

More Than Meds

Pharmacists & Communities
Partnering for Better Mental Health

Featured Web Resources

1. Mind Your Mind

An initiative from Ontario, Mind Your Mind (mindyourmind.ca) seeks to provide a space where youth can connect with others who may be experiencing mental health challenges. It boasts plenty of opportunity for interaction and its edgy nature would appeal to youth. You will find mindyourmind.ca under the Kids, Teens and Young Adults and Mental Health section of Resources.

2. The Alzheimer's Society of NS

Alzheimer's disease and other dementias have a deep impact not only those who are diagnosed, but also on the people who are closest to them. Familiarize yourself with the Alzheimer's Society of NS webpage (<http://www.alzheimer.ca/en/ns>) where you will find resources for caregivers (<http://www.alzheimer.ca/en/ns/Living-with-dementia>) and useful information on helping patients and families living with Alzheimer's.

In The Know...

ADHD and its Link with Dyes & Additives

Have you heard about the link between food dyes causing ADHD symptoms? Have you been asked to compound additive- and dye-free prescriptions for children and adults with ADHD? Is there evidence supporting or dismissing this supposed link?

The idea that artificial food colouring and sweeteners, may contribute to increased symptoms of hyperactivity in children has been circulating since Dr. Benjamin Feingold proposed his "[Feingold Diet](#)" in the 1970s. Several randomized trials have put the Feingold diet to the test. A [meta-analysis](#) of these studies, conducted in the 70s and 80s, suggested a very small, likely unnoticeable clinical effect (effect size: 0.11). However, the European Union now requires warning labels on foods containing 6 colour additives based on follow-up analyses that included newer studies. The FDA did its own investigation of the research and did not issue a similar warning stating that the findings were not sufficiently compelling.

A 2012 [meta-analysis](#) of randomized trials in which synthetic food colours and/or other additives were removed found an effect size of 0.29. Secondary analyses indicated that heterogeneity was significant among study results and that publication bias may have exaggerated the findings. It is notable that parent ratings showed a small advantage but this was not seen in teacher ratings. The effect size of 0.29 may therefore be optimistic. However, if valid, it would indicate that the degree of symptoms observed in the average (50th percentile) child with ADHD who removed food colours would lower than 61% of those continuing with a regular diet. This has been likened to reducing the typical severity of symptoms of a child with ADHD by about 10%, which is much less than the treatment effect of ADHD medications. As such, it appears that the amount of improvement is not sufficient to warrant a dramatic change in diet for the average child with ADHD. However, for a small proportion that have a greater than average response the restriction of food colours may be a worthwhile intervention. Investigators involved in this meta-analysis and others have suggested that there is a sub-group of responders, those who are seen to be food-sensitive.

It is fair to ask, which specific food colours and other additives are of concern? Unfortunately, this still remains uncertain. Published meta-analyses include trials testing a variety of different food dyes. The problem is further complicated by the fact that most foods contain multiple dyes or preservatives at different concentrations and trials do not isolate agents in an attempt to identify their specific causative roles.

And what about **sweeteners**? While parents commonly report increased hyperactivity after their children eat candy or drink diet soda, the majority of controlled studies show that neither sucrose (sugar) nor aspartame have adverse effects on children's hyperactivity. A [meta-analysis](#) of 16 studies of sugar in non-ADHD participants found no evidence that sugar affects cognitive performance or behavior in children. It appears that the common belief that sugar causes hyperactive children is more myth than reality. High-dose aspartame was not found to affect symptoms in children with ADHD in an [RCT](#).

So, back to pharmacists compounding dye- and additive-free prescriptions for children to avoid worsening or inducing ADHD-like behaviours. The related evidence appears to indicate that if there is any link at all it is small to negligible. If a child has a history of being sensitive to food colour additives in terms of ADHD-like symptoms, then providing specially compounded prescriptions may be justified. Pharmacists should offer blinded N-of-1 trials to help patients and families determine if the added inconvenience and cost of **compounded** medications free of dyes and additives makes a difference in ADHD symptoms. These trials offer a great opportunity for collaboration with other healthcare providers in a patient-centered approach to rationalizing treatment decisions. Here's a [link](#) to a report on an N-of-1 trial service for ADHD.

See the following for credible information for patients and families on ADHD:

[Teen Mental Health](#)

[MedlinePlus](#)

For specific diagnostic and management information, NICE has several helpful tools for patients and their families and clinicians.

[Patient/Caregiver ADHD Guidance](#)

[Clinician ADHD Guidance](#)

Visit [Gardner's Effect Size Illustrator](#) for information on effect size.

In The News

“Lawyer uses own depression battle to help colleagues”

Tim Daley, a Newfoundland native, Halifax West High School and Dalhousie University graduate and a lawyer for 21 years, is sharing the story of his struggle with depression to fight the stigma attached to mental illness. Over the past year, Daley has been travelling to law firms and bar associations across Nova Scotia to discuss mental health, and share his own experiences.

Source: <http://thechronicleherald.ca/novascotia/1133792-lawyer-uses-own-depression-battle-to-help-colleagues>



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