

Do ADHD and frontal epilepsy have the same characteristics?

Gepubliceerd: 31-07-2012 Laatste bijgewerkt: 15-05-2024

Children with frontal epilepsy have more executive function problems than children with ADHD.

Ethische beoordeling	Niet van toepassing
Status	Werving nog niet gestart
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON28942

Bron

NTR

Aandoening

Frontal epilepsy
ADHD
Executive functions
Frontale epilepsie
Executieve functies

Ondersteuning

Primaire sponsor: not applicable

Overige ondersteuning: SEIN

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Working memory.

Toelichting onderzoek

Achtergrond van het onderzoek

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.

Doel van het onderzoek

Children with frontal epilepsy have more executive function problems than children with ADHD.

Onderzoeksopzet

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 assessed 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 assess 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).

Onderzoeksproduct en/of interventie

Neuropsychological testing.

Contactpersonen

Publiek

Dr. Denekampweg 20
L. Berg, van den
Zwolle 8025 BV
The Netherlands
+31 (0)38 8457184

Wetenschappelijk

Dr. Denekampweg 20

L. Berg, van den
Zwolle 8025 BV
The Netherlands
+31 (0)38 8457184

Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

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 than C (CITO);
4. Ability to understand and read Dutch.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

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.

Onderzoeksopzet

Opzet

Type: Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel: Parallel

Toewijzing: Niet-gerandomiseerd

Controle: N.v.t. / onbekend

Deelname

Nederland

Status: Werving nog niet gestart

(Verwachte) startdatum: 01-09-2012

Aantal proefpersonen: 80

Type: Verwachte startdatum

Ethische beoordeling

Niet van toepassing

Soort: Niet van toepassing

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

ID: 41600

Bron: ToetsingOnline

Titel:

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

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

Resultaten

Samenvatting resultaten

N/A