INTEGRATIVE REVIEW ARTICLE

USE OF IMETHYLPHENIDATE N MEDICALIZATION OF CHILDHOOD EDUCATION:
INTEGRATIVE REVIEW

ABSTRACT
Objective: to analyze the scientific productions that deal on the use of methylphenidate in the medicalization of childhood education, linking them with ethical, bioethical and legal aspects. Method: this is an integrative review carried out in the databases Lilacs, Medline, Index Psicologia, virtual library SciELO and the search tool Google Scholar. The search resulted in the meeting of forty-nine studies, after applying the selection criteria, the sample consisted of eight articles. Results: it was found that although there aren’t any studies directly related to the use of methylphenidate with bioethics, several of these ones raised considerations that this practice can pose harm to children's development and breach of legal principles. Conclusion: the criteria used in the prescription of methylphenidate for children should be more stringent because, by subjecting them to drug effects, health professionals, family members and educators may be violating ethical, bioethical and legal principles.

Descriptors: Methylphenidate; Medicalization; Childhood Education; Bioethics.

RESUMO
Objetivo: analisar o que versam as produções científicas sobre o uso do Metilfenidato na medicalização da educação infantil, vinculando-as com aspectos éticos, bioéticos e legais. Método: revisão integrativa realizada nas bases de dados Lilacs, Medline, Índice Psicologia, biblioteca virtual SciELO e pela ferramenta de pesquisa Google Acadêmico. A busca resultou no encontro de quarenta e nove estudos, após aplicação dos critérios de seleção, a amostra compôs-se de oito artigos. Resultados: verificou-se que apesar de nenhum estudo relacionar diretamente o uso do Metilfenidato com a bioética, vários destes, suscitaram considerações de que essa prática pode representar malefício ao desenvolvimento infantil e transgressão a princípios legais. Conclusão: os critérios utilizados na prescrição do Metilfenidato para crianças devem ser mais rigorosos, pois, ao submetê-las aos efeitos do fármaco, profissionais da saúde, familiares e educadores, poderão estar violando princípios éticos, bioéticos e legais.

Descritores: Metilfenidato; Medicalização; Educação Infantil; Bioética.

Nurse, Master student, Post-graduate Program in Nursing and Health, Universidade Estadual do Sudoeste da Bahia/PPENFS/UESB. Jequié (BA), Brazil. E-mail: barbara_ribeiro2@hotmail.com; 2Physiotherapist, Master student, Graduate Program in Nursing and Health, Universidade Estadual do Sudoeste da Bahia/PPENFS/UESB. Jequié (BA), Brazil. E-mail: popoleite@hotmail.com; 3Nurses, Professor, Ph.D. in Nursing, Graduate Program in Nursing and Health, Universidade Estadual do Sudoeste da Bahia/PPENFS/UESB. Jequié (BA), Brazil. E-mail: edriflpoao@gmail.com; 4Dental Surgeon, Doctor Professor in Preventive and Social Dentistry, Graduate Program in Nursing and Health, Universidade Estadual do Sudoeste da Bahia/PPENFS/UESB. Jequié (BA), Brazil. E-mail: syarid@hotmail.com
INTRODUCTION

There has been a worldwide phenomenon of expanding the use of psychotropic drugs, in a little known way, but increasingly alarming, through the medicalization of life, which consists of a practice of turning issues of social and political origin in medical issues, especially in mental diseases, disorders and syndromes.  

Thus, in the medicalization of life, medical science discusses the health-disease process focused on the individual, emphasizing the biological approach, medical and curative that is, it intends to find in the medical field causes and solutions to problems arising from social and political problems. In the pediatric approach, medicalization encourages the omission on the part of medical institutions, school and family of the emotional and psychological nature of the child's problems, without having investigated the real reason of problem.

In the context of children medicalization, the methylphenidate (methylphenidate hydrochloride) is emerging as one of psychotropic drugs most commonly used in child psychiatry for the treatment of Attention Deficit and Hyperactivity Disorder (ADHD), as well as for other childhood behaviors unwanted by society. Many questions have been raised about this phenomenon and various discussions rose in order to determine the risks and benefits of this practice to the health of child.

The methylphenidate corresponds to an enclosed drug on the list of psychotropic substances (A3 list) in Ordinance No. 344 of 12 May, 1998, the Secretary of Health Surveillance, Ministry of Health, in which the sale is subject to prescription control with retention of revenue notice a risk of abuse and dependence (BRASIL, 1998).

Between 2002 and 2006, the Brazilian production of this drug increased from 40 kg to 226 kg. In 2011, the total expenditure estimated for Brazilian families with the acquisition of Methylphenidate was approximately R$ 28.5 million, generating a value of R$ 778,75 per 1,000 children aged between 6 and 16, which put the country in the second world leader condition in prescription and consumption of this drug.

The increase in methylphenidate consumption can be explained both by the growth in the number of prescriptions indicated for ADHD, and the use not prescribed for individuals with cognitive enhancement purposes or recreation provided by its stimulating effects. The diagnostic criteria that always tend to broaden the group of people who entered in the diagnosis of ADHD consequently increase the potential users of stimulants. Moreover, the pressure on the performance of children would have increased disproportionately to social support given to them. Increasingly, society has interpreted problems of school performance as diseases.

Given the above, this study aims to analyze the scientific productions that deal on the use of methylphenidate in the medicalization of childhood education, linking them with ethical, bioethical and legal aspects.

The relevance of the study is to present a synthesis of the knowledge produced in Brazil about the use of methylphenidate for the medicalization of childhood education, promoting updates of health professionals, the academic community and grants for further research in this area. Furthermore, the study proposes a reflection that can raise the development of new mechanisms to control the indiscriminate use of this drug in children, as well as the use of more stringent criteria for the diagnosis of ADHD, largely responsible for the increase in consumption of this drug.

METHOD

This is an integrative review that followed the identification of stages of the problem and definition of the research question; definition of inclusion and exclusion criteria of the articles; selection of databases and search of scientific production; choice of articles and analysis of included studies; development of discussion and review of the synthesis.

In order to start the integrative review it was established as problematic the medicalization of childhood education with methylphenidate and the following guiding question: What does the scientific production say on the use of methylphenidate in the medicalization of childhood education, linking them with ethical, bioethical and legal aspects?

The following inclusion criteria were: complete articles published in Portuguese, available on the bases chosen for free, that addressed “the use of methylphenidate in children's education.” It was adopted as exclusion criteria approaches on the use of methylphenidate in different age groups of children, scientific research involving the use of this drug in animals as well as dissertations and monographs.

In addition to the criteria mentioned, the time frame was delimited from November...
For sample analysis, the following steps were followed: analytical reading, critical and detailed texts, extracting their results more relevant to characterize the scientific production related to the theme, carefully to check whether publications were repeated between the different databases. It was subsequently prepared a summary table (Figure 1) which included the following: title of the article; year of publication; name of the authors; Periodical publication; studied interventions; results; conclusions; and level of evidence.

The analysis corpus was defined from the comparison and grouping the articles according to the similarity of content and categorization of data. The division of results by themes and related content, completed with the integration of other studies approach to methylphenidate, legal and bioethical foundation, made possible the development of discussion grounded on units of meaning highlighted in the articles, which led the three following categories: “the medicalization with methylphenidate as a risk to children’s integrity”; "The Methylphenidate in the medicalization of childhood education from the perspective of bioethical principialist “ and; “Arguments in favor of the use of methylphenidate in children’s education.”

RESULTS

Eight articles were analyzed in this integrative review (Figure 1) that met the inclusion and exclusion criteria previously established. Regarding the year of publication it was identified that in the years 2012 and 2015 there are two articles published, as in the years 2009, 2010, 2013 and 2014 respectively, there’s an article published. These data indicate the low production on the subject in the period analyzed, and configure the absence of publications in the years 2005-2008 and 2011, which were also part of the time frame.

As for the aspects relating to databases, an equivalence publications can be seen in almost all associated descriptors, with the exception of associations involving the DECS “methylphenidate” AND “bioethics”; “Medicalization” AND “bioethics”, because they did not present any publication. Thus, there is a need for research involving ethical issues regarding the use of methylphenidate for treatment of unwanted behaviors in childhood, as well as its impact on the health of the child.

The results also revealed that, in relation to authorship, most, five articles of the
review, with the participation of psychologists, concomitantly, also occurred, although to a lesser extent, production by other professionals such as dentist, pharmacist, medical and pedagogue. Regarding the level of evidence these studies were descriptive or qualitative study and in the type systematic review of descriptive and qualitative studies.

The main results are shown in the block diagram (Figure 1), which summarizes the articles included in this integrative review. It was found that although there aren’t any studies directly related to the use of methylphenidate bioethics, several studies raised considerations that this practice can pose harm to child development, which is an offense to bioethical principles.

<table>
<thead>
<tr>
<th>Title of article/ Journal</th>
<th>Authors/ Year</th>
<th>Interventions studied</th>
<th>Results</th>
<th>Conclusion</th>
<th>Level of evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention deficit and hyperactivity Disorder in school: psycho-pedagogic mediation / Journal of Psycho-pedagogy.</td>
<td>Fonseca MFB, Muszkat M, Rizuzzi S. 2012.11</td>
<td>It reports the case of a child diagnosed with ADHD, subjected to intervention with methylphenidate, psychological therapy and psychoeducational orientation.</td>
<td>There was a positive change in children's behavior, both in school and domestic environment.</td>
<td>The results show that the short-term treatment with methylphenidate brought the child improvements in social life contributing to learning.</td>
<td>6</td>
</tr>
<tr>
<td>Monitoring of patients with Attention deficit and hyperactivity disorder (ADHD) in drug treatment / Archive of Health Sciences UNIPAR.</td>
<td>Sabec DK, Pereira, KF, Campesatto EAM. 2009.12</td>
<td>It analyzes records of children with ADHD to disclosing the main criteria for the diagnosis and therapeutic strategies.</td>
<td>There was use of methylphenidate in 88% of prescriptions, with a positive response in the majority (93%) of children.</td>
<td>The correct diagnosis of ADHD, avoiding many flexible criteria, is critical to the use of appropriate therapy.</td>
<td>6</td>
</tr>
<tr>
<td>The drug of obedience: medicalization, childhood and bio-power. Notes on clinical and policy / Psychology, Science and profession.</td>
<td>Decotelli KM, Bohrer LCT, Bicalho PPG. 2013.13</td>
<td>Reflection study of the medicalization of life with methylphenidate use.</td>
<td>The medicalization during childhood became a biopolitics strategy, which is a power that establishes a policy of attention, learning and ideal behavior.</td>
<td>When the medication should be an exception it is prescribed by default, increasing the epidemic rates of ADHD.</td>
<td>6</td>
</tr>
<tr>
<td>The explosion in the consumption of Ritalin / Journal of Psychology - UNESP.</td>
<td>Santos KYP, Silva ACP, Luzio CA, Yasui S, Dionisio GH. 2012.1</td>
<td>A reflection study of the increase in methylphenidate consumption in recent years, seeking to problematize the indiscriminate way to diagnose and treat ADHD, particularly among children.</td>
<td>- The diagnosis of ADHD is based solely on the medical and curative vision. - The excesses of hyperkinetic society resonate in childhood advancing characteristics of adulthood. But ADHD “pathologizes” and “stigmatize” childhood characteristics that in our culture are valued in the “adult” world.</td>
<td>It is proposed that the pillars that sustain the banal use of methylphenidate are rethought and considering the social, subjectivities and individuals in health practices geared children.</td>
<td>6</td>
</tr>
<tr>
<td>Productivity requirements in school and at work and the consumption of methylphenidate / Education and society.</td>
<td>Carvalho TRF, Brant LC, Melo MBM. 2014.14</td>
<td>Theoretical essay that discusses the use of methylphenidate in our contemporary society.</td>
<td>The increasing consumption of methylphenidate in childhood configures the ADHD as one of the most prevalent and controversial chronic conditions in the pediatric</td>
<td>In a culture marked by immediacy, suffering and failure at work or school are seen as signs of disease, disorder or deficit.</td>
<td>6</td>
</tr>
</tbody>
</table>
The banal prescription of psychotropic drugs in childhood / Journal of Psychology - UNESP.

Ferraza DA, Rocha LC, Rogone HMM. 2010.15 By studying the case of a child, it reflects on the long-term use of some psychoactive drugs, including methylphenidate.


Martins FAG, Ladislau AJ, Vilechez MK, Fiamoncini GM, Ferreira MAN, Karpinski DM et al 2015.16 It analyzes the Brazilian scientific literature on the effects of the use of methylphenidate in children diagnosed with ADHD.

Teachers’ conceptions about the medicализation in the school context / Ensino em revista.

Legnani VN, Pereira JBGR. 2015.17 From interviews with teachers of basic education, a reflection on the diagnostic construction and medicalization of ADHD in children.

Teachers’ conceptions about the medicализation in the school context / Ensino em revista.

Legnani VN, Pereira JBGR. 2015.17 From interviews with teachers of basic education, a reflection on the diagnostic construction and medicalization of ADHD in children.

The processes of medicalization and medicalization in children results in the exposure of patients to severe side effects, and do not suppress the real malaise.

The studies produced in Brazil on the effects of methylphenidate use require a better methodological quality and also address the anti-dependency effect.

New research should be conducted on the effects of the drug on children learning process for their effects in the fields of language, thought and memory.

The diagnostic and statistical manual of mental disorders (DSM-IV), manual used for the classification of mental disorders, use as criteria for diagnosing ADHD analysis of the frequency, intensity, amplitude and duration (at least six months) of the triad symptomatic “inattention-hyperactivity-impulsivity” with occurrence of significant losses in the development of the individual, and may or may not have aid of neurological exams.12

For DSM-V inattention is the subject of frequent changes, lack of attention to other people’s speech, distraction during conversations, inattention or failure to comply with rules in play activities, constantly switching tasks and reluctance in engaging complex tasks that require organization.16

In relation to hyperactivity, the DSM-V considers speech, daytime movement and night (during sleep) excessively, and the difficulty of sitting. Impulsivity involves acting without thinking, change activities, difficulty in organizing work, the need for supervision and subject’s difficulty in waiting turn to play activities or situations in group.16

By analyzing the diagnostic criteria adopted by the DSM-V, it can be seen that ADHD put the symptoms of such a generic way that easily fits any child in it. Once
internalized this idea, the treatment is likely to be, for all the reasons already mentioned, the drug, with the supposedly unquestionable prescription Methylphenidate, stimulating more consumed in the world. To remedy the “concerns”, there is the risk of camouflage all other issues involved in the child's integrity that may be causing the considered “abnormal” or “pathological behavior.”

In current care in mental health of children, the determination of diagnoses related those behaviors considered undesirable, sometimes related to school problems, sometimes the family relationship difficulties of such a “problem child” was restricted to ADHD that substantially is a psychopathology more certain to children and adolescents in the present.\textsuperscript{15}

In Brazil, the Unified Health System (SUS), while legal and law enforcement to promote public health, determines the completeness and doctrinal principle for health promotion, recognizing that man is an integral being, biopsychosocial, and should be assisted in this perspective for a health system also integral, aimed at promoting, protecting and recovering their health;\textsuperscript{19} there is also the Law No. 8069 of July 13, 1990, which deals with the Child and Adolescent (ECA). With respect to completeness, the ECA recommends that must be guaranteed to children the fundamental rights inherent in the human person, without prejudice to the “full protection”, ensuring them by law or by other means, all the opportunities and facilities, in order to provide them with physical, mental, moral, spiritual and social development in conditions of freedom and dignity (art. 3).\textsuperscript{20}

The logic of comprehensiveness, considering the vulnerability of the children's group, children are framed in Art. 8 of the Universal Declaration on Bioethics and Human Rights 2005, where it is described that human vulnerability should be taken into account in applying and advancing scientific knowledge, medical practice and associated technologies. Individuals and specific vulnerable groups should be protected and the personal integrity respected.\textsuperscript{9}

Faced with the legal provisions cited, the health professionals who work in pediatrics, whether in the public or private health, should refer to an analysis of vulnerabilities, biopsychosocial development, as well as the multiple aspects related to completeness of a child in contemporary society, not only pay attention to the organic disease itself,\textsuperscript{15} but in many cases of children subjected to the use of methylphenidate, are not observed by these professionals, and even by family members or educators, the context in which the child is subjected and its implications in the production of what is perceived as “pathological.”

The diagnosis of ADHD permeates a more complex question, because it is necessary to be careful with the real demands of family and school, which have a huge influence on how the child grows. The environment where the child lives influences directly the child medicalization process, so it is essential to involve the whole family and school institution in methylphenidate approach of medicalized child.\textsuperscript{21-2}

\textbf{The Methylphenidate in the medicalization of childhood education from the perspective of principialist bioethics}

Despite Methylphenidate mechanism of action in humans has not been fully elucidated yet, as stated in the own label of the drug, what is known is that the performance matches the agonist effects on alpha and beta adrenergic receptors, blocking the receiving dopamine and norepinephrine in presynaptic neuron and blocks the agonists alpha and beta adrenergic receptors in the post neuron sinaptic.\textsuperscript{7,11}

\textit{The mechanism that exerts its mental and behavioral effects in children is not clearly established, nor is there conclusive evidence showing how these effects relate to the condition of the nervous system central.}\textsuperscript{22-8}

The label of “Ritalin”\textsuperscript{23}, one of the names adopted for the marketing of Methylphenidate in Brazil, reveals a weakness in the knowledge of the mechanism of action in the body, this imprecision show that there is a lack of studies proving the drug action, that is, shows a contradiction in their prescription, despite being largely defended.\textsuperscript{1}

Moreover, the processes of psychopathological and medicalization in children have resulted in the exposure of the public to severe side effects, which often do not solve the real problem facing the child, reaching even difficult clinical access to “real evil.”\textsuperscript{15}

Once submitted to the use of methylphenidate, children are exposed to side effects already observed in the short term, such as insomnia, decreased appetite, anorexia, anxiety, irritability, emotional lability, headache and abdominal pain. Less frequently, it can be observed changes in mood, tics, nightmares, social isolation, and even more rarely psychosis. Some symptoms are also asked whether they constitute in side effects of medication, such as sadness, “strange”, disinterest and anxiety.\textsuperscript{16}
Cardiovascular effects are considered as specific and transient, immediately after use of the drug small rise in blood pressure, heart rate and breathing can be observed, but such changes do not hold up over time, which makes it a still questionable effect. As to long-term side effects, three major are listed: stature reduction, chemical and psychological addiction.\textsuperscript{16}

Studies have called attention to the need for more studies to be developed in Brazil, especially clinical and cohort studies using larger samples, regarding the comprehensive and longitudinal care of children with suspected or proper diagnosis of ADHD in use of methylphenidate, as well as studies including children with different subtypes of this disorder and means to better evaluate school children diagnosed with ADHD.\textsuperscript{16}

Taking into consideration that the methylphenidate consists of a mechanism of action of the drug still questionable and which exposes the patient to various side effects, it is necessary that health professionals, family members and educators engage to the principle of beneficence, and evaluate the usefulness of prescription, weighing benefits versus risks and / or costs for the child.

The charity means “to do good” being associated with professional excellence; in practical application, this means that there should be a moral obligation to act for the benefit of another. This concept, when used in the health care area, which encompasses all the professions of the biomedical sciences, means doing what is best for the patient, not only the technical assistance point of view but also from an ethical point of view. Using all the knowledge and professional skills to patient service, whereas, in decision-making, minimizing the risks and maximizing the benefits of the procedure to do.\textsuperscript{24}

The questionable diagnosis of ADHD is also influenced by economic interests of the pharmaceutical companies that give doctors a number of benefits, such as travel to international conferences, free samples, positions within the laboratories, among others. In addition, physicians receive funding for research to establish the effectiveness of medicalization, whose publication should include the conflict of interest when such economic traversal happens, as recommended by the standards of the National Health Surveillance Agency (ANVISA), which does not always happen.\textsuperscript{1}

Chapter VIII of the Code of Medical Ethics deals with the professional remuneration, which states that it is forbidden to doctor the mercantilist practice of medicine (art.58); the occupation with interaction or dependence pharmacy, pharmaceutical, optical or any organization for the manufacture, handling, promotion or marketing of prescription products, whatever their origin (art.68).\textsuperscript{20}

Once the medical professional lends the assistance in financial interest indiscriminately prescribing methylphenidate to a child, there is an occurrence of breach of ethical principles from the Federal Council of Medicine and the principle of beneficence proposed by principalist Bioethics.

Another problem is the fact that the diagnosis of ADHD, which is knowledge of activity restricted to medicine, is carried out by other health professionals (speech therapists, psychologists, etc.), education professionals and even by family members. The media has made a contribution to this “diagnostic epidemic”, showing the disorder precariously and simplistic, often using inappropriately the definition and the way to make the diagnosis. This condition also contributes to the lay population appropriates these ideas and consider qualified to make a diagnosis without any scientific basis, for those who in his opinion, have pathological behavior.\textsuperscript{7}

Given the above, the understanding of the social context experienced by the children and their physiological characteristics avoids very flexible criteria for the diagnosis of ADHD, and helps in choosing the appropriate therapy and careful drug prescription, not only allowing the reduction of symptoms related to disorder, but also those associated with decreased comorbidities. Thus, it is for health professionals to guide families and educators about the advantages and disadvantages of Methylphenidate use for children's education in order to preserve the health of the child.

\textbullet \textbf{Arguments favorable to the use of methylphenidate in children's education}

Despite criticism and discussions related to the use of methylphenidate in the treatment of children diagnosed with ADHD, the integrative review revealed that there are those who defend their therapeutic possibilities to children by their rapid improvement action in behaviors considered “pathological”.

We can observe a change of attitude towards the child medicalized as bad, lazy, rude, they came to be considered “sick”, no more blame for their behavior. In this reasoning, behavior correction presents a more therapeutic than punitive character,
because the diagnosis generates a type of comprehension.26

For some time, medical treatments for behavior and human suffering came to be seen as normal, and even as examples of progress, technology and innovation. Methylphenidate has become the treatment most recommended by ADHD experts, that they are easily managed on the medical professional and powerful control in their effects, and are generally less expensive than other psychotherapeutic treatments and medical controls.27

In other words, the medical-curative model brings an optimistic view for the disorder, with the promise of a result almost immediately. Some studies support the prescription of this drug, the example of a study that aimed to monitor the treatment of children with the ADHD12 and observed a positive response in 93% of children treated with methylphenidate, and this medication was also associated with other drugs to supplement their therapeutic action. However, it is noteworthy that the authors highlight the need for an accurate diagnosis.

It appears in the literature a case study that describes an improvement at short time in the behavior and impulsivity in a 6 years-old child after use of methylphenidate and suggests the medicalization of learning processes as an aid in classrooms, because it results in a more calm and concentrated children.11 The effectiveness of rapid response to the problem, especially in cases where pharmacological measures are prescribed, is that the practice of referrals is increasingly common among teachers.26

Another argument used by the defenders of psychotropic administration in infancy is that these drugs are considered by many people and health professionals, consumer goods, and may be related to quality of life, well-being and happiness. The medication then emerges as a viable solution, in which parents can control the behavior without hurting, at least legally, the right of children.2

The increase in medical explanations for deviations in behavior is changing the idea of freedom of choice, wishes and personal responsibility for our behavior. That is, if it is considered that the aggressive behavior of a child is caused by a neurological abnormality, so this behavior is seen as if neither the child nor his parents could consciously control it, requiring medical assistance.29

Based on this evidence, it is clear that the critique to the medicalization of life does not deny the advances of biological research and treatment of diseases, but a reflection on the implications that biologization of human being can have for human condition.26

CONCLUSION

From these results, it was found that the objective proposed in this study was contemplated; therefore, we analyzed the scientific literature on the use of methylphenidate in children's education, linking them with ethical, bioethical and legal aspects. Discussions involving this phenomenon are very complex and also involve philosophical, anthropological, social, biomedical aspects that intertwine and are dilemmas impossible to exhaust in a single discussion and in a short time.

Scientific productions show the need for diagnostic criteria that expose children to the use of methylphenidate to be more rigorous, because, by subjecting them to the effects of this drug, the prescriber may actually be contributing to the development of the child, as there are also possibilities to put it against the risk of severe side effects, without proper need. In the latter case, even unnoticed, the medical professional violates the principle of beneficence proposed by principalist bioethics, as well as various other legal provisions discussed throughout this study.

It is therefore, in an ethical minimum, a professional duty which if it is not accomplished puts a medical professional in a malpractice situation or reckless practice of medicine. By contrast, encouraging the prescription of methylphenidate for other professions in biomedicine, it is configured in an inexpert action because they are situations of disability, ignorance, lack of technical, theoretical or practical, or lack of basic knowledge and basic profession to work across the child's needs.

In this context of intertwined relationships, it becomes increasingly necessary to perform researches about the risks and/or benefits of prescription of methylphenidate, as well as evaluated the diagnostic criteria for childhood ADHD.

REFERENCES

Ribeiro BS, Leite PL, Sena ELS et al.

In: Medicação de crianças e adolescentes: conflitos silenciados pela redução de questões sociais a doenças de indivíduos. (Org) Conselho Regional de Psicologia de São Paulo: Casa do Psicólogo; 2010.


Ribeiro BS, Leite PL, Sena ELS et al.

Submission: 2015/11/05
Accepted: 2016/09/21
Publishing: 2016/09/15

Corresponding Address
Bárbara Santos Ribeiro
Universidade Estadual do Sudoeste da Bahia
Programa de Pós graduação em Enfermagem e Saúde
Rua José Moreira Sobrinho, s/n
Bairro Jequezinho
CEP 45206-190 – Jequié (BA), Brazil