

Abstract of thesis entitled:

**BACKGROUND:** Numerous clinical trials demonstrate the efficacy of medication and behavioral treatment for Attention-Deficit/Hyperactivity Disorder (ADHD) in children, but provision of behavioral treatment for ADHD is limited in community clinics and only the pharmacological treatment is the standard care for children with ADHD. The current study evaluated the treatment effectiveness of combining psychosocial treatment to methylphenidate and to compare this combined treatment with medication alone in treating ADHD in children of a community mental health center in Hong Kong. Psychosocial treatment consisted of parent training and child intervention. The treatment group for children was a 24-week problem solving, anger coping, and social skills training program. Parent training consisted of 18 weekly sessions, highlighting parenting as an integration of elements of cognition, emotion, and behavior, as well as introducing effective parenting techniques based on social learning principles.

**METHOD:** A group of 146 consecutive child patients with ADHD symptoms attending Yaumatei Child Psychiatric Center were invited for screening their eligibility of participating in this study. A randomized group comparison design was used with two treatment conditions (medication-only; combined medication and psychosocial treatment) and four assessment time points. Ninety eligible child-parent dyads were randomly allocated to the combined treatment condition or medication-only condition. Treatment outcomes were assessed in multiple domains

at pre-intervention and post-intervention, and at 6-month and 12-month follow-ups.

Data was analyzed through intent-to-treat mixed-effects regression model.

**RESULTS:** Regarding ADHD symptoms, children in combined treatment condition showed significantly greater improvement than those given medication alone at post-treatment assessment. Combined treatment also proved better than medication alone in several other domains, such as oppositional behavior, a child's performance on computerized test, parenting behavior, and parental accurate knowledge of ADHD. Parental treatment-related attributions were also found to be changing over the course of treatment. Follow-up assessments revealed that children in the combined treatment condition maintained greater reduction in oppositional behavior one year after the completion of psychosocial treatment.

**CONCLUSIONS:** The combined treatment condition not only yielded significantly greater benefits than the medication-only condition on primary ADHD symptoms, but also other advantages in terms of conduct problem and adaptive functioning outcomes.

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## 摘要

背景：雖然經眾多臨床控制的研究證明，藥物治療和行爲治療能有效治療注意力不足過動症，但是社區的診療中心大多只提供藥物治療，而甚少採用行爲治療。本研究旨在評估香港的社區診療中心對注意力不足過動症的治療效果，集中比較單一藥物治療（哌甲酯“methylphenidate”）和合併治療（哌甲酯和心理介入）的成效。心理介入包括親職訓練和爲患童而設的訓練。兒童團體治療共 24 節，每週一次，主題包括訓練解決問題、控制情緒和社交技巧。家長團體訓練共 18 節，每週一次，重點強調家長的管教行動與其想法和心情互爲影響。訓練亦包括傳授以社會學習論（social learning principle）爲基礎的有效管教方法。

研究方法：本研究以隨機分組設計（randomized group companion design），比較兩組（單一藥物；合併治療）於四次評估結果的分別。146 名在油麻地兒童精神科求診的兒童獲邀參與本研究，符合條件者共 90 位，以隨機分派編入單一藥物組或合併治療組。治療成效的評估包括前測、後測、6 個月及 12 個月的追蹤測試。數據以（intent-to-treat mixed-effects regression model）作分析。

結果：合併治療比單一藥物治療更有效減少注意力不足過動症的症狀和改善患童的服從性以及其在電腦測試中的表現，家長的管教行爲和對注意力不足過動症的正確認識也較佳。家長對子女行爲的歸因（attribution）方式隨治療過程中改變。一年後的追蹤評估顯示合併治療明顯地減少了對抗行爲。

總結：合併治療比單一藥物治療更能減少注意力不足過動症患者的症狀，也能改善患者其他的行爲。