

Authors and Disclosures

Journalist

Caroline Helwick

From Medscape Medical News Tai Chi May Improve Some ADHD Symptoms



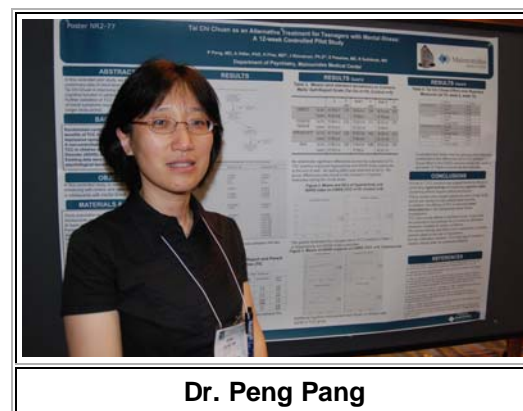
Caroline Helwick

May 26, 2010 (New Orleans, Louisiana) — The practice of tai chi chuan for 6 weeks during a summer camp improved behavior control in adolescents with mental illness, according to a study presented at the American Psychiatric Association (APA) 2010 Annual Meeting.

"We found beneficial effects in controlling hyperactivity in the group as a whole, and adolescents with a diagnosis of attention-deficit/hyperactivity disorder (ADHD) also showed improvements in cognitive skills," said Peng Pang, MD, a resident in psychiatry at Maimonides Medical Center, Brooklyn, New York.

Randomized controlled trials have shown the benefits of tai chi in improving quality of life and depressive symptoms in adults, and at least 1 noncontrolled trial has found benefits in children with ADHD or anxiety, but there has been little study of the potential psychosocial benefits of tai chi in young people, Dr. Pang said.

The current controlled study, therefore, examined the efficacy of tai chi in enhancing self-control and in reducing mood disturbances in adolescents (aged 12-18 years) with at least 1 *Diagnostic and Statistical Manual of Mental Disorders* (Fourth Edition, Text Revision) diagnosis of mental illness. The subjects were participating in a summer respite program run by the medical center in 2009.



The study included 10 adolescents in the tai chi group and 9 control subjects attending the camp but not taught tai chi. Mean age was 14 years, approximately half the subjects were white, and half were male. ADHD was the diagnosis for approximately 50% of the group, with most other diagnoses being adjustment disorder, depressive disorder, oppositional defiant disorder, and anxiety disorder.

No significant differences were found between the groups in baseline demographic data and medical information, including subscales of the Conners-Wells' Self-Report Scale (CWSS). Improvement in hyperactivity on the CWSS was the primary endpoint.

The tai chi group received instruction in tai chi from a tai chi chuan master in 45-minute sessions twice a week for 6 weeks. The control group attended the day camp but participated only in the standard activities. A repeated-measures experimental design was used to measure group differences at baseline, week 6, and week 12.

Investigators found that tai chi practice improved hyperactivity and ADHD index subscores at the end of week 6. The hyperactivity score was reduced from 47.11 to 45.22 ($P = .03$) in the tai chi group, but it increased from 52.89 to 57.88 in the control group. The ADHD index subscore also decreased, from 52.00 to 51.89 in the tai chi group ($P = .005$), whereas it increased from 52.89 to 57.88 in the control group, Dr. Pang reported.

No lasting effect was shown, however, by week 12, which probably reflects the fact that the subjects did not continue the tai chi practice on their own and also went back to taking their ADHD medication, which could dilute a treatment effect, according to Dr. Pang.

At 12 weeks, the hyperactivity score was 44.25 in the tai chi group and 52.11 in the control group. The ADHD index subscores were 54.63 and 58.33, respectively. No group differences were observed at any time point for the conduct or cognitive subscales of the CWSS.

Half the group had a diagnosis of ADHD, and those who practiced tai chi also had an improvement on the cognitive problem subscale of the CWSS, she reported.

Because tai chi has no adverse effects and no significant costs, it is a potential economic alternative treatment modality, especially for patients intolerant of ADHD medications or those whose parents object to the use of medications, or as a way to maintain a relative steady state during medication vacations, Dr. Pang suggested.

Mike Brody, MD, a Maryland psychiatrist who is author of *Messages: Self-Help Through Popular Culture*, commented to *Medscape Psychiatry* that the effect of tai chi chuan may simply be through its ability to "focus" the adolescents. Dr. Brody is an APA liaison with the American Academy of Pediatrics.

"Tai chi is good, but I believe that any type of activity that serves to regulate, that provides discipline — such as dance, chorale, karate, even baseball — should improve ADHD," he said. "I believe strongly that any disciplined activity, if it helps a child focus, will help this disorder." In addition, he suggested that other aspects of the activity, such as the extra attention the children received, could also be influential.

David Fassler, MD, clinical professor of psychiatry at the University of Vermont, Burlington, also commented, "This is an interesting pilot study suggesting that tai chi chuan may have a positive impact on the overall symptoms of ADHD in adolescents. Other studies have reported similar findings for judo and for increased exercise, in general.

"Although such activities may be helpful components of treatment for particular patients, the results of the current study do not imply that they should be used in lieu of more established interventions. I would agree with the authors' suggestion that further research is warranted to better understand the potential use of tai chi in the treatment of adolescents with psychiatric disorders."

Dr. Pang, Dr. Brody, and Dr. Fassler have disclosed no relevant financial relationships.

American Psychiatric Association (APA) 2010 Annual Meeting: Abstract NR2-77. Presented May 24, 2010.

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