



Methylphenidate use and divorce

The findings in a *CMAJ* research article by Lisa Strohschein on methylphenidate use among Canadian children are likely to be misinterpreted because of the methodology used and the author's interpretation of the data.¹ Strohschein used survey data indicating whether divorce occurred in participating Canadian households at any point from 1994 to 2000 to categorize families as those in which the parents remained married and those in which the parents divorced; similarly, methylphenidate use was considered to have been present if a parent reported that their child used the drug at any point from 1994 to 2000.¹ Rather than assessing the prevalence of methylphenidate use among Canadian children following parental divorce, as suggested by the article's title, it appears that the analysis simply uncovers unusually high rates of methylphenidate use before, during or after divorce, a finding that is not that surprising given evidence for a genetic basis for attention-deficit hyperactivity disorder² and clear associations between this disorder and parental strain.^{3,4}

Further confusion is created by the use of the word "subsequent[ly]" several times in the article. For example, the author claims in the interpretation section that "... divorce itself is a predictor of subsequent methylphenidate use"; however, the predictor (divorce) and outcome (methylphenidate use) variables did not necessarily occur se-

quentially. Although the author takes great care to offer alternative explanations for her findings, one can easily imagine how this article could be widely misinterpreted.

In short, this article seems to presume a sequence of events that the analysis does not support. To avoid misinterpretation, readers should be strongly discouraged from assuming that divorce precedes or causes increased methylphenidate use, on the basis of these data alone.

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[The author responds:]

In my study, I did distinguish between children whose parents were divorced and those whose parents remained married by assessing whether a divorce occurred at any point between 1994 and 2000, and I defined methylphenidate use as any methylphenidate use after the initial interview in my sample of children (who were aged 2-7 years, living in a household with their 2 biological parents and not using methylphenidate at the time of the initial interview).¹ In the majority of cases, there was a clear pattern of methylphenidate use after the divorce occurred. However, because interviews

for the National Longitudinal Survey of Children and Youth are conducted every 2 years, there are several instances in which divorce and the first instance of methylphenidate use occurred in the interval between observations, making it impossible to say which came first.

Having said that, divorce is a process and child mental health problems may surface in response to the heightened tensions and emotional disengagement that characterize disintegrating marital relationships that end in divorce. We need to study family dynamics as they unfold over time rather than a child's social address (household with married parents versus single-parent household) at a given point in time. My article shows that it is not simply residing in a single-parent household but, rather, experiencing the divorce of one's parents that predicts methylphenidate use. Determining why this association exists is an important area for future research.

An unanswered question is whether having children with attention-deficit hyperactivity disorder causes parents to divorce. Although I originally excluded children who were taking methylphenidate in 1994, I conducted subsequent analyses to evaluate whether these children were at greater risk for having their parents divorce. The results indicate they were not, a finding that corresponds with previous research.^{2,3}

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