# Atomoxetine for attention deficit hyperactivity disorder (ADHD) in children with special educational needs

Submission date	<b>Recruitment status</b> Stopped	<ul><li>Prospectively registered</li></ul>		
19/06/2009		☐ Protocol		
Registration date	Overall study status Stopped Condition category	Statistical analysis plan		
07/10/2009		☐ Results		
Last Edited		Individual participant data		
12/06/2017	Mental and Behavioural Disorders	Record updated in last year		

## Plain English summary of protocol

Not provided at time of registration

## Contact information

## Type(s)

Scientific

#### Contact name

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#### Contact details

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## Additional identifiers

Clinical Trials Information System (CTIS)

2008-004827-44

#### Protocol serial number

N/A

# Study information

#### Scientific Title

Open label randomised trial of atomoxetine for attention deficit hyperactivity disorder (ADHD) in children with special educational needs

#### Acronym

**HSEN - ATOM** 

## **Study objectives**

- 1. What is the efficacy of atomoxetine in reducing the symptoms and features of attention deficit hyperactivity disorder (ADHD) in children with moderate and severe learning disabilities who also have ADHD?
- 2 What is the adverse effect profile associated with atomoxetine treatment in children with learning disabilities?

Both these questions will be addressed in children who have tried stimulant treatment but for whom there is either inadequate symptomatic improvement or unacceptable adverse effects.

## Ethics approval required

Old ethics approval format

## Ethics approval(s)

South East Multicentre Research Ethics Committee, 22/10/2008, ref: 08/H1102/86

## Study design

Randomised open-label trial

## Primary study design

Interventional

## Study type(s)

Treatment

## Health condition(s) or problem(s) studied

Attention deficit hyperactivity disorder (ADHD), mental retardation (intellectual disability)

#### **Interventions**

40 children between ages 7 and 15 years with moderate-severe learning disability and hyperkinetic disorder will be invited to take part in a open label trial of atomoxetine lasting 16 weeks. Medication dosage for atomoxetine will be individually optimised, balancing reduction in hyperkinetic symptoms against side effects.

Participants will be given daily doses of atomoxetine orally that will be titrated up to a therapeutic dose over a period of two weeks. Initially atomoxetine 0.5 mg/kg (starting dose) will be prescribed for one week, followed by a week of 0.8 mg/kg (low dose). A usual dose of atomoxetine 1.2 mg/kg daily will be carried on after two weeks. Selection of optimal dose will be based on adverse effects and behavioural response. For participants showing less than "much improvement" on the CGI-Improvement (CGI-I) scale at the end of week 8 without presenting adverse effects, may have a further dose increase to 1.4 mg/kg/day (high dose).

Treatment response will be determined by comparing baseline behaviour with that at the end of the 16 weeks. The trial will end at 16 weeks post-randomisation.

## Intervention Type

Drug

#### Phase

Not Applicable

## Drug/device/biological/vaccine name(s)

Atomoxetine

## Primary outcome(s)

Conners parent and teachers questionnaires, short form: ADHD and hyperactivity indices (parent and teacher), measured at baseline and week 16.

## Key secondary outcome(s))

Measured at baseline and week 16:

- 1. Adverse events (other behaviours questionnaire plus any others noted)
- 2. Aberrant Behaviour Checklist
- 3. Developmental Behaviour Questionnaire
- 4. Clinical Global Impressions Scale

## Completion date

31/12/2010

## Reason abandoned (if study stopped)

Participant recruitment issue

# **Eligibility**

## Key inclusion criteria

- 1. Aged 7 15 years, either sex
- 2. Diagnosis of attention deficit hyperactivity disorder (ADHD)
- 3. Full-scale intelligence quotient (IQ) 30 69 or age equivalent estimate
- 4. Did not respond to methylphenidate either at high dose or because dose limited by unacceptable adverse effects
- 5. Living in catchment area of one of the participating centres
- 6. Child in stable care situation
- 7. Child regularly attending school (more than 75% of last school term)

## Participant type(s)

Patient

## Healthy volunteers allowed

No

#### Age group

Child

## Lower age limit

7 years

## Upper age limit

15 years

#### Sex

All

## Key exclusion criteria

- 1. Child currently taking atomoxetine
- 2. A clear-cut history of intolerance to atomoxetine or concomitant use of monoamine oxidase (MAO) medication or narrow angle glaucoma that represent absolute contradictions to the use of atomoxetine
- 3. Severe limitation of child's mobility
- 4. Presence of a degenerative disorder
- 5. Medical conditions that may preclude the use of atomoxetine or may confound outcome measures, including:
- 5.1. Poorly controlled or uncontrolled epilepsy
- 5.2. History of significant cardiovascular disease
- 5.3. History of psychotic, bipolar or severe obsessive compulsive disorder
- 6. Child on neuroleptic medication (must be withdrawn for 2 months prior to trial assessment)
- 7. Child poses a significant risk of suicidal or homicidal behaviour
- 8. Another child in the family/household already enrolled in this study
- 9. Ongoing child protection concerns

#### Date of first enrolment

01/08/2009

#### Date of final enrolment

31/12/2010

## Locations

#### Countries of recruitment

**United Kingdom** 

England

# Study participating centre Institute of Psychiatry

London United Kingdom SE5 8AF

# Sponsor information

## Organisation

King's College London (UK)

#### **ROR**

https://ror.org/0220mzb33

# Funder(s)

## Funder type

Government

#### **Funder Name**

National Institute for Health Research (NIHR) (UK) - Program Grant for Applied Research (PGfAR)

## Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

## **Funding Body Type**

Government organisation

## **Funding Body Subtype**

National government

#### Location

**United Kingdom** 

## **Results and Publications**

Individual participant data (IPD) sharing plan

## IPD sharing plan summary

Not provided at time of registration

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
HRA research summary			28/06/2023	No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes