

COMMENT. Practitioners in this rural community are marching to a different drummer than that proposed by the DSM criteria for the diagnosis and usage of stimulant medication for ADHD. Why some of these children were started, and maintained on stimulants for periods longer than is usual, and others left untreated, is unexplained. Questions posed by Dr Dulcan in her editorial note and as yet unanswered draw attention to possible overenthusiasm in usage of stimulants by one or two physicians, differences in the population in this area, and an apparent under estimate of ADHD diagnostic symptoms because stimulants were working. Perhaps there are criteria for stimulant usage not included in the DSM diagnoses.

Stimulant-associated adverse events. The confirmation of a correlation between tics and stimulants should introduce a reason for caution and avoidance of indiscriminate over-prescribing. Other under-emphasized but troublesome adverse effects of excessive dosage are possible cardiac problems.

An 8-year-old patient, recently presenting in our clinic for neurologic consultation, was reported to be taking 4 capsules of sustained-release methylphenidate, a total of 80 mg daily, for ADHD. A systolic heart murmur was detected, and an electrocardiogram revealed a prolonged QT interval. A few days following the discontinuance of stimulant treatment, a repeat ECG was reported normal. In the office, there was no evidence of hyperactivity, distractibility, or impulsive behavior, either on or off medication. During summer vacation, a teacher report was unavailable to confirm or refute symptoms of ADHD reported by the parents.

DEVELOPMENTAL AND DEGENERATIVE DISABILITIES

EXTREMELY PRETERM INFANTS AND NEUROLOGIC DISABILITY

Of 308 surviving children, born at 25 or fewer weeks of gestation in the United Kingdom and Ireland, 283 (92%) were examined at a median age of 30 months, and results reported from the School of Human Development, University of Nottingham, UK. Mean scores on the Bayley Mental and Psychomotor Developmental Indexes were 84 and 87, respectively. Nineteen percent (53 children) had severely delayed development (>3 SD below the mean), and 11% (32) had scores from 2 SD to 3 SD below the mean. Ten percent had severe neuromotor disability, 2% were blind, and 3% were hearing impaired. Overall, almost 50% were disabled, boys more than girls. (Wood NS, Marlow N, Costeloe, et al, for the EPICure Study Group. Neurologic and developmental disability after extremely preterm birth. *N Engl J Med* August 10, 2000;343:378-384). (Reprints: Dr Marlow, Academic Division of Child Health, Level E East Block, Queen's Medical Centre, Nottingham NG7 2UH, UK).

COMMENT. In a large cohort of extremely preterm infants evaluated at a mean age of 2 and 1/2 years, one half of all survivors had a disability involving mental and psychomotor development, neuromotor function, or sensory and communication function. One quarter were severely disabled. Of those with abnormal motor function, 75% were diagnosed with cerebral palsy.