mehealth™ Launches New Spanish Language Capability for Digital ADHD Tool

mehealth™ has announced the launch of a new Spanish language capability for its mehealth for attention-deficit/hyperactivity disorder (ADHD) product.

The new component of mehealth for ADHD enables Spanish-speaking parents and guardians to complete rating scales about their children’s behaviors in their native language.

Rating scale assessments, together with complementary assessments provided by children’s teachers, translate into faster and more accurate diagnosis and treatment at the point-of-care.

Improved communication between parents and clinicians—unhindered by any language barrier—also streamlines clinicians’ diagnoses and treatment processes and improves patient outcomes.

Although the assessment of ADHD is traditionally a paper-based process, mehealth for ADHD, which implements clinical guidelines from the American Academy of Pediatrics and the Diagnostic and Statistical Manual of Mental Disorders (5th ed.), uses a digital platform to automate the process and make it paperless, subsequently reducing the time it takes to diagnose and treat a patient.

New App Distinguishes Between Real and Fake Tremors

The most commonly used clinical sign of withdrawal is tremor, especially in the hands and arms. Chronic alcohol abusers often go to the emergency department (ED) claiming to be in withdrawal in an effort to obtain benzodiazepine agents (e.g., Lorazepam®), a class of sedatives used to treat alcohol withdrawal, anxiety, seizures, insomnia, and more. To help inexperienced clinicians determine if patients are actually in withdrawal or faking a withdrawal tremor, researchers have developed the first application (i.e., app) that measures tremor strength to provide objective guidance to direct treatment decisions.

The app also shows promise in making solid predictions about whether the tremor is real or fake.

Researchers tested the app on 49 patients experiencing tremors in the ED and 12 nurses trying to mimic the symptom.

The app uses data from an iPod®’s built-in accelerometer to measure the frequency of tremor for both hands for 20 seconds.

Results showed that three quarters of patients with genuine symptoms had tremors with an average peak frequency of more than seven cycles per second. Only 17% of nurses trying to fake a withdrawal tremor were able to produce a tremor with the same characteristics, suggesting that this figure may be a reasonable cutoff for discriminating real tremors from fake ones.

In the ED, clinicians filmed their patients’ hand tremors while using the app and showed the footage to doctors afterward. Researchers found that the app’s ability to assess tremor strength matched that of junior physicians, whereas more senior physicians were able to judge symptoms with better accuracy.