



Recommendation 1562 (2002)¹

Controlling the diagnosis and treatment of hyperactive children in Europe

Parliamentary Assembly

1. The Parliamentary Assembly is concerned that increasing numbers of children in certain Council of Europe member states are being diagnosed as suffering from “attention deficit/hyperactivity disorder” (ADHD), “hyperkinetic disorder” or related behavioural conditions and treated by means of central nervous system stimulants, such as amphetamines or methylphenidate, which are controlled drugs listed in Schedule II of the 1971 United Nations Convention on Psychotropic Substances because they have been judged by the World Health Organisation to be liable to abuse, to constitute a substantial risk to public health, and to have little to moderate therapeutic usefulness.
2. This issue is of particular concern to the Council of Europe as a human rights organisation which aims, among other things, to protect the rights of children and to seek European responses to social and health problems including drug use. The Parliamentary Assembly underlines, in accordance with the United Nations Convention on the Rights of the Child, that in all actions concerning children the best interests of the child must be a primary consideration. Moreover, children have the right to the highest standard of health and medical care attainable, and to protection from the illicit use of drugs.
3. Although their precise causes are unknown, the validity of ADHD and hyperkinetic disorders, defined in terms of persistent and severe behavioural symptoms centred on inattention, hyperactivity and impulsiveness, and resulting in functional impairment, is widely recognised by professional medical, psychological and scientific organisations, including the World Health Organisation. However, the Assembly is concerned that two different sets of criteria are applied in diagnosing these disorders: one adopted by the American Psychiatric Association and used worldwide, the other, more stringent, by the World Health Organisation. The Assembly considers that the basis for these different standards should be examined with a view to clarifying and harmonising the criteria governing diagnosis and treatment.
4. The consensus view is that these behaviourally defined disorders can significantly impair the social, educational and psychological development of some children, resulting in poor self-esteem and emotional and social problems, and severely hampering attainment of their educational potential. The symptoms of ADHD may continue into adolescence and adulthood, and may be accompanied by continuing emotional and social problems, resulting in unemployment, criminality and substance abuse. The toll on those suffering from these disorders, as well as on their families and on society cannot be measured precisely, but may be considerable.
5. Controversy surrounding ADHD hinges not only on whether it may validly be described as an abnormality or disease, but above all on whether it is justified to treat such cases with central nervous system stimulants, which some psychiatric studies have shown to be effective in reducing the symptoms of those diagnosed, allowing them to focus more on what they are doing and reducing their hyperactivity, but whose long-term effects are uncertain and which cannot effect a cure.
6. The Parliamentary Assembly, emphasising that the precautionary principle should prevail where doubt exists in regard to the long-term effects of medicaments and aware that behavioural disorders of childhood and adolescence, like all mental and behavioural disorders, are known to stem from a complex interaction of

1. Text adopted by the Standing Committee, acting on behalf of the Assembly, on 29 May 2002 (see Doc 9456, report of the Social, Health and Family Affairs Committee, rapporteur: Mr Brînzan).



biological, psychological and social factors, believes that stricter control should be exercised over the diagnosis and treatment of these disorders. The Assembly also considers that more research should be conducted into the impact of proper tutoring and educational solutions for children exhibiting ADHD symptoms, into the behavioural effects of such medical problems as allergies or toxic reactions, and into alternative forms of treatment such as diet.

7. The Parliamentary Assembly has been disappointed that to date the pharmaceutical industry has not always acted in a way which takes into account the values and principles of the Council of Europe; it wishes to ensure that in future the medical and scientific community and the pharmaceutical industry act in the best interests of society in general, and urges the Committee of Ministers to monitor the situation.

8. Therefore, the Parliamentary Assembly recommends that the Committee of Ministers:

instruct the European Health Committee, in consultation with the Pompidou Group, the European Committee for Social Cohesion, the Steering Committee on Bioethics and the Steering Committee on Education, and in close co-operation with the appropriate international organisations:

- a. *to make a study of the diagnosis and treatment in Europe of children showing symptoms of attention deficit/hyperactivity and similar disorders;*
- b. *to identify best practice fully reflecting the rights and interests of such children; and*
- c. *to draft a recommendation to the governments of the member states designed to review the diagnosis and treatment of children showing symptoms of attention deficit/hyperactivity and similar disorders based on the precautionary principle and on the ethical standards corresponding to the values and principles of the Council of Europe;*

invite the Pompidou Group, in co-operation with the appropriate international organisations, to strengthen guidelines on the promotion of psychotropic drugs;

invite the governments of the member states:

- a. *to monitor more closely the diagnosis and treatment of children showing symptoms of attention deficit/hyperactivity and similar disorders;*
- b. *to co-ordinate and step up research into the prevalence, causes, diagnosis and treatment (in particular alternative treatments, such as diet) of these disorders, and in particular into the long-term effects of the psychostimulants prescribed for treatment as well as into the possible social, educational and cultural factors involved;*
- c. *to produce information material designed for parents of hyperactive children explaining what possibilities exist for improving their condition;*

invite the World Health Organisation, in co-operation with the American Psychiatric Association, to re-examine the basis of their diagnostic criteria respectively for hyperkinetic disorder and ADHD with a view to clarifying and harmonising the criteria governing diagnosis and treatment.