

Cognitive Behavioral Therapy for Children With Anxiety and Comorbid Attention-Deficit/Hyperactivity Disorder

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Abstract

Objective

1. To determine whether comorbid ADHD diagnosis (including subtype) predicts response to cognitive behavior therapy (CBT) for anxiety in children. 2. To examine change in ADHD symptoms after treatment of primary anxiety.

Method

A sample of 842 children 5 to 18 years of age received CBT for a primary anxiety disorder. A subsample of 94 children met criteria for comorbid, mild-to-moderate ADHD, mostly comprising Predominantly Inattentive ($n = 61$) and Combined ($n = 27$) subtypes. Outcome was defined as response (change in diagnostic severity) and remission (absence of the primary diagnosis) at each timepoint (posttreatment, 3- and/or 6-month follow-up) and analyzed using linear and logistic mixed models.

Results

Neither ADHD diagnosis nor subtype predicted response or remission rates for children's primary anxiety disorders. Children with ADHD also showed modest yet significant improvements in ADHD symptoms after CBT treatment for anxiety.

Conclusion

Our findings support the suitability of manualised group-based CBT for anxiety treatment in children with non-primary ADHD. Further research should examine whether the positive outcomes reported can be extended to children with primary or severe ADHD.