

standards to drug studies compared to other classroom intervention techniques. Little systematic data on side-effects of medication were available in the studies analyzed.

Studies of antidepressants were limited and few had valid educational variables or measures suited to the classroom performance. One study demonstrated the importance of interpretation of behavior of children on medication in light of behavior of other untreated children in the classroom. What appeared to be significant effects of medication was actually a reflection of the overall disruptive or inattentive behavior of the whole classroom. (Forness SR, Kavale KA. Psychopharmacologic treatment. A note on classroom effects. J Learn Disabilities March 1988; 21: 144-147).

**COMMENT.** The pressures of clinical practice sometimes preclude physicians' visits to schools and close collaboration with patients' teachers. The point of this report is that as pediatricians, neurologists and psychiatrists increase their use of psychopharmacological agents, teachers must have increased access to information about the classroom effects and side-effects of these medications. Medical researchers are not always aware of the possible problems that drug treatments may present in classroom situations, and regular reports from teachers can provide valuable information regarding their overall effects.

#### **METHYLPHENIDATE IN HYPERACTIVE AUTISTIC CHILDREN**

Nine children, eight boys and one girl, ages 4 to 16 yrs, with a diagnosis of autism, were treated with methylphenidate (10-50 mg/day) as outpatients at Columbia Presbyterian Medical Center, Babies' Hospital Pediatric Psychiatric Clinic, New York. All were hyperactive, impulsive and mentally retarded. All showed significant improvement on the Conner's Teacher and Parent Questionnaire scores during treatment with the stimulant. No significant side-effects were noted or worsening of stereotyped movements. (Birmaher B et al. Methylphenidate treatment of hyperactive autistic children. J Am Acad Child Adolesc Psychiatry March 1988; 27: 248-251).

**COMMENT.** The beneficial effect of methylphenidate on the behavior of autistic children, at variance with many previous reports, is confirmed in a randomized trial of the drug in a 6-year-old autistic boy reported in the same journal from the Western Psychiatric Institute, Pittsburgh, PA (Strayhorn Jr. JM et al. J Am Acad Child Adolesc Psychiatry March 1988; 27: 244). Negative effects on mood and tantrums were outweighed by positive effects on attention and activity, destructive behavior and stereotyped movements. These reports fail to support previous statements that stimulants are ineffective and contraindicated in hyperactive autistic children. Rutter M (J Child Psychol Psychiatry 1985; 26: 193) writing on treatment refers to a basic cognitive deficit which underlies language and behavior problems in autistic children. Provided that methylphenidate does not exacerbate psychotic behavior, its known effects in promoting cognitive development could be beneficial.