

Clonidine therapy for attention deficit hyperactivity disorder in children

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Twenty children with attention deficit hyperactivity disorder (ADHD) were recruited to evaluate the effect of clonidine administration. Clonidine was given as an initial dose of 3 mg/kg/day in the evening. The dose was gradually increased weekly and divided BDS or TDS according to child's response or appearance of side effects. All cases were subjected to psychometric studies including assessment of activity level (the Arabic version of Conner's rating scale) and IQ (Stanford Binet test). Hemoglobin estimation and EEG evaluation were also done. Clonidine therapy decreased significantly the activity score with respect to pretreatment level, this score showed significant rise after clonidine withdrawal. The activity score was significantly higher in those with low hemoglobin level compared with normal hemoglobin group. Generalized activity in EEG was detected in 55% of cases and there was not any significant relation between presence or absence of abnormal EEG pattern and the activity score either before or after treatment. Clonidine administration is recommended with children especially those who are primarily impulsive, unreflective but not for distractability and should be combined with iron therapy in cases with low hemoglobin level.