

Reviewer's report

Title: Prevalence of Attention Deficit/Hyperactivity Disorder Among Adults in Obesity Treatment

Authors:

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Reviewer: Dr Eric Mick

Level of interest: A paper of considerable general medical or scientific interest

Advice on publication: Unable to decide on acceptance or rejection until the authors have responded to the compulsory revisions

In this study, Dr Altfas reports on the prevalence of ADHD among obese adults referred to a bariatric clinic. He found that 27% of his patients met modified criteria for DSM-IV ADHD, IA-subtype. Amongst those with BMI \geq 40 the prevalence of ADHD was 45%. He further found that ADHD subject and those with a subsyndromal form of the disorder had more difficulty losing weight than those with no ADHD symptoms. This a very interesting study that addresses an unstudied topic in the areas of obesity research and ADHD research. Identification of a relationship between ADHD and obesity may have important public health implications by increasing the awareness of this comorbidity in clinics focused on each disorder individually. This may particularly be so since ADHD is a very treatable condition and reducing active symptomatology would putatively improve weight loss programs in the morbidly obese.

The report could be strengthened if the following questions could be made:

Compulsory Revisions

1. More information is required regarding the method of diagnosing of ADHD. Was the consistent interview process, according to a published instrument or was it an unstructured interview conducted by the investigator that elicited information regarding each symptom of the disorder?
2. The presentation of p-values in the methods section is confusing. It is necessary to indicate which pair-wise comparison each of the three p-values listed in parentheses refers to.
3. The presentation of data should be limited to the prevalence of ADHD in this clinic and in different sub-groupings of obese patients. Since these subjects were all ascertained via a bariatric clinic it is misleading to report the prevalence of obesity in the ADHD subjects identified (e.g. page 12). If quoted out of context it could lead to the conclusion that a significant proportion of ADHD adults are obese - a conclusion that this research cannot address.

Discretionary Revisions

1. Is it possible to estimate the onset of obesity in order to determine if symptoms of ADHD preceded the onset of obesity or vice versa? Demonstrating the order of onset would have important implications

regarding which of these conditions increased the risk for the other.

Competing interests:

None declared.