



THE PLAIN DEALER

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Evidence doesn't support restricted diet for ADHD

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A recent response to a reader question about diet and Attention Deficit Hyperactivity Disorder fueled a shower, if not a firestorm, of responses from supporters of the Feingold Program, a mostly nutritional treatment for ADHD.

GAW wrote: "For my family and many thousands of others, the Feingold Program has been a lifesaver. . . . Your assertion that the NIH [National Institutes of Health] does not support the Feingold approach is also wrong."

CL wrote: "You are absolutely incorrect about the Feingold diet. My ADHD son has never been medicated. . . . [His] frequent and incapacitating migraine headaches were triggered by artificial colors. . . . His temper tantrums and bed-wetting, both of which were daily events . . . are triggered by consuming corn syrup."

MD wrote: "The Feingold diet does indeed work. Check the research. And it does not exclude the 'common menu of childhood and adolescence.' "

BH, a dietitian, wrote: "Your article. . . was absolutely correct. However, I urge you to read the Center [for Science] in the Public Interest 'Diet, ADHD & Behavior, A Quarter Century Review.' "

Now, here are my thoughts. To the parents whose ADHD children are doing well on Feingold, accept my sincere best wishes. My policy is never to argue with a parent's personal experience. I agree the skyrocketing use of stimulant drugs to treat ADHD is a concern. However, I remain unconvinced the science exists to support a general recommendation of diet therapies to families living with ADHD.

The Feingold Association Web site suggests its program may alleviate many symptoms and disorders beyond ADHD. These include ear infections, bed-wetting, headaches, congestion, irritability, dyslexia, speech delays, eye-muscle disorders, seizures, constipation, diarrhea, nightmares, unkindness to pets and resistance to going to bed.

Researchers have studied various components of the diet, but there are few well-designed studies that evaluate the program as a whole. Why? It is difficult to construct a "blinded" study using a natural-foods diet. Parents and researchers know which children are in the treatment group and may perceive a benefit where none exists. If behavior improves, it may be because of the interaction and attention involved in following a special diet. Trials of diet by individual parents are, by their nature, unblinded.

Most scientists, at least, agree there is no evidence that sugar or salicylates cause ADHD. Yet the Feingold Program continues to recommend families eliminate salicylate-containing foods such as berries, almonds, apples, cherries, cucumbers, grapes, nectarines, oranges,

peaches, peppers, plums, tangerines and tomatoes. (The current program allows these foods to be added back gradually while watching for signs of intolerance.)

The most promising avenue of research involves food dyes and other additives, to which some children may be sensitive. Yet even here the research is inconsistent. Some well-designed studies suggest food dyes in particular may affect behavior, but others do not support this. In some studies, children on the restricted diets actually did worse.

In its review of the research linking diet and behavior, CSPI admits study subjects often did not reflect the ADHD population as a whole, but were chosen for a suspected sensitivity to food.

"Parents need to recognize that most children will not respond strongly or at all to dietary changes. In contrast, 70 [percent] to 90 percent of children respond to stimulant drugs," the report states. The authors suggest parents try a restricted diet and a lower dose of a stimulant drug in combination.

In its consensus statement on treatments for ADHD, the NIH states, "Some of the dietary elimination strategies showed intriguing results suggesting the need for further research." This is far from an endorsement of diet as a treatment. It is disappointing the NIH has failed to follow through on its recommendation of further research into diet and ADHD by actually funding it.

I am a dietitian, and I believe in diet. Nothing would please me more than to discover yet another area where medical nutrition therapy can improve health and help people avoid medication. Anyone who follows these columns knows I am a believer in eating "close to the farm," that is, fresh food in its most natural and unrefined state. Many children with and without ADHD would benefit from cutting back on candy, snack foods and sugary chemical beverages. However, I am resistant to placing people of any age on restrictive diets unnecessarily. It is easy to underestimate the challenges of undertaking an elimination diet in today's world. Perhaps one day the evidence will support such a recommendation. In the meantime, parents of children with ADHD have enough to deal with.

Chima is a professor of nutrition and dietetics at the University of Akron. Nutri- News Q&A runs every other week. E-mail nutrition and weight-control questions, labeled "Nutri-News," to food@plaind.com.

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