Do ADHD and frontal epilepsy have the same characteristics?

No registrations found.

Ethical review	Not applicable
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON28942

Source
NTR

Health condition

Frontal epilepsy
ADHD
Executive functions
Frontale epilepsie
Executieve functies

Sponsors and support

Primary sponsor: not applicable
Source(s) of monetary or material Support: SEIN

Intervention

Outcome measures

Primary outcome

Working memory.

Secondary outcome

1. Cognitive flexibility;

2. Sustained attention;

3. Inhibition;

4. Working pace;

5. Behaviour.

Study description

Background summary

ADHD is a behavioural diagnosis, while frontal lobe epilepsy is a medical diagnosis. However, children with frontal lobe epilepsy show cognitive problems, resulting in learning and behavioural problems, which are also seen in children with ADHD. Those problems mainly involve executive dysfunction (working memory, cognitive flexibility, inhibition, sustained attention and working pace). Usually, children with frontal epilepsy and children with ADHD receive similar advice and treatment, sometimes with medication for behavioural problems. Some children have both diagnoses. There are many studies to distinguish epilepsy in general from ADHD. Yet, studies to give insight in the neuropsychological profile of children with frontal epilepsy are rare, let alone studies to distinguish children with frontal lobe epilepsy from children with ADHD in terms of executive functioning. Studies hypothesise that there is a difference between those groups and that further research is needed. Other studies, where ADHD behaviour in other neurological disorders have been compared to ADHD, showed a difference between the two.

Study objective

Children with frontal epilepsy have more executive functionproblems then children with ADHD.

Study design

Working memory:

This will be assessed using digit span of the WISC-III-NL (Wechsler, 2005) and two tests of the FEPSY: recognition task and corsi block (Moerland, Aldenkamp, Alpherts, 1988).

Cognitive flexibility:

This will be assessed using one test of the FEPSY: classification (Moerland et al. 1988).

Inhibition:

This will be assessed using the Stroop (Ridley, 1935) and two tests of the FEPSY: bkg & srt (Moerland et al. 1988).

Sustained attention:

This will be assesses using one test of the FEPSY: vigilance (Moerland et al. 1988).

Working pace:

Visual and auditory reaction times will be measured using the FEPSY: reaction times; motor speed will be measured using the FEPSY: tapping (Moerland et al. 1988).

Behaviour:

Both parents and teacher will complete the following questionnaires to asses behaviour:

1. BRIEF (Smidts & Huizinga, 2009);

2. CBCL (Verhulst, van der Ende & Koot, 1996);

3. TRF (Verhulst, van der Ende & Koot, 1997);

4. AVL (Scholte & van der Ploeg, 1999).

Parenting style and interaction: a structured clinical interview (needs to be developed).

Intervention

Neuropsychological testing.

Contacts

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Eligibility criteria

Inclusion criteria

1. Children aged 8-12 years;

2. Diagnosed with frontal lobe epilepsy or ADHD as diagnosed by the DSM-IV criteria (American Psychiatric Association, 2000);

3. IQ > 70 (testing no older than 2 years) or if not tested before academic scores not lower then C (CITO);

4. Ability to understand and read Dutch.

Exclusion criteria

1. Coexisting psychiatric disorder as diagnosed by the DSM-IV criteria (American Psychiatric Association, 2000);

2. Coexisting medical disease which can influence testing;

3. Treatment with psychiatric medication which can influence testing;

4. Specific epilepsy syndromes in which children can deteriorate.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Parallel
Allocation:	Non-randomized controlled trial

Control: N/A , unknown

Recruitment

NL

Recruitment status:	Pending
Start date (anticipated):	01-09-2012
Enrollment:	80
Type:	Anticipated

Ethics review

Not applicable

Application type:	Not applicable

Study registrations

Followed up by the following (possibly more current) registration

ID: 41600
Bron: ToetsingOnline
Titel:

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL3408
NTR-old	NTR3551
CCMO	NL41630.044.12
ISRCTN	ISRCTN wordt niet meer aangevraagd.
OMON	NL-OMON41600

Study results

Summary results
N/A