal and visuospatial  
**optimise span and strategy**

### **[3] ADHD - key current aetiological risk factors**

**Mood dysregulation:**

**decrease irritability**

**increase emotional salience**

**Arousal dysregulation:**

**optimise physiological arousal**

**optimise habituation**

## **-In contrast, key family/parenting risk factors**

parental psychopathology – type, severity, insight

parental relationships – confiding, attuned, responsive,  
problem solving, flexible  
adaptive, affect regulated

family relationships - confiding, attuned, responsive,  
problem solving, flexible  
adaptive, affect regulated

peer relationships - confiding, attuned, responsive,  
problem solving, flexible  
adaptive, affect regulated

## [2-3] Summary

- disorder requires impairment that is developmental stage inappropriate, given gender and IQ
- longitudinal and multi-informant assessment with categorical and dimensional measures needed
- threshold effects mean that biological systems and environment operate differently once threshold crossed
- comorbid conditions with ADHD are the norm
- developmental psychopathology is a heuristic model that incorporates the above

## **[2-3] Summary**

**-particular advances in**

**the executive functioning constructs of working memory  
and response inhibition**

**mood dysregulation**

**arousal dysregulation**

**have allowed specific biological vulnerabilities of ADHD with  
and without its key comorbid conditions to be elucidated**

**-[4] 'necessary'**

**from a philosophical perspective,  
suggests that an entity is a fundamental  
prerequisite that is indispensable  
'that can not be done without'**

**therefore to be unnecessary suggests  
that an entity is dispensible and  
'can be done without'**

**[5] hence**

**at the most parsimonious**

**it is acceptable that psychosocial treatments are  
as unnecessary in ADHD as biological  
treatments are unnecessary in ADHD**

**although the weight of nomothetic evidence  
supports biological risk factors in ADHD for  
which biological treatments are emerging  
over non-descript diffuse psychological treatments**

# calvin and HOBBS

BY WATSON

