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27. Developmental profiles on the basis of the FTF (Five to Fifteen) questionnaire: Clinical validity and utility of the FTF in a child psychiatric sample........................................................................................................ 45

**Author:** Raaska, Hanna;  
Elovainio, Marko;  
Sinkkonen, Jari;  
Stolt, Suvi;  
Jalonen, Iina;  
Matomäki, Jaakko;  
Mäkipää, Sanna;  
Lapinleimu, Helena;  
Helsinki University Central Hospital, Helsinki, Finland;  
National Institute for Health and Welfare, Helsinki, Finland;  
University of Turku, Turku, Finland;  
Turku University Central Hospital, Turku, Finland;  
University of Tampere, Tampere, Finland

**Publication info:** Journal of Applied Developmental Psychology 34.3 (May-Jun 2013): 152-160.

**Abstract (English):** This study investigated the potential association between symptoms of reactive attachment disorder and language difficulties among internationally adopted children in Finland (the FinAdo study). The language difficulties were assessed using a standardised Five to Fifteen (FTF) parental questionnaire and the symptoms of reactive attachment disorder using a FinAdo questionnaire. The study sample consisted of 689 6–15 year old children (49.2% boys, response rate 48%). Twenty-nine percent of the children were reported to have language difficulties and 8% severe language difficulties (10% and 2%, respectively, in the general population). A child's symptoms of reactive attachment disorder were associated with language difficulties and severe language difficulties, OR 2.15, 95% CI [1.39, 3.31] and OR 4.33, 95% CI [1.57, 11.98], respectively, the associations being robust to adjustments for background factors. (PsycINFO Database Record (c) 2013 APA, all rights reserved)(journal abstract)

**Links:** Get document

**Subject:** Adopted Children (major); Attachment Disorders (major); Language Disorders (major); Symptoms (major)

**Classification:** 3210: Psychological Disorders

**Age:** Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

**Population:** Human, Male, Female

**Location:** Finland

**Identifier (keyword):** adopted children, language difficulties, symptoms, reactive attachment disorder

**Test and measure:** Five to Fifteen Parental Questionnaire, Verbal Comprehension Index, Wechsler Intelligence Scale for Children, General Health Questionnaire-12

**Methodology:** Empirical Study, Quantitative Study

**Author e-mail address:** hanna.raaska@fimnet.fi

**Contact individual:** Raaska, Hanna, Helsinki University Central Hospital, Helsinki, Finland;  
hanna.raaska@fimnet.fi

**Publication title:** Journal of Applied Developmental Psychology

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Childhood clumsiness and peer victimization: A case–control study of psychiatric patients.

Author: Bejerot, Susanne; 1 Humble, Mats B.; 1 Department of Clinical Neuroscience, Karolinska Institutet, Stockholm, Sweden susanne.bejerot@ki.se


Abstract (English): Background: Poor motor and social skills as well as peer victimization are commonly reported in both ADHD and autism spectrum disorder. Positive relationships between poor motor and poor social skills, and between poor social skills and peer victimization, are well documented, but the relationship between poor motor skills and peer victimization has not been studied in psychiatric populations. Method: 277 patients (133 males, 144 females), mean age 31 years, investigated for ADHD or autism spectrum disorder in adulthood and with normal intelligence, were interviewed about childhood peer victimization and examined for gross motor skills. The parents completed a comprehensive questionnaire on childhood problems, the Five to Fifteen. The Five to Fifteen is a validated questionnaire with 181 statements that covers various symptoms in childhood across eight different domains, one of them targeting motor skills. Regression models were used to evaluate the relationship between motor skills and the risk and duration of peer victimization, adjusted for sex and diagnosis. Results: Victims were described as more clumsy in childhood than their non-victimized counterparts. A significant independent association was found between reportedly poor childhood gross motor skills and peer victimization (adjusted odds ratio: 2.97 [95% confidence interval: 1.46-6.07], n = 235, p = 0.003).
In adulthood, the victimized group performed worse on vertical jumps, a gross motor task, and were lonelier. Other factors that were expected to be associated with peer victimization were not found in this highly selected group. Conclusion: Poor gross motor skills constitute a strong and independent risk factor for peer victimization in childhood, regardless of sex, childhood psychiatric care and diagnosis. (PsycINFO Database Record (c) 2013 APA, all rights reserved) (journal abstract)
El cuestionario Five to Fifteen (FTF) para una evaluación integral del desarrollo: Propiedades psicométricas y caracterización de muestra de niños Chilenos.

Author: Beltrán-Ortiz, María Fernanda; ¹; de Barra, Helena Todd; ²; Franzani, Patricio; ²; Martinich, Cristian; ²; Castilho, Ramón D.; ¹; ¹ Universidad de Talca, Talca, Chile racastillo@utalca.cl; ² Corporacion Para el Desarrollo del Aprendizaje (CDA), Chile


Abstract (Spanish): The impact of developmental disorders can be mitigated if early diagnoses are implemented. The Five to Fifteen questionnaire (FTF) could be a suitable tool for early diagnosis of these disorders. We describe the psychometric properties and the characterization of 322 Chilean children of typical development, between 5 and 15 years of age. Levels of consistency and temporal stability were fluctuating between .83 and .93, and between .44 and .86, respectively. From an Exploratory Factorial Analysis emerge 4 dimensions that account for 65.4% of variance (KMO = .93; $\chi^2 = 3,113.77; df = 231; p < .01$), where a general development dimension is predominating. Differences were found by gender and age. Performance of Chilean and Sweden children indicates similarities at 5 years of age. However from 6 years of age onwards differences were found in almost all domains. We conclude that FTF is a valid and reliable instrument measuring children's development. (PsycINFO Database Record (c) 2013 APA, all rights reserved)(journal abstract)
Cortisol levels in children with attention-deficit/hyperactivity disorder.

Author: Isaksson, Johan; ¹ Nilsson, Kent W.; ² Nyberg, Fred; ³ Hogmark, Åsa; ¹ Lindblad, Frank; ¹ ¹ Department of Neuroscience, Child and Adolescent Psychiatry Unit, Uppsala University, Uppsala, Sweden johan.isaksson@neuro.uu.se; ² Centre for Clinical Research, Uppsala University, Hospital of Vastmanland, Vasteras, Sweden; ³ Department of Pharmaceutical Biosciences, Uppsala University, Uppsala, Sweden


ProQuest document link
Abstract (English): Regulation of the Hypothalamus-Pituitary-Adrenal axis (HPA-axis) and its end product cortisol differs among persons with certain psychiatric disorders when compared with controls. Some reports concern Attention-Deficit/Hyperactivity Disorder (ADHD) but findings are inconclusive. In this study we collected four saliva samples during a regular weekday in children, 6-17 years old, with ADHD (n = 201) and non-affected comparisons (n = 221). Saliva cortisol was measured with radioimmunoassay technique. Clinical data were collected for diagnostic information. Subtypes and severity of symptoms were determined using parental rating scales. Children with ADHD had lower saliva cortisol levels than comparisons at waking up Median = 9.1 versus 12.7 nmol/L (p < .001), 30 min later Median = 15.8 versus 20.1 nmol/L (p < .001) and before going to bed Median = 0.8 versus 1.0 nmol/L (p = .015). No difference was found for the afternoon sample. When the study group was split into three different age groups similar results were found only for children above 10 years of age. Subtype of ADHD or co-occurring symptoms did not affect the cortisol levels. Degree of severity of ADHD symptoms was not associated with cortisol levels in the study group, other than a weak negative correlation between the afternoon sample and hyperactivity symptoms. The low cortisol levels in children with ADHD may indicate a dysregulation of the HPA-axis, for instance a down-regulation or a phase delay of the diurnal curve. The low levels may be related to the under-arousal possibly underlying several of the core symptoms of ADHD. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Hydrocortisone (major); Hypothalamic Pituitary Adrenal Axis (major); Mental Disorders; Saliva

Classification: 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female, Outpatient

Location: Sweden

Identifier (keyword): cortisol levels, attention deficit hyperactivity disorder, Hypothalamus Pituitary Adrenal axis, saliva samples, psychiatric disorders

Test and measure: Swanson Nolan and Pelham ADHD Symptom Rating Scale, Five to Fifteen Questionnaire

Methodology: Empirical Study, Quantitative Study

Author e-mail address: johan.isaksson@neuro.uu.se

Contact individual: Isaksson, Johan, Department of Neuroscience, Child and Adolescent Psychiatry Unit, Uppsala University, Uppsala, 75185, Sweden.; johan.isaksson@neuro.uu.se

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Publication date: Nov 2012
Internationally adopted children in Finland: Parental evaluations of symptoms of reactive attachment disorder and learning difficulties—FINADO study.

Author: Raaska, H.; 1 Elovainio, M.; 2 Sinkkonen, J.; 3 Matomäki, J.; 4 Mäkipää, S.; 5 Lapinleimu, H.; 3 1 Department of Child Psychiatry, Helsinki University Hospital, Helsinki, Finland hanna-raaska@fimnet.fi; 2 National Institute for Health and Welfare, Helsinki, Finland; 3 University of Turku, Turku, Finland; 4 Department of Pediatrics and Medicine, Turku University Hospital, Turku, Finland; 5 University of Tampere, Tampere, Finland

Publication info: Child: Care, Health and Development 38.5 (Sep 2012): 697-705.

Abstract (English): Objective: This study investigated the association between psychological symptoms, such as features of reactive attachment disorder (RAD), and learning difficulties among international adoptees in Finland. Methods: The data for this study came from the FINnish ADOption (FINADO) study covering all internationally adopted children in Finland (n = 1450), with a response rate of 55.7%. The subsample consisted of 395 adopted children aged 9–15 (51.6% girls, 48.4% boys). Learning difficulties were evaluated by a screening questionnaire 'Five To Fifteen' and symptoms of RAD by FINADO RAD scale. Results: The parents
estimated that onethird (33.4%) of the internationally adopted children had some, and 12.7% had severe learning difficulties, i.e. three and six times more than in normal population, respectively. RAD symptoms at the time of adoption were associated with learning difficulties at school age (OR 4.57, 95% CI 2.57–8.13).

Conclusions: Learning difficulties are common among internationally adopted children in Finland and symptoms of RAD are associated with a child's learning difficulties. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Adopted Children (major); Attachment Disorders (major); Learning Disabilities (major); Parental Characteristics (major); Symptoms (major)

Classification: 3200: Psychological & Physical Disorders

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female

Location: Finland

Identifier (keyword): adopted children, parental evaluations, disorder symptoms, reactive attachment disorder, learning difficulties

Test and measure: Wechsler Intelligence Scale for Children, Third Edition

Methodology: Empirical Study, Quantitative Study

Author e-mail address: hanna.raaska@fimnet.fi

Contact individual: Raaska, H., Department of Child Psychiatry, Helsinki University Hospital, PO Box 348, Helsinki, 00029, Finland; hanna.raaska@fimnet.fi

Publication title: Child: Care, Health and Development

Grant/sponsorship: Sponsor: Finland’s Slot Machine Association. Finland; Recipient: No recipient indicated; Sponsor: Foundation for Paediatric Research. Finland; Recipient: No recipient indicated; Sponsor: Turku University Hospital. Finland; Other details: EVO Grant; Recipient: No recipient indicated

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Publication history: 14 July 2013
Experiences of school bullying among internationally adopted children: Results from the Finnish Adoption (FINADO) study.

Author: Raaska, Hanna; ¹; Lapinleimu, Helena; ²; Sinkkonen, Jari; ³; Salmivalli, Christina; ⁴; Matomäki, Jaakko; ²; Mäkipää, Sanna; ⁵; Elovainio, Marko; ⁶; ¹ Department of Child Psychiatry, Helsinki University Central Hospital, Helsinki, Finland hanna.raaska@fimnet.fi; ² Department of Paediatrics, Turku University Central Hospital, Turku, Finland; ³ Department of Child Psychiatry, University of Turku, Turku, Finland; ⁴ Department of Psychology, University of Turku, Turku, Finland; ⁵ University of Tampere, Tampere, Finland; ⁶ National Institute of Health and Welfare, Helsinki, Finland


Abstract (English): This study investigated the prevalence of and factors associated with school bullying and victimization among Finnish international adoptees. The Olweus bully/victim questionnaire was sent to all 9–15-year-old children adopted in Finland between 1985 and 2007 through the mediating organizations officially approved by the Ministry of Social Affairs and Health. The children were identified through official adoption organizations. The response rate in the target sample was 49.4%: the study sample consisted of 364 children (190 girls, 52.2%). The children’s background factors and symptoms of reactive attachment disorder (RAD) were evaluated using a FINADO questionnaire. Their learning difficulties and social and language skills were assessed using a standardized parental questionnaire (Five to Fifteen). Of the participants, 19.8% reported victimization by peers while 8% had bullied others. Both victimization and bullying were associated with severe symptoms of RAD at the time of adoption (RR 2.68, 95%CI 1.50–4.77 and RR 2.08, 95%CI 1.17–3.69 for victimization and bullying, respectively). Lack of social skills was associated with victimization (RR 1.74, 95%CI 1.06–2.85) but not independently with being a bully (RR 1.50, 95%CI 0.91–2.45). In a multivariate analysis the child’s learning difficulties and language difficulties were not associated with either bullying others or victimization. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Maternal pre- and postnatal mental health trajectories and child mental health and development: Prospective study in a normative and formerly infertile sample.

Author: Vänskä, Mervi; 1 Punamäki, Raija-Leena; 1 Tolvanen, Asko; 2 Lindblom, Jallu; 1 Flykt, Marjo; 1 Unkila-Kallio, Leila; 3 Titinen, Aila; 2 Repokari, Leena; 3 Sinkkonen, Jari; 4 Tulppala, Maija; 3 1 University of Tampere, Tampere, Finland raija-leena.punamaki@uta.fi; 2 University of Jyvaskyla, Jyvaskyla, Finland; 3 Helsinki University Central Hospital, Helsinki, Finland; 4 Save the Children, Finland


Abstract (English): Pregnancy and early motherhood involve uncertainty and change, which can evoke mental health problems. We identified maternal mental health trajectories in pre- and postnatal period, and examined their association with later child mental health and development. Finnish mothers reported psychological distress (General Health Questionnaire [GHQ-36]) and depressive (Beck Depression Inventory [BDI-13]) symptoms in pregnancy (T1; N = 788) and two months (T2; N = 657) and 12 months (T3; N = 545) postpartum. Both parents accounted their child’s mental health (Behavior Assessment System for Children [BASC]) and social (Social Skills Rating System [SSRS], Child Behavior Scale [CBS]) and cognitive development (Five to Fifteen [FTF]) when the child was 7–8 years old (T4; N = 485). We identified five trajectories depicting unique timing and course of maternal mental health from pregnancy into 1 year of mothering: Stable low levels of mental health symptoms (75%) and prenatal (6%), early postpartum (9%) and late postpartum (6%) mental health problems. The fifth trajectory, heterogeneous high levels of mental health problems (4%) was an unclassified post hoc class, combining mothers with chronic high or highly variable mental health profiles. Results show some trajectory-related timing effects on children’s mental health and cognitive development. The trajectories of early postpartum and heterogeneous high levels of mental health problems predicted higher level of internalizing symptoms as compared to stable low-levels trajectory. The heterogeneous high-levels trajectory predicted higher levels of problems in executive functions than the stable low and late postpartum trajectories, and in memory tasks than children in other trajectories. We discuss the timing and course of maternal mental health from the viewpoint of infant and child development. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Childhood Development (major); Mental Health (major); Postnatal Period (major); Pregnancy (major); Mothers; Psychosocial Development

Classification: 2800: Developmental Psychology

Age: Adulthood (18 yrs & older)

Population: Human, Female

Location: Finland

Identifier (keyword): mental health trajectories, child mental health, childhood development, postnatal period, pregnancy

Test and measure: Parent Rating Scale for Children, Behavior Assessment System for Children, General Health Questionnaire, Social Skills Rating System, Beck Depression Inventory, Child Behavior Scale
ADHD and other associated developmental problems in children with mild mental retardation. The use of the “Five-To-Fifteen” questionnaire in a population-based sample.
Abstract (English): The aim was to examine the rates and types of parent reported neuropsychiatric problems in children and adolescents with mild mental retardation (MMR) (mild intellectual disability/UK) using the Five-To-Fifteen questionnaire (FTF). The target group comprised all pupils with clinically diagnosed MMR, aged between 7 and 15 years, attending the special schools for children with MMR in two municipalities in a region in the South-West of Sweden. The FTF is a 181-item parent questionnaire with age and gender specific Swedish norms covering eight domains, including the phenomenology of early symptomatic syndromes eliciting neurodevelopmental examinations (ESSENCE), including ADHD, autism, tic syndromes, and various kinds of language, memory, and learning problems. Parents of 63% (39/62) of the eligible target group completed the FTF. After scrutiny of the medical records, 6 of the 39 children were found not to meet criteria for MR. Scores exceeding the 90th centile of the norm group were considered indicative of neuropsychiatric problems. Such high scores are strongly associated with clinically valid ESSENCE/neuropsychiatric disorders. All the examined children with validated MR were reported by their parents to have learning problems. There were very high rates of problems reported in all the other seven FTF domains: perception (88%), language (79%), social skills/autism (76%), memory (67%), emotional problems (58%), motor skills (55%) and executive functions/ADHD (55%). School age children with MMR are all in need of a comprehensive work-up covering not only general cognitive abilities, but also many other areas, including motor skills, executive function/attention, social and emotional/behavioural symptoms/functioning. Such broad assessment (including child screening by parent report with the FTF) will enable a better basis for understanding their special needs of support through life.

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Developmental Disabilities (major); Psychometrics (major); Questionnaires (major); Pediatrics; Intellectual Development Disorder

Classification: 2224: Clinical Psychological Testing; 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female

Location: Sweden

Identifier (keyword): Five-To-Fifteen Questionnaire, attention deficit hyperactivity disorder, developmental problems, children, mild mental retardation, psychometrics

Test and measure: Five-To-Fifteen Questionnaire, Adaptive Behavior Assessment System-II

Methodology: Empirical Study, Quantitative Study

Author e-mail address: elisabeth.fernell@vgregion.se

Contact individual: Fernell, Elisabeth, Research and Development Centre, Skaraborgs Hospital, Skovde, Sweden.; elisabeth.fernell@karolinska.se

Publication title: Research in Developmental Disabilities

Grant/sponsorship: Sponsor: Skaraborgs Hospital. Research and Development Centre. Sweden; Recipient: No recipient indicated
Teacher reports of hypoactivity symptoms reflect slow cognitive processing speed in primary school children.

Author: Lundervold, Astri J.; ¹; Posserud, Maj-Britt; ²; Ullebø, Anne-Karin; ²; Sørensen, Lin; ¹; Gillberg, Christopher; ³ ¹ Department of Biological and Medical Psychology, University of Bergen, Bergen, Norway astri.lundervold@psych.uib.no; ² Centre for Child and Adolescent Mental Health, Uni Health, Bergen, Norway; ³ Gillberg Centre, Sahlgrenska Academy, Gothenburg, Sweden


Abstract (English): The mediating effect of cognitive processing speed on the ability of a primary school child to achieve his/her full potential of intellectual functioning emphasizes the importance of methods to detect “slow” children. Primary school teachers may be the first to have concerns about inattentive pupils who show...
symptoms of hypoactivity, but may find the symptoms difficult to interpret. In the present study we ask if a primary school teacher’s report of hypoactivity symptoms can be explained by the child’s performance on tests of processing speed. The 255 children included in the present study were part of the first wave of the Bergen Child Study, in which teachers completed a questionnaire including two hypoactivity items from the Five to Fifteen (FTF) questionnaire. Processing speed was measured by the Processing Speed Index (PSI) from the WISC-III, 1–2 years after the teacher rating. Teachers reported “certainly true” on at least one FTF item of hypoactivity for 11.8% of the children. These children obtained lower scores on the PSI than the remaining children in the sample. The PSI accounted for a considerable proportion of the variance of teacher reports on the FTF item “difficulty getting started on a task/activity”. The risk of a PSI score below 85 was increased in children with teacher-reported hypoactivity symptoms. The results indicate that teacher reports of hypoactivity symptoms reflect slow cognitive processing speed and should be followed up by a psychometric examination. Still, future studies are needed to improve detection and treatment of children with slow processing speed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Cognitive Processing Speed (major); Elementary School Teachers (major); Primary School Students (major); Symptoms (major); Teacher Attitudes (major)

Classification: 3500: Educational Psychology

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adulthood (18 yrs & older)

Population: Human, Male, Female

Location: Norway

Identifier (keyword): teacher reports, hypoactivity symptoms, cognitive processing speed, primary school children

Test and measure: Five to Fifteen Questionnaire, Swanson, Nolan and Pellham Questionnaire–IV, Development And Well–Being Assessment, Wechsler Intelligence Scale for Children–III—Processing; Speed Index—Symbol Search Subtest, Wechsler Intelligence Scale for Children–III—Processing Speed Index—Digit Symbol Subtest, Wechsler Intelligence Scale for; Children–III—Verbal Comprehension Index, Wechsler Intelligence Scale for Children–III—Perceptual Organization Index, Wechsler Intelligence Scale for; Children–III—Freedom From Distractibility Index, Bergen Child Study Questionnaire, Strengths and Difficulties Questionnaire, Autism Spectrum Screening Questionnaire

Methodology: Empirical Study, Longitudinal Study, Interview, Quantitative Study

Author e-mail address: astri.lundervold@psych.uib.no

Contact individual: Lundervold, Astri J., Department of Biological and Medical Psychology, University of Bergen, Bergen, Norway.; astri.lundervold@psych.uib.no

Publication title: European Child & Adolescent Psychiatry

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Pages: 121-126
Deficient cardiovascular stress reactivity predicts poor executive functions in adults with attention-deficit/hyperactivity disorder.

Author: Hirvikoski, Tatja; Olsson, Erik M. G.; Nordenström, Anna; Lindholm, Torun; Nordström, Anna-Lena; Lajic, Svetlana; Department of Molecular Medicine and Surgery, Centre for Molecular Medicine, Karolinska Institutet, Karolinska University Hospital, Stockholm, Sweden Tatja.Hirvikoski@ki.se; Uppsala University, Uppsala, Sweden; Stockholm University, Stockholm, Sweden; Department of Clinical Neuroscience, Psychiatry, Karolinska Institutet, Karolinska University Hospital, Stockholm, Sweden


Abstract (English): Associations between cardiovascular stress markers, subjective stress reactivity, and executive functions were studied in 60 adults (30 with attention-deficit/hyperactivity disorder, ADHD, and 30 controls) using the Paced Auditory Serial Addition Test (PASAT, a test of executive functions) as a cognitive stressor. Despite higher self-perceived stress, the adults with ADHD showed lower or atypical cardiovascular stress reactivity, which was associated with poorer performance on PASAT. Using cardiovascular stress
markers, subjective stress, and results on PASAT as predictors in a logistic regression, 83.3% of the ADHD
group and 86.9% of the controls could be classified correctly. (PsycINFO Database Record (c) 2012 APA, all
rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Cardiovascular Reactivity (major); Stress
Reactions (major); Executive Function (major)

Classification: 3250: Developmental Disorders & Autism

Age: Adulthood (18 yrs & older), Young Adulthood (18-29 yrs), Thirties (30-39 yrs), Middle Age (40-64 yrs)

Population: Human, Male, Female

Location: Sweden

Identifier (keyword): attention deficit disorder with hyperactivity, cardiovascular stress markers, subjective stress
reactivity, executive function

Test and measure: Paced Auditory Serial Addition Test, Attention-Deficit/Hyperactivity Disorder Self-Report
Scale, Connors Hyperactivity Index, Five to Fifteen Questionnaire—Executive Functions Subscale, Life; Events
Checklist, Wechsler Adult Intelligence Scale—Third Edition, Beck Anxiety Inventory, Beck Depression Inventory,
Visual Analogue Scale, Wender Utah Rating Scale

Methodology: Empirical Study, Quantitative Study

Author e-mail address: Tatja.Hirvikoski@ki.se

Contact individual: Hirvikoski, Tatja, Department of Molecular Medicine and Surgery, Centre for Molecular
Medicine, Karolinska Institutet, Karolinska University Hospital, L8 02, Stockholm, SE-17176, Sweden.;
Tatja.Hirvikoski@ki.se

Publication title: Journal of Clinical and Experimental Neuropsychology

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Language: English
Gender differences on the Five to Fifteen questionnaire in a nonreferred sample with inattention and hyperactivity-impulsivity and a clinic-referred sample with hyperkinetic disorder.

Author: Lambek, Rikke; Trillingsgaard, Anegen; Kadesjö, Björn; Damm, Dorte; Thomsen, Per Hove; Department of Psychology, University of Aarhus, Aarhus, Denmark rikkel@psy.au.dk; Unit for Child Neuropsychiatry, Queen Silvia’s Hospital for Children and Adolescents, Goteborg, Sweden; Regional Center for Child and Adolescent Psychiatry, Aarhus University Hospital, Aarhus, Denmark


Abstract (English): The aim of the present study was to examine gender differences in children with inattention, hyperactivity, and impulsivity on the Five to Fifteen (FTF) parent questionnaire. First, non-referred girls (n = 43) and boys (n = 51) with problems of attention and hyperactivity-impulsivity and then clinic-referred girls (n = 35) and boys (n = 66) with hyperkinetic disorder (HKD) were compared on the FTF. Results suggested that non-referred boys were more hyperactive-impulsive than non-referred girls, whereas clinic-referred boys and girls with HKD were more similar than dissimilar on the FTF questionnaire. Secondly, it was examined whether the application of gender mixed norms versus gender specific norms would result in varying proportions of clinic-referred children with HKD being identified as impaired on the subdomains of the FTF questionnaire. Based on results it was concluded that the use of a gender mixed normative sample may lead to overestimation of impairment in boys with HKD, but the type of sample applied to define impairment on the FTF should depend on the purpose for applying the questionnaire. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Human Sex Differences (major); Impulsiveness (major); Psychometrics (major); Test Validity (major); Test Reliability
Girls with social and/or attention deficits: A descriptive study of 100 clinic attenders.

Author: Kopp, Svenny; 1; Berg Kelly, Kristina; 2; Gillberg, Christopher; 1; 1 Department of Child and Adolescent Psychiatry, University of Göteborg, Sweden svenny.kopp@vgregion.se; 2 Department of Pediatrics, University of Göteborg, Sweden


ProQuest document link

Abstract (English): Objective: Examine clinical correlates and distinguishing features of autism spectrum disorders (ASD), ADHD, and tic disorders in girls referred for social impairment, attention/academic deficits, and/or tics. Method: One hundred 3- to 18-year-old girls referred for social impairment and attention symptoms were assessed in detail. Sixty of these girls, 7 to 16 years of age (IQ ≥ 80) were compared with age-matched girls (IQ ≥ 80) from the community. Results: Main diagnoses of ASD, ADHD, tic disorders, and “other psychiatric disorder” were made in 46, 46, 3, and 5, respectively, of the referred girls. The ASD and ADHD groups (mean age at diagnosis 8.8 and 13.0 years, respectively) had the same types and high rates of psychiatric comorbidity. Girls with ASD had more problems with global functioning and adaptive levels of daily living skills than girls with ADHD. Differences between these girls referred for investigation and the community sample of girls were very considerable across a range of factors. Conclusions: Girls referred for social and/or attention deficits usually meet diagnostic criteria for either ASD or ADHD. They have severe psychiatric comorbidities and low global levels of functioning. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Human Females (major); Pervasive Developmental Disorders (major); Tics (major); Academic Aptitude; Attention; Social Skills

Classification: 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), Preschool Age (2-5 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs), Adulthood (18 yrs & older), Young Adulthood (18-29 yrs)

Population: Human, Female

Location: Sweden

Identifier (keyword): girls, ADHD, autism spectrum disorders, tic disorders, social impairment, academic deficits, attention deficits, tics, features

Test and measure: 10-Item Conners Scale, Conners’ Teachers’ Rating Scale-revised: long form, Five to Fifteen Questionnaire, Birleson Depression Self-Rating Scale, Severity of Psychosocial Stressors Scale-Children and Adolescents, Autism Diagnostic Interview-revised, Child and Adolescent Psychiatric Assessment, Vineland Adaptive Behaviour Scales-Daily Living Skills domain, Autism Diagnostic Observation; Schedule-Generic, Cailler-Asuza Scale, EB Test, Griffiths for preschool children with poor or no language, Movement Assessment Battery for Children, Wechsler Intelligence Scale for Children, Third; Edition, Wechsler Preschool and Primary Scale of Intelligence--Revised, WAIS-R (Wechsler Adult Intelligence Scale-Revised), Global Assessment of Functioning Scale, Autism Spectrum Screening; Questionnaire
Development and behaviour of 5-year-old very low birthweight infants.

Author: Rautava, Liisi; \(^1\); Andersson, Sture; \(^2\); Gissler, Mika; \(^3\); Hallman, Mikko; \(^4\); Hääkkinen, Unto; \(^3\); Korvenranta, Emmi; \(^1\); Korvenranta, Heikki; \(^5\); Leipälä, Jaana; \(^3\); Tammela, Outi; \(^6\); Lehtonen, Liisa; \(^1\); Department of Pediatrics, Turku University Hospital, Turku, Finland liisi.rautava@utu.fi; \(^2\) Hospital for Children and Adolescents, Helsinki, Finland; \(^3\) National Institute for Health and Welfare, Helsinki, Finland; \(^4\) Department of Pediatrics, Oulu University Hospital, Oulu, Finland; \(^5\) Turku University Hospital, Turku, Finland; \(^6\) Department of Pediatrics, Tampere University Hospital, Tampere, Finland

Abstract (English): The place and time of birth influence the mortality of premature infants. We studied the effect of prematurity, time of birth, birth hospital level and district on the development and behaviour in a national cohort of 5-year-old Finnish very low birthweight infants (VLBWI). All surviving VLBWI (gestational age <32 weeks or birthweight ≤1,500 g) born in 2001–2002 in level II or III hospitals in Finland and full-term controls were included. The parents of 588 (64%) VLBWI and 176 (46%) controls returned the Five to Fifteen questionnaire (FTF) on the development and behaviour of their 5-year-old children. The questionnaire scores were linked to data from the National Medical Birth Register, the Hospital Discharge Register, the Register of Congenital Malformations and the Cause of Death Register. VLBWI had lower developmental and behavioural scores compared to the controls in all FTF domains. In VLBWI, the scores were less optimal, the lower the gestational age was. The time of birth, birth hospital level and district were not associated with the developmental and behavioural scores in VLBWI. In conclusion, short duration of pregnancy adversely influences development and behaviour in VLBWI. Despite differences previously demonstrated in mortality related to time and place of birth, there were no differences in developmental and behavioural scores in VLBWI according to the time of birth, birth hospital level or district. Thus, the survival advantage in level III hospitals seems not to be gained at the expense of behavioural or developmental problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Relations between brain volumes, neuropsychological assessment and parental questionnaire in prematurely born children.

Author: Lind, Annika; ¹; Haataja, Leena; ²; Rautava, Liisi; ³; Väliaho, Anniina; ⁴; Lehtonen, Liisa; ³; Lapinleimu, Helena; ³; Parkkola, Riitta; ⁵; Korkman, Marit; ⁶; ¹ Turku University Hospital Foundation, Turku, Finland annika.lind@abo.fi; ² Department of Pediatric Neurology, Turku University Hospital, University of Turku, Turku, Finland; ³ Department of Pediatrics, Turku University Hospital, University of Turku, Turku, Finland; ⁴ Department of Pediatrics, Turku University Hospital, Turku, Finland; ⁵ Department of Radiology, Turku PET Center, Turku University Hospital, University of Turku, Turku, Finland; ⁶ Department of Psychology, University of Helsinki, Helsinki, Finland


Abstract (English): The objective of this study is to assess the relationship between brain volumes at term equivalent age and neuropsychological functions at 5 years of age in very low birth weight (VLBW) children, and to compare the results from a neuropsychological assessment and a parental questionnaire at 5 years of age. The study group included a regional cohort of 97 VLBW children and a control group of 161 children born at term. At term equivalent age, brain magnetic resonance imaging (MRI) was performed on the VLBW children, and analysed for total and regional brain volumes. At 5 years of age, a psychologist assessed the neuropsychological performance with NEPSY II, and parents completed the Five to fifteen (FTF) questionnaire.
on development and behaviour. The results of the control group were used to give the age-specific reference values. No significant associations were found between the brain volumes and the NEPSY II domains. As for the FTF, significant associations were found between a smaller total brain tissue volume and poorer executive functions, between a smaller cerebellar volume and both poorer executive functions and motor skills, and, surprisingly, between a larger volume of brainstem and poorer language functions. Even after adjustment for total brain tissue volume, the two associations between the cerebellar volume and the FTF domains remained borderline significant ($P = 0.05$). The NEPSY II domains Executive Functioning, Language and Motor Skills were significantly associated with the corresponding FTF domains. In conclusion, altered brain volumes at term equivalent age appear to affect development still at 5 years of age. The FTF seems to be a good instrument when used in combination with other neuropsychological assessment. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Developmental coordination disorder and other motor control problems in girls with autism spectrum disorder and/or attention-deficit/hyperactivity disorder.

Author: Kopp, Svenny; 1; Beckung, Eva; 1; Gillberg, Christopher; 1; Goteborg University, Institute of Neuroscience and Physiology, Goteborg, Sweden svenny.kopp@hem.utfors.se


Abstract (English): Examine the rate, predictors, and effect on daily life skills of developmental coordination disorder (DCD) and other motor control difficulties in school age girls with autism spectrum disorder (ASD) and/or attention-deficit/hyperactivity disorder (ADHD), in preschool age girls with ASD referred to a neuropsychiatric clinic, and in a community sample of school age girls. The girls (131 in total) were examined with standardised test of motor function and parent interviews and questionnaires. The school girls were compared with 57 age-and IQ-matched girls from the community. DCD was diagnosed in 25% of clinic school girls with ASD, in 32% of those with ADHD, and in 80% of the clinic preschool girls with ASD. Parents reported more motor problems in the school age clinic group. Agreement between a brief motor screening test and a full comprehensive motor examination was moderate to good in the clinic group. Young age, autistic symptomatology, and low performance IQ predicted more motor coordination problems. Motor coordination problems were related to lower ability in daily life skills even when the effect of PIQ was controlled for. A large minority of school girls with ASD and/or ADHD, and a majority of preschool girls with ASD meet full diagnostic criteria for DCD. Their motor problems contribute to reduced activity in daily life even when the effects of IQ have been partialled out. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Research report: Reading comprehension, word decoding and spelling in girls with Autism Spectrum Disorders (ASD) or Attention-Deficit/Hyperactivity Disorder (AD/HD): Performance and predictors.

Author: Åsberg, Jakob; 1; Kopp, Svenny; 2; Berg-Kelly, Kristina; 3; Gillberg, Christopher; 2; 1 Department of Psychology, University of Gothenburg, Gothenburg, Sweden psyjaas@psy.gu.se; 2 Institute of Neuroscience and Physiology, Department of Child and Adolescent Psychiatry, University of Gothenburg, Gothenburg, Sweden; 3 Institute of Clinical Sciences, University of Gothenburg, Gothenburg, Sweden


Abstract (English): Background: Difficulties with aspects of literacy are often seen in children with autism spectrum disorders (ASD) and attention-deficit/hyperactivity disorder (AD/HD). The bases of the connections between these disorders and literacy difficulties are poorly understood. Furthermore, it is not clear if existing research is representative for girls. Aims: There were three aims: (1) to compare performance in reading comprehension, word decoding, and spelling in girls with ASD (n = 20), AD/HD (n = 36), and community girls with typical developing (girls; n = 54); (2) to assess rates of reading and writing disorders within groups; and (3) to examine the predictive value of measures of autistic and AD/HD symptomatology to reading comprehension in the whole girl sample. Methods &Procedures: Participants were aged between 8 and 17 years, and had a full scale IQ>70. Standardized tests of literacy, oral vocabulary, and non-verbal ability were administered. Parent ratings of degree of autistic symptomatology and both parent and teacher ratings of AD/HD symptomatology were collected for all girls. Outcomes &Results: Girls with diagnosed ASD could not be separated significantly from typically developing girls or girls with AD/HD on average performance on any literacy test. However, among girls with ASD, 40% had at least one reading and writing disorder. Girls with AD/HD performed lower than typically developing girls in reading comprehension, word decoding, and spelling, and 56% had at least one reading and writing disorder. In regression analysis, using the total sample, both degrees of autistic and AD/HD symptomatology negatively contributed to the variance in reading comprehension after controlling for oral vocabulary, word decoding, and non-verbal ability. Whereas AD/HD contributed to the variance in reading comprehension once autistic symptomatology was controlled for, the opposite was not true. However, a large bivariate correlation between autistic and AD/HD symptomatology somewhat complicates the interpretation of that result. Conclusions &Implications: The findings highlight the importance of monitoring and supporting the literacy development in girls with ASD or AD/HD. Results from regression analyses suggested that word decoding and/or oral vocabulary training may not be sufficient for the girls fully to overcome difficulties in the important skill of reading comprehension. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Subject: Attention Deficit Disorder with Hyperactivity (major); Pervasive Developmental Disorders (major); Reading Comprehension (major); Spelling (major); Word Recognition

Classification: 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), Preschool Age (2-5 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs), Adulthood (18 yrs & older)

Population: Human, Male, Female

Location: Sweden

Identifier (keyword): autism spectrum disorders, attention deficit hyperactivity disorder, reading comprehension, word decoding, spelling


Methodology: Empirical Study, Quantitative Study

Author e-mail address: psyjaas@psy.gu.se

Contact individual: Åsberg, Jakob, Department of Psychology, University of Gothenburg, Box 500, Gothenburg, SE-405 30, Sweden.; psyjaas@psy.gu.se

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First submitted date: 03 Jul 2008
The neuropsychology of 22q11 deletion syndrome. A neuropsychiatric study of 100 individuals.

**Author:** Niklasson, Lena; Gillberg, Christopher; Institute of Neuroscience and Physiology, Child and Adolescent Psychiatry, The Sahlgrenska Academy, University of Gothenburg, Goteborg, Sweden lena.niklasson@vgregion.se

**Publication info:** Research in Developmental Disabilities 31.1 (Jan-Feb 2010): 185-194.

**Abstract (English):** The primary objective of this study was to study the impact of ASD/ADHD on general intellectual ability and profile, executive functions and visuo-motor skills in children and adults with 22q11 deletion syndrome (22q11DS). A secondary aim was to study if gender, age, heart disease, ASD, ADHD or ASD in combination with ADHD had an impact on general intellectual ability and profile. One hundred consecutively referred individuals aged 1–35 years with 22q11DS were given in-depth neuropsychological assessments. Mean full scale IQ was 71 with a normal distribution around this mean. Higher IQ for females than males, and a negative trend for IQ with higher age were found. Intellectual impairment, as well as visuo-motor dysfunction, was found to be related to 22q11DS per se and not to ASD/ADHD. In the area of executive function, the presence of ASD/ADHD predicted poor planning ability in the children in the study. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

**Links:** Get document

**Subject:** Cognitive Ability (major); Deletion (Chromosome) (major); Neuropsychology (major); Perceptual Motor Processes (major); Syndromes (major); Attention Deficit Disorder with Hyperactivity; Motor Skills; Pervasive Developmental Disorders

**Classification:** 3290: Physical & Somatoform & Psychogenic Disorders

**Age:** Childhood (birth-12 yrs), Infancy (2-23 mo), Preschool Age (2-5 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs), Adulthood (18 yrs & older), Young Adulthood (18-29 yrs), Thirties (30-39; yrs)

**Population:** Human, Male, Female

**Location:** Sweden

**Identifier (keyword):** neuropsychology, 22q11deletion syndrome, intellectual ability, executive functioning, visuo-motor skills, attention deficit hyperactivity disorder, autism spectrum disorders
Atomoxetine improves patient and family coping in attention deficit/hyperactivity disorder: A randomized, double-blind, placebo-controlled study in Swedish children and adolescents.

**Author:** Svanborg, Pär; Thernlund, Gunilla; Gustafsson, Per A.; Hägglöf, Bruno; Schacht, Alexander; Kadesjö, Björn; Department of Clinical Neuroscience, Psychiatry Section, Karolinska Institutet, Stockholm, Sweden svanborg_par@lilly.com; Department of Child and Adolescent Psychiatry, Clinical Sciences, Lund University, Lund, Sweden; Child and Adolescent Psychiatry (BUP), University Hospital, Linkoping, Sweden; Division of Child and Adolescent Psychiatry, NUS, Umeå University, Umea, Sweden; European Medical Information Science, Lilly Deutschland GmbH, Bad Homburg, Germany; Department of Child and Adolescent Psychiatry, Drottning Silvias Barnsjukhus, Barnneuropsykiatriska Kliniken (BNK), University of Gothenburg, Gothenburg, Sweden


**Abstract (English):** This 10-week study assessed the efficacy of atomoxetine in combination with psychoeducation compared to placebo and psychoeducation in the improvement of Quality of Life in Swedish stimulant-naive children and adolescents with attention deficit/hyperactivity disorder. A total of 99 patients were treated with atomoxetine (49 patients) or placebo (50 patients) for 10 weeks and assessed regarding broader areas of functioning using the Quality of Life measures Child Health and Illness Profile-Child Edition (CHIP-CE), Family Strain Index [FSI; equivalent to the Family Burden of Illness Module used in the study], Appraisal of Stress in Child-Rearing (ASCR), Five to fifteen (FTF), “I think I am” (“Jag tycker jag är”), and Children’s Depression Rating Scale-Revised (CDRS-R) before and after the active treatment phase. Simultaneously, the patients’ parents participated in a 4-session psychoeducation program. A statistically significant difference in favor of atomoxetine was seen in the improvement from baseline to study endpoint for the CHIP-CE domains “Achievement” and “Risk avoidance”, for the FSI total score, for the ASCR section (I) domain “Child as a burden”, for all FTF domains except for “Language and Speech”, and for the CDRS-R total score. No difference between treatment groups was observed in the patient-assessed evaluation of self-esteem using the “I think I am” scale. Atomoxetine combined with psychoeducation had a positive effect on various everyday coping abilities of the patients as well as their families during 10 weeks of treatment, whereas the patients’ self-image and the parents’ image of the climate in the family were not significantly improved. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

**Links:** Get document

**Subject:** Attention Deficit Disorder with Hyperactivity (major); Placebo (major); Psychoeducation (major); Atomoxetine (major); Coping Behavior; Family; Patients

**Classification:** 3340: Clinical Psychopharmacology

**Age:** Childhood (birth-12 yrs), Adolescence (13-17 yrs)

**Population:** Human, Male, Female

**Location:** Sweden

**Identifier (keyword):** atomoxetine, family coping, patient coping, attention deficit disorder with hyperactivity, Swedish children, Swedish adolescents, placebo, psychoeducation

Author: Johnson, Mats; Ölström, Sven; Fransson, Gunnar; Kadesjö, Björn; Gillberg, Christopher; Goteborg University, Goteborg, Sweden mats.k.johnson@vgregion.se


Abstract (English): The aim of the study was to assess omega 3/6 fatty acids (eye q) in attention deficit hyperactivity disorder (ADHD). Method: The study included a randomized, 3-month, omega 3/6 placebo-controlled, one-way crossover trial with 75 children and adolescents (8–18 years), followed by 3 months with omega 3/6 for all. Investigator-rated ADHD Rating Scale–IV and Clinical Global Impression (CGI) scale were outcome measures. Results: A majority did not respond to omega 3/6 treatment. However, a subgroup of 26% responded with more than 25% reduction of ADHD symptoms and a drop of CGI scores to the near-normal range. After 6 months, 47% of all showed such improvement. Responders tended to have ADHD inattentive subtype and comorbid neurodevelopmental disorders. Conclusion: A subgroup of children and adolescents with ADHD, characterized by inattention and associated neurodevelopmental disorders, treated with omega 3/6 fatty acids for 6 months responded with meaningful reduction of ADHD symptoms. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Dietary Supplements (major); Fatty Acids (major); Subtypes (Disorders) (major); Treatment Effectiveness Evaluation (major); Comorbidity

Classification: 3340: Clinical Psychopharmacology

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs), Adulthood (18 yrs & older), Young Adulthood (18-29 yrs)

Population: Human, Male, Female

Location: Sweden

Identifier (keyword): attention deficit hyperactivity disorder, omega 3/6 fatty acids, developmental coordination disorder, reading writing disorder

Test and measure: Swanson, Nolan, and Pelham questionnaires (SNAP)-IV, Five To Fifteen (FTF) Parent Scale, Brown’s Attention Deficit Disorder Scale for Children and Adolescents, Brown’s Self Report, FTF; Teacher Scale, Brown’s Teacher Scale, Conners’ Parent Rating Scale–Long Version, ADHD-RS-IV, Global Assessment of Functioning Scale

Methodology: Empirical Study, Quantitative Study, Treatment Outcome/Clinical Trial

Author e-mail address: mats.k.johnson@vgregion.se

Contact individual: Johnson, Mats, Department of Child and Adolescent Psychiatry, Institute of Neuroscience and Physiology, Goteborg University, Kungsgatan 12, Goteborg, 411 18, Sweden, mats.k.johnson@vgregion.se
Paediatric obesity: A neurodevelopmental perspective.

**Author:** Hölcke, Mats; Marcus, Claude; Gillberg, Christopher; Fernell, Elisabeth; Department of Endocrinology and Obesity, Karolinska University Hospital, Huddinge, Sweden; Department of Child and Adolescent Psychiatry, Gothenburg University, Gothenburg, Sweden; Department of Neuropaediatrics, Astrid Lindgren Children’s Hospital, Stockholm, Sweden

**Publication info:** Acta Paediatrica 97.6 (Jun 2008): 819-821.

**Abstract (English):** We set out to explore the rate of cognitive dysfunctions—manifested as learning and behavioral problems—in a group of children and adolescents attending the national center for obesity at the Karolinska University Hospital, Huddinge. Referred children are assessed by a team comprising pediatricians, nurses, a dietician and a psychologist. The primary aim is to assess the child’s metabolic status and to provide intervention. From January 2005 to May 2007, parents of consecutive obese child patients, seen and meticulously physically examined by one of the doctors at the center (MH), were given a questionnaire—the five-to-fifteen questionnaire—covering developmental and behavioral problems. The results lend some support for the notion that there might be a link between obesity and neurodevelopmental problems in a relatively large
subgroup of children and adolescents with obesity. For some types of “definitive” problems, such as motor skills deficits, social dysfunction and emotional problems, rates were four to five times those expected on the basis of population norms. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

Links: Get document

Subject: Behavior Problems (major); Cognitive Impairment (major); Learning (major); Neural Development (major); Obesity (major); Childhood Development

Classification: 3260: Eating Disorders

Age: Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female, Inpatient

Location: Sweden

Identifier (keyword): pediatrics, obesity, neurodevelopmental perspective, cognitive dysfunctions, learning problems, behavioral problems

Test and measure: Five-to-Fifteen Questionnaire

Methodology: Empirical Study, Quantitative Study

Author e-mail address: elisabeth.fernell@vgregion.se

Contact individual: Fernell, Elisabeth, Unit of Neurodevelopmental Disorders, Skaraborgs Hospital, Mariestad, 542 24, Sweden,; elisabeth.fernell@vgregion.se

Publication title: Acta Paediatrica

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Accepted date: 31 Mar 2009

Revised date: 20 Feb 2009
ADHD and language impairment: A study of the parent questionnaire FTF (Five to Fifteen).

Author: Bruce, Barbro; ¹; Thernlund, Gunilla; ²; Nettelbladt, Ulrika; ¹; ¹ Dept. of Logopedics, Phoniatrics and Audiology, Lund University, Lund, Sweden barbro.bruc@med.lu.se; ² Dept. of Child and Youth Psychiatry, Lund University, Lund, Sweden


Abstract (English): The parental questionnaire FTP (Five to Fifteen) was given to parents of 76 children (mean age 11 years) diagnosed with ADHD. About half of the children had at least once been referred to a speech- and language pathologist. Most of them had not received any intervention or follow-up. A factor analysis identified six problem areas, which explain close to 75 % of the total variation: Cognitive Skills, Motor/Perception, Emotion/Socialisation/Behaviour, Attention, Literacy Skills and Activity Control. The majority of the children had pragmatic problems, which are associated with some of the core aspects of the ADHD symptoms, especially inattention and impulsiveness. Communication and language comprehension caused these children many more problems than expressive language. Problems of reading and writing were very frequent. IQ-score was associated with maths and reading/writing. Additional items reflecting language skills, in particular language comprehension and pragmatics, were also found in other domains in the FTP, mainly in Executive functions, Learning and Social skills. Problems with language and pragmatics thus seem to be associated with the typical problems with learning and social skills in children with ADHD. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

Links: Get document

Subject: Attention Deficit Disorder with Hyperactivity (major); Language Disorders (major); Questionnaires (major)

Classification: 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs)

Population: Human, Male, Female

Identifier (keyword): language impairment, attention deficit disorder with hyperactivity, parental questionnaire, Five to Fifteen

Test and measure: FTF Questionnaire
Attention deficits in children with 22q.11 deletion syndrome.

Author: Niklasson, Lena; ¹; Rasmussen, Peder; ²; Öskarsdóttir, Sólveig; ³; Gillberg, Christopher; ¹; ¹ Department of Child and Adolescent Psychiatry, University of Göteborg, Göteborg, Sweden lena.niklasson@vgregion.se; ² Department of Child and Adolescent, University of Göteborg, Göteborg, Sweden; ³ Department of Pediatrics, Queen Silvia Children's Hospital, Göteborg, Sweden


Abstract (English): This study examined attention abilities of children with 22q.11 deletion syndrome. Thirty children (14 males, 16 females; age range 7 to 13y) were given comprehensive neuropsychological and neuropsychiatric assessments. Learning disability was found in 13 children. Superiority in verbal over performance IQ was very common. Attention-deficit-hyperactivity disorder (mainly of inattentive subtype) was diagnosed in 13 children. There appeared to be a relation between low IQ and presence of autism spectrum problems. The presence of attention deficits was clearly supported by the scores on the Child Behavior
Checklist and the Conners Questionnaire. On the Becker attention tests the reaction times were significantly longer in the two visual and auditory tests, indicating that the ability to sustain attention is critically impaired in this group. A tendency of inferiority on auditory compared with visual tests was noted but there were no specific problems with the focus-execute aspect of attention. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

**Links:** Get document

**Subject:** Attention Deficit Disorder (major); Deletion (Chromosome) (major); Neuropsychological Assessment (major); Pervasive Developmental Disorders (major); Syndromes (major); Subtypes (Disorders)

**Classification:** 3290: Physical & Somatoform & Psychogenic Disorders

**Age:** Childhood (birth-12 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs), Adulthood (18 yrs & older)

**Population:** Human, Male, Female

**Location:** Sweden

**Identifier (keyword):** attention deficits, 22q.11 deletion syndrome, neuropsychological assessment

**Test and measure:** Asperger Syndrome Screening Questionnaire, Conners Brief Parent Questionnaire, Five to Fifteen (FTP) questionnaire, Becker attention test, Wechsler Intelligence Scale for Children, Third Edition,; Achenbach Child Behavior Checklist

**Methodology:** Empirical Study, Quantitative Study

**Author e-mail address:** lena.niklasson@vgregion.se

**Contact individual:** Niklasson, Lena, Department of Child and Adolescent Psychiatry, University of Goteborg, Kungsgatan 12, Goteborg, SE 411 19, Sweden.; lena.niklasson@vgregion.se

**Publication title:** Developmental Medicine & Child Neurology

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**Publisher:** Mac Keith Press (, US); Wiley-Blackwell Publishing Ltd. (, United Kingdom)

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**Peer reviewed:** Yes

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**Number of references:** 31

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**Release date:** 03 Apr 2006 (PsycINFO)

**Correction date:** 01 Dec 2008 (PsycINFO)
The FTF (Five to Fifteen): The development of a parent questionnaire for the assessment of ADHD and comorbid conditions.

Author: Kadesjö, Björn; Janols, Lars-Olof; Korkman, Marit; Mickelsson, Katarina; Strand, Gerd; Trillingsgaard, Anegen; Gillberg, Christopher; Department of Child and Adolescent Psychiatry, Göteborg University, Göteborg, Sweden; Department of Neuroscience, Child and Adolescent Psychiatry, Uppsala University, Uppsala, Sweden; Institution of Psychology, Åbo Akademi, University of Turku, Turku, Finland; ADHD-center, Helsingfors, Finland; Nasjonalt Kompetansesenter for AD/HD, Tourettes Syndrom og Narcolepsi, Ullevål Universitetssykehus HF, Oslo, Norway; Department of Psychiatric Hospital for Children and Adolescents, University Hospital of Aarhus, Risskov, Denmark


Abstract (English): This paper describes the development of a new parent questionnaire ("Five to Fifteen", or the FTF) for elicitation of symptoms and problems typical of ADHD and its comorbidities. The FTF comprises 181 statements related to behavioural or developmental problems that can be endorsed as either "does not apply" (0), applies sometimes or to some extent" (1), "definitely applies" (2), plus a number of open-ended questions including some about the child's strengths. The items are arranged into eight different domains (memory, learning, language, executive functions, motor skills, perception, social skills, and emotional/behavioural problems), most of which can be subdivided into subdomains. For each domain, a mean score ranging from 0-2 can be calculated. A representative sample (n = 1350) of the total population of 6-15-year-old children was targeted. Parents of 63 % of these completed a questionnaire and returned it to the researchers. Boys showed significantly more problems than did girls across domains and age. Younger children had more problems than pre-adolescents and adolescents (except in the domains of social skills and emotional/behavioural problems). Executive dysfunction was common, and 5.3 % of all children in the population had clear problems suggesting a diagnosis of ADHD according to parent report. The paper provides means, medians, and 90th and 95th centiles for individual items as well as for the eight domains. The Discussion centres on whether or not the FTF can (or should) be used in school-aged children for the identification of children at risk for ADHD or other early childhood onset neuropsychiatric disorder. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Behavioural problems and psychiatric symptoms in 5-13 year-old Swedish children - A comparison of parent ratings on the FTF (Five to Fifteen) with the ratings on CBCL (Child Behavior Checklist).

Author: Bohlin, G.; ¹ Janols, L.-O.; ² ¹ Department of Psychology, Uppsala University, Uppsala, Sweden Gunilla.Bohlin@psyk.uu.se; ² Department of Neuroscience, Child and Adolescent Psychiatry, Uppsala University, Uppsala, Sweden larsolof.janols@bupinst.uu.se


Abstract (English): As part of the validation procedure of a new parent questionnaire ("Five to Fifteen" or the FTF) a random sample of 1500 children aged 5-13 years from the Swedish Population Register (SPAR) was approached. The FTF and the Child Behavior Checklist (CBCL) were sent to the parents of the children together
with questions about background conditions. After two reminders the response rate was 55.6 %. The final
sample had a mean age of 9.12 years (SD = 1.89) and a sex distribution with 55 % boys and 45 % girls.
Analysis of attrition did not support overrepresentation of foreigners/ immigrants in the attrition population. FTF
like CBCL showed sensitivity to sociodemographic variables. On the FTF fewer problems were indicated for
girls in all domain scales, whereas this was true for the summary scale Externalising and Mixed problems of the
CBCL. The effects of age and area of residence were slight, but parental education was negatively related to all
domain scales of the FTF and to all the CBCL scales. The intercorrelations of the FTF and CBCL scales with
common content showed substantial overlap supporting the validity of the FTF scales. The correlation between
scales within the FTF however also indicates a substantial comorbidity. This is also supported by the substantial
correlation between problem score of the FTF domains perception, language, motor skills and the CBCL scale
scores Attention, Social problems as well as the summary scale Mixed problems. These findings indicate that
problems with inattention and social relations are shared across the various problem domains. Factor analysis
of the FTF subdomain scores resulted in two factors, one representing learning problems and the other
behavioural/emotional problems. Despite the low response rate the representativity of the sample was
supported by the fact that the total problem score of CBCL was very similar to that of another Swedish sample
with a relatively high response rate. The finding of a frequency of AD/HD symptoms in the FTF rating
corresponding to the figures of prevalence of AD/HD in several international epidemiological studies could also
be seen as support for the relevance of the findings. Thus, the results give support to the usefulness of the FTF
questionnaire as an instrument that can help in delineating specific problem areas within the field of child
neuropsychiatry. Through the comparison with the CBCL the validity of the FTF for the parts that the two
instruments share could be ascertained and the value of tapping a broader problem area could be elucidated.
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Subject: Behavior Problems (major); Child Behavior Checklist (major); Psychiatric Symptoms (major);
Questionnaires (major); Test Validity (major); Parents; Psychometrics

Classification: 2222: Developmental Scales & Schedules; 2840: Psychosocial & Personality Development

Age: Childhood (birth-12 yrs), Preschool Age (2-5 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female

Location: Sweden

Identifier (keyword): behavioral problems, psychiatric symptoms, Five to Fifteen Parent Questionnaire, Child
Behavior Checklist, test validity

Test and measure: Five to Fifteen parent questionnaire, Child Behavior Checklist

Methodology: Empirical Study, Quantitative Study

Author e-mail address: Gunilla.Bohlin@psyk.uu.se, larsolof.janols@bupinst.uu.se

Contact individual: Bohlin, G., Department of Psychology, Uppsala University, Uppsala, 75142, Sweden.;
Gunilla.Bohlin@psyk.uu.se

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The occurrence of inattention, hyperactivity, impulsivity and coexisting symptoms in a population study of 471 6-8-year old children based on the FTF (Five to Fifteen) questionnaire.

Author: Airaksinen, Eila M.; 1 Michelsson, Katarina; 2 Jokela, Veikko; 3 1 Department of Paediatrics, University of Kuopio, Kuopio, Finland Eila.Airaksinen@uku.fi; 2 ADHD-center, Helsinki, Finland; 3 Information Technology Center, University of Kuopio, Kuopio, Finland


Abstract (English): Objective: To study the usefulness of a new parent questionnaire and to evaluate the prevalence of inattention, hyperactivity, impulsivity and co-existing problems in a group of 6-8-year-old children. Method: A questionnaire comprising 179 three-score-items including the DSM-IV diagnostic symptom criteria on AD/HD and questions on motor function, executive functions, perception, memory, language and speech, learning, social skills and psychiatric problems was used (5-15 questionnaire, FTF). The answers given by parents of 6-8-year-old children in a community in Finland are presented. Results: The answers for 471 children, 230 boys and 241 girls, revealed a significantly higher rate of problems for boys than for girls in all developmental domains. The number of children with scores exceeding the mean + 2 SD for inattention and/or hyperactivity-impulsivity subdomains were 42. About an half of these children had many coexisting problems, when the 90th percentile score for each domain was used as a measurement. Of the 42 children 11 fulfilled the DSM-IV symptom list criteria (6/9 for inattention and/or hyperactivity-impulsivity) for AD/HD and 9 children for subthreshold (5/9) AD/HD. Conclusion: A community- based study revealed that 2.3 % of 6-8-year-old children had the full symptom list criteria (6/9) of AD/HD according to DSM-IV, and another 1.9% fulfilled the symptom criteria (5/9) for subthreshold AD/HD. Coexisting problems were common. The severity of symptoms of inattentiveness and hyperactivity-impulsivity correlated significantly with the severity of coexisting problems. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)
Screening of developmental disorders in five-year-olds using the FTF (Five to Fifteen) questionnaire: A validation study.

Author: Korkman, Marit; Jaakkola, Marjatta; Ahlooth, Anne; Pesonen, Aino-Eliina; Turunen, Merja-Maaria; Institution of Psychology, Abo Akademi University, Turku, Finland; Helsinki University Central Hospital, Jorvi Hospital, Espoo, Finland; Myymälä Health Center, Vantaa, Finland; Rehabilitation Center Larmis, Helsinki, Finland; City of Helsinki Health Department, Child Psychiatric Evaluation Unit, Helsinki, Finland


Abstract (English): The study examined the validity of the Five to Fifteen (FTF) questionnaire in detecting developmental disorders in five-year-old children. A pilot study (N = 70) was first undertaken to try out a translation of the FTF into Finnish. Subsequently, FTF questionnaires were mailed to parents of all five-year-old children from specified health-care districts in Vantaa, Finland. A total of 769 questionnaires (60 %) were completed and returned. Children scoring above a cut-off value in any domain were considered at risk for having developmental disorders (the Risk Group; N = 90). A Control Group was formed by randomly selecting 30 children who did not score above the threshold value in any domain. The children from the Risk Group and the Control Group were called to individual neuropsychological assessments. All invited children attended the assessments. The parts of the FTF that assess fine motor skills, executive functions (including attention and impulsivity), perception, memory, and language were used for this study. The external criterion measure was the NEPSY, a neuropsychological assessment instrument. Results demonstrated that the five FTF Domain Scores used in this study correlated significantly with the corresponding NEPSY Domain Scores. Second, the Risk Group obtained significantly poorer scores on the NEPSY than the Control Group. Third, on a cross-tabulation a very high rate of positive hits (93%) was obtained as well as a very low rate of misses (7%), indicating a very good sensitivity. However, there were a large percentage of false positives (63%), indicating that specificity was not so good. Evidently, parents may report concerns related to the young child’s development even when neuropsychological assessments do not indicate significant disorders. On the whole, the findings supported the validity of the FTP as a developmental screening instrument. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

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Subject: Childhood Development (major); Developmental Disabilities (major); Questionnaires (major); Symptoms (major); Test Validity (major); Parents; Psychometrics

Classification: 2224: Clinical Psychological Testing; 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), Preschool Age (2-5 yrs)

Population: Human, Male, Female

Location: Finland

Identifier (keyword): developmental disorders, Five to Fifteen questionnaire, test validity, parents

Test and measure: Five to Fifteen questionnaire

Methodology: Empirical Study, Quantitative Study

Contact individual: Korkman, Marit, Institution of Psychology, Abo Akademi University, Turku, 20500, Finland

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Developmental profiles on the basis of the FTF (Five to Fifteen) questionnaire: Clinical validity and utility of the FTF in a child psychiatric sample.

**Author:** Trillingsgaard, Anegen; ¹; Damm, Dorte; ¹; Sommer, Søren; ²; Jepsen, Jens Richardt M.; ³; Østergaard, Ole; ⁴; Frydenberg, Morten; ⁵; Thomsen, Per Hove; ¹; ¹ Department of Psychiatric Hospital for Children and Adolescents, University Hospital of Aarhus, Risskov, Denmark; ² Department of Psychiatric Hospital for Children and Adolescents in the County of Ribe, Esbjerg, Denmark; ³ Department of Child and Adolescent Psychiatry, Copenhagen University Hospital Bispebjerg, Copenhagen, Denmark; ⁴ Institute of Psychology, Aarhus University, Risskov, Denmark; ⁵ Department of Biostatistics, Aarhus University, Aarhus, Denmark


**Abstract (English):** The Five to Fifteen parent questionnaire (FTF) was developed to offer a neuropsychological dimension to the assessment of children with Attention Deficit/Hyperactivity Disorder and other child psychiatric disorders. The domains included in the FTF were motor skills, executive functions, perception, memory, language, social skills and learning, in addition to a domain for emotional and behavioural problems. The aim of the present study was to test the clinical validity and utility of the FTF with a main focus on discriminant and criterion validity. The clinical sample consisted of 155 clinically diagnosed children (ICD-10 criteria), 102 were tested with WISC-III. The parents rated their children independent of the diagnostic evaluation. The results were presented as profiles. These clinical profiles were compared to those of a Swedish norm sample consisting of
854 children from the age of five to fifteen. Results demonstrated that the profiles for the clinical groups were similar in forms and levels to those of the upper 10 percent of the norm sample (those with most difficulties). Five out of eight FTF domains discriminated significantly between diagnostic groups in the clinical sample. Influence of IQ, gender and age on the results were low. Three out of four relevant FTF domains correlated significantly with corresponding WISC-III indexes/ measures. The clinical utility of individual children's profiles were demonstrated. On the whole, the findings supported the clinical validity and utility of the FTF. (PsycINFO Database Record (c) 2012 APA, all rights reserved)(journal abstract)

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Subject: Attention Deficit Disorder with Hyperactivity (major); Mental Disorders (major); Psychiatric Symptoms (major); Questionnaires (major); Test Validity (major); Parents

Classification: 2224: Clinical Psychological Testing; 3250: Developmental Disorders & Autism

Age: Childhood (birth-12 yrs), Preschool Age (2-5 yrs), School Age (6-12 yrs), Adolescence (13-17 yrs)

Population: Human, Male, Female

Location: Denmark, Sweden

Identifier (keyword): Five to Fifteen questionnaire, clinical validity, Attention Deficit Hyperactivity Disorder, child psychiatric disorders, clinical utility

Test and measure: Five to Fifteen parent questionnaire, Wechsler Intelligence Scale for Children, Third Edition

Methodology: Empirical Study, Quantitative Study

Contact individual: Trillingsgaard, Anegen, Psychiatric Hospital for Children and Adolescents, University Hospital of Aarhus, Harald Selmervej 66, Risskov, 8240, Denmark

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