

April 17, 2025

Letter of Support for the Inclusion of Methylphenidate in the WHO Essential Medicines List

To: WHO EML Secretariat

Email: emlsecretariat@who.int

Subject: Support for Application A.19 Methylphenidate – ADHD Inclusion in WHO EML

Dear Members of the WHO Expert Committee on Selection and Use of Essential Medicines,

On behalf of the Emirates Society for Child and Adolescent Mental Health (ESCAM), Emirates Medical Association, we strongly support the inclusion of methylphenidate in the WHO Model List of Essential Medicines (EML) and the Essential Medicines List for Children (EMLc) for the treatment of Attention-Deficit/Hyperactivity Disorder (ADHD) in children and adolescents aged 6-17 years.

ADHD is a highly prevalent neurodevelopmental disorder, affecting approximately 5% of children worldwide, and is associated with significant functional impairment, increased risk of injuries, and long-term adverse outcomes [1]. The WHO Mental Health Gap Action Programme (mhGAP) recognizes ADHD as a priority condition and recommends appropriate treatment interventions [2]. However, millions of children, particularly in low- and middle-income countries (LMICs), lack access to this essential treatment due to limited resource and support [3].

Methylphenidate is supported by robust scientific evidence demonstrating moderate-to-large effect sizes in reducing ADHD symptoms and improving daily functioning, as confirmed by meta-analyses of randomized controlled trials (RCTs) [4]. Long-term studies indicate sustained benefits beyond one year of treatment, with significant improvements in symptoms and functioning [5]. Concerns about safety have been systematically addressed, with extensive research showing no significant increase in absolute risk for serious adverse events [6]. Methylphenidate's side effects are generally mild and transient, often responding well to dose adjustments or changes in administration timing [7,8]. Common adverse effects include reduced appetite, insomnia, irritability, headache, and abdominal discomfort [7,8]. Mild increases in heart rate and blood pressure may occur, particularly at higher doses, but can typically be managed through routine monitoring of vital signs [8]. Very rarely, stimulant-induced psychosis has been reported, usually in the context of rapid dose escalation or very high doses [8].

Inclusion of methylphenidate in the WHO EML is critical to addressing global disparities in ADHD treatment. In many LMICs, limited number of professionals and affordability constraints hinder access to this first-line treatment [9]. WHO EML listing would facilitate equitable access,

policy adoption, and integration of ADHD treatment into clinical care, ensuring alignment with best practices in global mental health.

Given the compelling evidence of efficacy, safety, and public health impact, we urge the WHO Expert Committee to recognize the urgent need for equitable ADHD treatment worldwide and approve this application.

Sincerely,

On behalf of the Executive Board of the Emirates Society for Child and Adolescent Mental Health (ESCAM), Emirates Medical Association (EMA)

Dr. Meshal A. Sultan

President

Emirates Society for Child and Adolescent Mental Health (ESCAM)

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References

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