



ORIGINAL ARTICLE

Evolution of stress in families of children with attention deficit hyperactivity disorder^{☆,☆☆}



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Family Strain Index;
Conners;
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Adolescents

Abstract

Introduction: The objective of this study was to assess the evolution of stress in families of children and adolescents who start psychopharmacological treatment after being diagnosed with attention deficit hyperactivity disorder (ADHD), and the ability to detect this change using the FSI (Family Strain Index) questionnaire.

Methodology: Forty-eight (48) specialists in child-adolescent psychiatry or neuropsychiatry included 429 families of children diagnosed with ADHD, represented by the father, mother or guardian of the child. In the baseline visit, and at two and four months, the intensity of the symptoms of ADHD was evaluated using the Abbreviated Conners Scale, and family stress was evaluated using the FSI questionnaire.

Results: The following was observed: (a) an improvement in the overall FSI score and in all its dimensions ($P < .001$); (b) an improvement in the intensity of the symptoms of hyperactivity (Conners, $P < .0001$); (c) good agreement between these two scales at two months (R-intraclass 0.825, $P < .0001$) and at four months of followup (R-intraclass 0.784, $P < .0001$). Ninety seven point nine percent (97.9%) of the children or adolescents (420) received treatment with modified-release methylphenidate.

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PALABRAS CLAVE

Trastorno por déficit de atención con hiperactividad; Estrés; Calidad de vida; Family Strain Index; Conners; Niños; Adolescentes

Conclusions: There was a significant relationship between the positive evolution of symptoms in children with ADHD and the reduction of family stress, as evaluated by the FSI questionnaire, after starting psychopharmacological treatment. This study showed a great sensitivity to change in the clinical situation of patients with ADHD, evaluated through the stress it produces on its families. It is recommended to use this questionnaire as an indirect measurement of the repercussions of the disorder on the environment of the child with ADHD in terms of family stress.

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Evolución del estrés familiar en niños con trastorno por déficit de atención con hiperactividad

Resumen

Introducción: El objetivo del estudio fue analizar la evolución del estrés en las familias de niños o adolescentes que comienzan tratamiento psicofarmacológico, tras ser diagnosticados de un trastorno por déficit de atención con hiperactividad (TDAH), y la capacidad de detección de este cambio mediante el cuestionario Family Strain Index (FSI).

Metodología: Cuarenta y ocho especialistas en psiquiatría infanto-juvenil o neuropsiquiatría incluyeron 429 familias de niños diagnosticados de TDAH, representadas por el padre, la madre o el tutor del niño. En la visita basal, a los 2 y 4 meses, se evaluó la intensidad de los síntomas del TDAH mediante la escala de Conners abreviada, y el estrés familiar mediante el cuestionario FSI.

Resultados: Se observó: a) mejoría en la puntuación global del FSI y en todas sus dimensiones ($p < 0,001$); b) mejoría en la intensidad de los síntomas de hiperactividad (Conners, $p < 0,0001$); c) una buena concordancia entre las 2 escalas, a los 2 meses (R-intraclase 0,825, $p < 0,0001$) y a los 4 meses de seguimiento (R-intraclase 0,784, $p < 0,0001$). El 97,9% de los niños (420) recibieron tratamiento con metilfenidato de liberación modificada.

Conclusiones: Se observó una correlación significativa entre la evolución positiva de los síntomas de los niños con TDAH y la reducción del estrés familiar evaluado mediante el cuestionario FSI, tras la instauración del tratamiento psicofarmacológico. Este estudio demostró una gran sensibilidad al cambio de la situación clínica de los pacientes con TDAH evaluado a través del estrés producido sobre sus familias. Se recomienda el uso de este cuestionario como medida indirecta de la repercusión del trastorno sobre el entorno del niño con TDAH en términos de estrés familiar.

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Introduction

Attention deficit hyperactivity disorder (ADHD) is the most frequent neurobehavioural disorder in children, and is characterised by a persistent pattern of inattention and/or hyperactivity and impulsivity that often gives rise to serious impairments in academic performance and social adaptive and behavioural functioning.¹⁻³

Males are between three and six times more likely to suffer from ADHD than females, and the disorder affects 3-7% of school-aged children.⁴⁻⁹

Attention deficit hyperactivity disorder is frequently associated with other behavioural disorders and delays in language development and learning.^{10,11} The families of children with ADHD are also significantly affected emotionally and in their daily activities, family dynamics change, and caregivers experience disturbances^{2,4,12-15} that may even affect their daily activity and productivity at work.^{16,17}

Several studies have demonstrated the impact of ADHD on the family in terms of routines, mental health, economic

burden, and personal freedom and leisure.¹⁸⁻²² However, few studies have assessed the evolution of these parameters when treatment is initiated.

For this study, we chose the Family Strain Index (FSI) to assess the evolution of family stress. The ease of completion of this tool offers an advantage over other questionnaires. The FSI has demonstrated an excellent internal consistency ($\alpha = 0.87$) and we believed it could be used to evaluate changes in the family associated with the clinical course of patients with ADHD, which was the aim of our study.²³

Methods**Study design and ethical principles**

We conducted an observational, prospective, noncomparative multicentre study with a follow-up period of four months of duration between April and September of 2010. The study was approved by the ethics committee of the

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