

Title	Pharmacological and non-pharmacological therapies for adults with attention-deficit/hyperactivity disorder: Systematic review and meta-analysis of clinical evidence
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Aim

To inform the development of clinical practice guidelines on pharmacological and psychological treatments in adults with attention deficit/hyperactivity disorder (ADHD) in both the general and prison populations.

Conclusions and results

Thirty-three randomized controlled trials were included in the review. The available evidence suggests that amphetamine, methylphenidate (MPH), atomoxetine (ATX), cognitive behavioural therapy (CBT), meta-cognitive therapy, and hypnotherapy are associated with greater ADHD symptom reduction compared with placebo or supportive therapy and that the use of MPH is associated with better function and cognitive skills. There were no studies addressing the adult prison population or the combination of pharmacotherapy and psychotherapy.

Methods

A peer-reviewed literature search, limited to English language documents published between January 1, 2006 and March 10, 2011 was performed. Two reviewers independently screened the titles and abstracts of the retrieved publications and independently evaluated the full-text publications for final article selection. Randomized controlled trials were eligible for inclusion if they involved adult patients with ADHD (18 years or older), compared pharmacological treatment with placebo or compared psychotherapy with supportive therapy, and reported outcomes that were related to patient safety or clinical efficacy. Data synthesis and analyses were performed using the Cochrane Review Manager software, RevMan 5.0, using a fixed-effects model, where appropriate.

Further research/reviews required

Large, well-designed trials that specifically address the treatment of ADHD in adults are needed to accurately assess the impacts on quality of life and ADHD-associated morbidities.

Written by

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