COMMENT. The loss of previously acquired language in young children is the most prominent feature of autistic regression and Landau Kleffner syndrome and requires early specialized evaluation and intervention. The most common age for regression to occur is in the second year, but referral to a pediatric neurologist or child psychiatrist is often delayed for 3 or 4 years, when regression has become more global and associated with cognitive and behavioral disorders, seizures, and autism. An EEG to rule out ESES and Landau Kleffner syndrome could lead to early steroid trials and possible surgical treatment. The occurrence of seizures and EEG abnormalities, often associated with autistic regression, might require treatment with antiepileptic drugs.

ATTENTION DEFICIT DISORDERS

PRESCHOOL CHILDREN WITH ADHD

Differences in behavioral, social, and school functioning of 58 preschoolage (3 -5 years) children with attention deficit/hyperactivity disorder and 36 normal controls were examined at Lehigh University, Bethlehem, PA. Parent and teacher behavior ratings showed more problem behavior and impaired social skills in ADHD children. The parents of ADHD children experienced greater stress, they were less adapted to coping, and were more likely to exhibit negative responses toward their children. ADHD children showed more negative social behavior in preschool settings, were more noncompliant, their behavior was inappropriate during task situations, and they scored significantly lower on a test of preacademic skills. (DuPaul GJ, McGoey KE, Eckert TL, VanBrakle J. Preschool children with attention-deficit/hyperactivity disorder: impairments in bahavioral, social, and school functioning. LAM Acad Child Adolesc Psychiatry May 2001;40:508-515). (Reprints: Dr DuPaul, School Psychology Program, Lehigh University, 111 Research Drive, Bethlehem, PA 18015).

COMMENT. Preacademic skills and preschool classroom behavior should be evaluated in young children with ADHD so that parent training techniques in child management may be taught and introduced early (see Ped-Neur Briefs April 2001;15:28-29). Preschoolers with ADHD exhibit more than twice the level of noncompliance and five times the inappropriate behavior of control children when asked by parents to complete tasks. Parents' coping skills are also deficient and their responses more negative. Child disruptive and negative social behavior is common during unstructured, free-play activities in preschool classrooms. ADHD children have lower scores on cognitive tests and will enter school at an academic disadvantage, unless the problem is addressed early.

PSYCHOSTIMULANTS IN PRESCHOOL CHILDREN WITH ADHD

A retrospective chart review of 27 preschool children with ADHD who were treated with psychostimulants between 3 and 5 years of age, inclusive, was conducted at the Kennedy Krieger Institute, Johns Hopkins University School of Medicine, and the University of Maryland School of Medicine, Baltimore, MD Methylphenidate (MPH) was given in 22 (82%), dextroamphetamine in 4, and Adderal in 1. Eight were switched to an alternate stimulant during follow-up, because of inadequate response, side effects, or rebound. The mean mg/kg daily doses and mean total daily doses of MPH were 0.55-1.16 mg/kg and 12-26 mg. Amphetamine doses were 0.43-0.6 mg/kg daily and 7.5-15 mg/daily. A Clinical Global Impressions (CGI) scale to rate severity of ADHD showed significant improvements at 3, 12, and 24 months of treatment. Side effects were mostly mild,