Risk-of-Bias and Quality-of-Evidence for Treatment of ADHD with Stimulant Medication

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Abstract

Storebø and colleagues provide a concise summary of two Cochrane reviews about benefits and harms of treatment of ADHD with methylphenidate: (1) a review of 185 randomized controlled trials that estimated benefits (e.g., moderate-to-large reduction in teacher-rated ADHD symptoms), and (2) a review of 260 non-randomized trials that estimated harms (e.g., infrequent serious but frequent non-serious adverse events). They also mention (without providing much detail) additional information from the structured Cochrane methodology about the risk-for-bias in the trials reviewed (assessed as being high) and quality-of-evidence of the outcomes considered (rated as being very low). This led to the conclusion that "the jury is still out on benefits and harms." A similar conclusion of the first review generated an extensive debate in the literature. Some details will be summarized and discussed here to provide context in case the recent review and the summary by Storebø and colleagues revive the debate.