

CCHR: New Diagnostic Manual on ADHD Could Turn Childhood into a Mental Disorder

Despite 28% decrease in 0- to 5-year-old children taking psychostimulants since 2017, new changes to an international mental disorders manual could revert this

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/EINPresswire.com/ -- A mental health industry watchdog warns there could be an increase in the number of children and adolescents prescribed powerful stimulants for Attention Deficit Hyperactivity Disorder (ADHD) due to the new edition of the International Classification of Diseases (ICD-11), Mental Disorders Section going into effect this month. For years, the Citizens Commission on Human

Rights International (CCHR) has conducted a public awareness campaign about the risks of childhood and teen behavior being misleadingly diagnosed as “neurobiological” disorders and “medicated.” It says the changes to ICD-11 reinforce this and as such, it relaunched two Public Service Announcements (PSAs) reminding parents that [“Childhood is not a Mental Disorder.”](#)

CCHR welcomed a 28% decrease in U.S. children aged 0-5-years-old prescribed powerful psychostimulants between 2017 and 2020. According to the IQVia Total Patient Tracker (TPT) database that CCHR obtained for 2017 and 2020, there were 80,235 children in this age group in 2017 prescribed stimulants compared to 58,091 in 2020. Overall, for the 0-17 age group, there was an 14% decrease in psychostimulant use.

CCHR says the U.S. Diagnostic & Statistical Manual of Mental Disorders (DSM-5), with an update due in March, and ICD-11, have categorized ADHD as a “neurodevelopmental disorder,” implying it is a brain-based disease when scientific evidence does not substantiate any physical reason for the behavioral symptoms listed for ADHD.



Despite 28% decrease in 0- to 5-year-old children taking psychostimulants since 2017, new changes to an international mental disorders manual could revert this and put them at risk. Watchdog relaunched PSAs for parents advising “Childhood is not a mental disorder.”

Dr. Fred Baughman, Jr., a retired pediatric neurologist and author of *The ADHD Fraud: How Psychiatry Makes "Patients" of Normal Children*, calls this "neurobiological propaganda" because "psychiatry has never validated ADHD as a biologic entity." [1] This is not to say that children do not have behavioral issues, but children shouldn't be led to "believe they have something wrong with their brains that makes it impossible for them to control themselves without a pill." [2]

Prof. Allen Frances, the former Chairman of the DSM-IV Task Force said that the DSM-IV, published in 1994, already created "false epidemics" of ADHD. [3] He wrote that twenty years later, "The rate of ADHD in the US has tripled to a ridiculously inflated 11%. Sales of ADHD medications are approaching an obscenely profitable \$10 billion a year." Frances was forthright about how diagnoses such as ADHD are determined: "There are no objective tests in psychiatry—no X-ray, laboratory or exam finding that says definitively that someone does or does not have a mental disorder...." [4] Inclusion of a disorder in the DSM is by consensus vote.

CCHR produced several PSAs to help parents see that childhood is not a mental disorder, and for children—[represented by a young skateboarder](#)—to show that their rambunctious zest for life or creative efforts do not make them dysfunctional or "ill."

March 21 this year marks the 22nd anniversary of 14-year-old Matthew Smith's death from a cardiac arrest while skateboarding. Oakland County (Michigan) Medical Examiner Ljubisa Dragovic determined Matthew died from the damage done to his heart from 10 years of taking prescribed methylphenidate, an ADHD psychostimulant that caused a "chronic change of the heart muscle and the small blood vessels in the heart." [5] Michael's tragic death was part of the impetus that started CCHR's "Fight for Kids" campaign, PSAs and now its own website.

In 2014, researchers from the University of Delaware and Drexel University College of Medicine reviewed research on the effects of psychostimulants like methylphenidate. They found the drug can impact the brain's plasticity, interfering with a person's ability to plan, switch between tasks and be overall flexible in their behaviors. For a drug that's supposed to offer better mental performance, they found that the long-term effects appear to do the opposite. [6]

"All proposed ADD and ADHD treatments" are "aimed at modifying observable behaviors rather than in treating their underlying causes," say other researchers, including Dr. Howard Glasser, writing in *Ethical Human Psychology and Psychiatry*. [7]

ADHD symptoms are so common that anyone could believe they have it, including: fails to give close attention to details or makes careless mistakes; work is often messy or disorganized; has problems staying focused on tasks or activities; fails to complete schoolwork, chores or other duties; often fidgets with hands or feet or squirms in seat; often talks excessively and interrupts or intrudes on others (e.g., cuts into conversations). Giftedness shares similar behavior.

The consequences of the drugs prescribed to quell such symptoms are telling: The Drug

Enforcement Administration reports methylphenidate can lead to addiction and “psychotic episodes, violent behavior and bizarre mannerisms have been reported” with its use.[8] It can also cause dependency.[9] Suicide is a major complication of withdrawal from it and similar amphetamine-like drugs.[10] FDA also warns of the risks of heart-related problems.

The ICD-11 and DSM-5 updates could exacerbate the massive misdiagnosis already occurring globally. Parents, pediatricians, family doctors, and educators should be informed that ADHD is not a proven neurobiological disorder, that childhood is not a mental disorder and to use non-harmful solutions for children’s needs.

[Read full article here.](#)

[1] Samantha Gluck, “Does ADHD Exist?” Healthy Place, interview with Dr. Fed Baughman, <https://aws.healthyplace.com/adhd/articles/does-adhd-exist>

[2] Fred A. Baughman, Jr., MD, “Treatment of Attention-Deficit Hyperactivity Disorder,” Journal of the American Medical Association, Vol. 269, No. 18, 12 May 1993, p. 2369

[3] “Watchdog Group Alerts Parents and Teachers About Gifted Children Being Mislabeled ‘ADHD’ and Given Stimulant Drugs,” CCHR International, 9 Aug. 2017, <https://www.cchr.org/2017/08/09/watchdog-group-alerts-parents-and-teachers-about-gifted-children-being-mislabeled-adhd-and-given-stimulant-drugs/>, citing: Allen Frances, “DSM 5 Will Further Inflate The ADD Bubble,” Psychology Today, 2 Aug. 2011, <https://www.psychologytoday.com/us/blog/dsm5-in-distress/201108/dsm-5-will-further-inflate-the-add-bubble>

[4] Allen Frances, “Most Active Kids Don’t Have ADHD,” Psychology Today, 11 Mar. 2014, <https://www.psychologytoday.com/us/blog/saving-normal/201403/most-active-kids-don-t-have-adhd>; Allen Frances, “Psychiatric Fads and Overdiagnosis,” Psychology Today, 2 June 2010, <https://www.psychologytoday.com/us/blog/dsm5-in-distress/201006/psychiatric-fads-and-overdiagnosis>

[5] Caroline Kern, “Death of 14-year-old Caused by Ritalin,” 14 Apr. 2000, [http://www.drugfreechild.org/article/Death of 14-year-old Caused by Ritalin.html](http://www.drugfreechild.org/article/Death%20of%2014-year-old%20Caused%20by%20Ritalin.html)

[6] “Bad News For Ivy Leaguers: ADHD Drugs Hurt Your Memory,” TIME Health, 13 May 2014, <http://time.com/97448/bad-news-for-ivy-leaguers-adhd-drugs-hurt-your-memory/>.

[7] Dr. Howard Glasser, et al., “The Online Nurtured Heart Approach to Parenting: A Randomized Study to Improve ADHD Behaviors in Children Ages 6–8,” Ethical Human Psychology and Psychiatry, Vol. 22, 1 Nov. 2020

[8] “Methylphenidate (A Background Paper),” U.S. Drug Enforcement Administration, Oct. 1995, p.

[9] https://www.accessdata.fda.gov/drugsatfda_docs/label/2013/010187s077lbl.pdf

[10] DSM-III-R, (American Psychiatric Association, Washington, D.C., 1987), p. 136

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