# WORLD FEDERATION OF ADHD

Dear Members of the Essential Medicines for Children Committee,

I am writing to you in my role as President of the World Federation of ADHD. I am a clinical psychologist who has worked in the area of ADHD for over three decades. strongly urge the inclusion of methylphenidate on the World Health Organization's Essential Medicines List for children. Attention-Deficit/Hyperactivity Disorder (ADHD) is a major global public health challenge, affecting an estimated 5-7% of children worldwide. Without proper treatment, ADHD significantly impairs the quality of life and development of affected children, leading to long-term consequences including educational underachievement, social isolation, increased accident risk, and a higher prevalence of psychiatric disorders such as anxiety, depression, and substance abuse in adulthood. It has also been shown to cause premature death due to accidental injuries and suicide.

Much research spanning more than 60 years supports methylphenidate's efficacy, safety, and tolerability as a first-line treatment for ADHD. It reduces core ADHD symptoms such as hyperactivity, impulsivity, and inattentiveness by approximately 70-80% compared to placebo. This level of symptom reduction is essential for improving daily functioning, academic achievement, and social interactions among affected children.

Major international medical bodies—including the American Academy of Pediatrics (AAP), the UK's National Institute for Health and Care Excellence (NICE), and indeed, WHO's own clinical guidelines—explicitly endorse methylphenidate as an essential component of standard care for children with moderate-to-severe ADHD. Inclusion on the WHO Essential Medicines List would reinforce global consensus on evidence-based management and help ensure consistent implementation of recognized clinical best practices worldwide.

The positive impacts of methylphenidate extend well beyond mere symptom relief. By enhancing cognitive functions such as attention, working memory, and impulse control, methylphenidate supports children's ability to achieve their full academic potential, thereby significantly lowering rates of school dropout and educational failure. Moreover, improved social skills facilitated by appropriate medication treatment can dramatically reduce children's vulnerability to bullying, social rejection, and subsequent emotional distress.

Untreated ADHD carries significant long-term risks, including an elevated likelihood of developing conduct disorders, substance misuse, and criminal behaviors, which incur profound societal and economic burdens. Early intervention with methylphenidate limits progression to these adverse outcomes, underscoring its preventive potential and the importance of early diagnosis and treatment.

The accessibility and affordability of ADHD treatments is a pressing concern in many low- and middle-income countries (LMICs). Without WHO Essential Medicine status, methylphenidate cannot be included in some national



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healthcare programs, worsening existing disparities in mental health care. This situation forces clinicians in LMICs to rely inappropriately on available alternatives, such as antipsychotic medications, despite their unsuitable profiles for managing ADHD, thus unnecessarily exposing children to increased risk of adverse effects. Officially listing methylphenidate would significantly enhance global availability, affordability, and equity in ADHD treatment, empowering more countries to integrate evidence-based ADHD care into their national health systems.

The economic justification for methylphenidate's inclusion is robust. The medication is cost-effective, particularly when weighed against the profound societal costs linked to untreated ADHD, such as decreased educational attainment, reduced productivity, and higher rates of criminal justice involvement.

With over six decades of clinical experience, methylphenidate has a well-established safety profile, and potential side effects—including mild appetite suppression and insomnia—are effectively manageable through appropriate prescribing practices and careful clinical oversight. Moreover, rigorous clinical management greatly reduces any risk of medication misuse among children.

Beyond clinical benefits, officially listing methylphenidate addresses the stigma associated with ADHD. By recognizing ADHD as a legitimate medical condition requiring essential medical treatment, WHO's endorsement would help dismantle widespread misconceptions, reduce barriers to care, and promote global mental health equity. Such acknowledgment would encourage greater investment in pediatric mental health services, thus aligning closely with WHO's overarching mission to enhance universal health coverage.

Furthermore, including methylphenidate aligns seamlessly with the WHO's broader goals articulated in the Sustainable Development Goals (SDGs), particularly targets related to health equity, education, and child development. Providing standardized treatment protocols supported by WHO's endorsement would encourage the consistent and evidence-based management of ADHD globally, ultimately resulting in improved long-term outcomes for millions of children and their families.

Thank you very much for considering this critical request. Your decision to include methylphenidate in the Essential Medicines List for children has the potential to profoundly improve the lives, opportunities, and futures of children worldwide who suffer from ADHD.

Sincerely.

Stephen V. Faraone

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Distinguished Professor of Psychiatry, SUNY Upstate Medical University



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