Anuario de Psicología Clínica y de la Salud Annuary of Clinical and Health Psychology

Year 2013 • Volume 09 • Pages 49 to 50

DEPARTAMENTO DE PERSONALIDAD, EVALUACIÓN Y TRATAMIENTO PSICOLÓGICOS

Administering the CPT/IVA to evaluate the effects of neurofeedback in ADHD

Inmaculada Moreno García,

Department of Personality and Psychological Evaluation and Treatment. Universidad de Sevilla

Gracia Delgado Pardo,

Research Group SEJ461. Universidad de Sevilla

Mª del Mar Aires González

Department of Personality and Psychological Evaluation and Treatment. Universidad de Sevilla

and Susana Meneres Sancho

Research Group CTS605. Universidad de Sevilla (Spain)

Abstract:

Continuous Performance Tests (CPT) have proven effective for monitoring the effects of treatments for ADHD, especially neurofeedback and virtual reality. The Integrated Visual and Auditory Continuous Performance Test (IVA/CPT), which is based on the DSM-IV diagnostic criteria, allows hyperactive-impulsive symptoms and inattention to be assessed at the visual and auditory level. The goal of this study is to determine whether the IVA/CPT is a useful scale to measure the therapeutic efficacy of neurofeedback. A total of 16 male and female subjects ages 7-14 with a diagnosis of ADHD who had been randomly assigned to neurofeedback treatment participated in the study. Attention and hyperactivity were the variables evaluated in the pre- and post-treatment phases. Through comparisons of means and effect size calculation, the efficacy of neurofeedback was estimated according to the children's performance in the auditory and visual variables of the CPT/IVA. The data obtained reveal significant improvement in self-control and symptoms of inattention following the treatment.

Received: 22/07/2013 Accepted: 22/07/2013

Introduction

Continuous Performance Tests (CPT), currently considered an alternative to paper and pencil tests, allow sustained attention and behavioral inhibition to be measured while allowing for the objective monitoring of therapeutic effects. They have proven effective for monitoring the change associated with treatments administered in ADHD (Madaan et al., 2008; Monastra, 2002; Epstein, 2001), especially neurofeedback (Arns, de Ridder, Strehl, Breteler y Coenen, 2009; Moreno et al., 2011) and virtual reality (Yan et al., 2008).

The Integrated Visual and Auditory Continuous Performance Test (IVA/CPT) (Sandford and Turner, 1995) which is based on the DSM-IV diagnostic criteria, allows hyperactive-impulsive symptoms and inattention to be evaluated at the visual and auditory level. It is administered from the age of 6 through adulthood and it takes 20 minutes. It has been used to evaluate attention and self-control problems (White, Hutchens and Lubar, 2005; Corbett and Constantin, 2006) and as an objective scale for measuring therapeutic effects.

In ADHD treatment, the IVA/CPT has been used to compare the effects of pharmacological therapy with respect to modifications in behavioral patterns (Harding, Judah and

Contact informaction:

Inmaculada Moreno García Dpto. Personalidad, Evaluación y Tratamiento Psicológicos. Universidad de Sevilla. C/ Camilo José Cela, s/n 41018. Sevilla. Spain imgarcia@us.es Gant, 2003) and in relation to neurofeedback (Yan et al., 2008; Moreno et al., 2011), with significant differences detected on the principal scales (inattention and behavior control). Smith and Sams (2005) obtained significant changes in relation to inattentive symptoms in a group of adolescents with disruptive behaviors who were treated with neurofeedback. At the same time, when measuring therapeutic efficacy in a multimodal treatment (neurofeedback and cognitive therapy), Tinius and Tinius (2000) noted significant differences in inattention and behavioral inhibition among adults with ADHD (inattentive subtype) and a control group.

OBJECTIVES

To determine whether the IVA is a useful scale to measure the therapeutic efficacy of neurofeedback, a treatment administered to children diagnosed with ADHD.

Метнор

A total of 16 male and female subjects ages 7-14 with a diagnosis of ADHD who had been randomly assigned to neurofeedback treatment participated in the study. The minors were evaluated using the CPT/IVA.

RESULTS

Attention and hyperactivity are the two variables evaluated in the pre- and post-treatment phases. Through comparisons

of means and effect size calculation, the efficacy of neurofeedback was estimated according to the children's performance in the auditory and visual variables (respectively) of the CPT/IVA. The data obtained in the study reveal significant improvement in self-control (FRCQ t= -2.509; p<0.05) and with respect to symptoms of inattention (VAQ t=-2.910; p<0.05) following the treatment. The results taken from the TE show values of between 1.03 and 0.69 and 0.80 and 0.57 for self-control and symptoms of inattention.

DISCUSSION AND CONCLUSIONS

CPT/IVA was confirmed as a useful scale to measure the therapeutic efficacy of neurofeedback. Medium and high effect sizes reflect the magnitude of the change between pre-treatment and post-treatment measurements.

The changes were observed in terms of both self-control and symptoms of inattention. The therapeutic effects can be seen independently of the type of stimulus presented (auditory or visual), although the data reflect that the change is greater when children are responding to visual stimuli.

REFERENCES

- Arns, M., de Ridder, S., Strehl, U., Breteler, M. y Coenen, A. (2009) Efficacy of neurofeedback treatment in ADHD: the effects on inattention, impulsivity and hyperactivity: a meta-analysis. *Clinical EEG and Neurosciences*, 40(3), 180-189.
- Corbett, B. A. y Constantine, L. J. (2006). Autism and attention deficit hyperactivity disorder: assessing attention and response control with the integrated visual and auditory continuous performance test. *Child Neuropsychology* 12(4–5), 335 348.
- Harding, K., Judah, R. D. y Gant, C. E. (2003). Outcome-based comparison of Ritalin versus Food-supplement treated children with AD/HD. *Alternative Medicine Review*, 8(3), 319 330.

- Madaan, V., Daughton, J., Lubberstedt, B., Mattai, A., Vaughan, B.S. y Kratochvil, C.J. (2008). Assessing the efficacy of treatments for ADHD: Overview of methodological issues. *CNS Drugs*, 22(4), 275-290.
- Moreno, I., Lora, J. A., Aires, M. M. y Meneres, S. (2011). Tratamiento de neurofeedback en el trastorno por déficit de atención e hiperactividad. Efectos registrados a partir de medidas neurológicas. En R. Quevedo-Blasco y V. J. Quevedo-Blasco (Comps.) Situación Actual de la Psicología Clínica. (pp.31-34) Granada: Asociación Española de Psicología Conductual.
- Sandford, J. A., y Turner, A. (1995). *Integrated visual and auditory continuous performance test manual*. Richmond, VA: Brain Train.
- Smith, P. N. y Sams, M. W. (2005). Neurofeedback with Juvenile Offenders: A Pilot Study in the Use of QEEG-Based and Analog-Based Remedial Neurofeedback Training. *Journal of Neurotherapy*,9(3), 87-99.
- Tinius, T. P. y Tinius, K. A. (2000). Changes after EEG biofeedback and cognitive retraining in adults with mild traumatic brain injury and attention deficit hyperactivity disorder. *Journal of neurotherapy*, 4(2), 27 43.
- White, J. N., Hutchens, T. A. y Lubar, J. F. (2005). Quantitative EEG assessment during neuropsychological task performance in adults with attention deficit hyperactivity disorder. *Journal of Adult Development*, 12, 113 121.
- Yan, N., Wang, J., Liu, M., Zong, L., Jiao, Y., Yue, J., Lv, Y., Yang, Q., Lan, H. y Liu, Z. (2008). Designing a Brain-computer Interface Device for Neurofeedback Using Virtual Environments. *Journal of Medical and Biological Engineering*, 28(3), 167-172.

ACKNOWLEDGEMENTS

Project funded by the national R+D+i plan (PSI2008-06008-C02-01) (Spanish Ministry of Science and Innovation).