

The present study aims at investigating the predictive values of symptom severity of Attention-deficit/hyperactivity disorder (ADHD), comorbid psychiatric disorders, IQ, age, parenting styles, and associated neurocognitive deficits of ADHD on the treatment response to methylphenidate (MPH) in children with ADHD. One hundred forty nine Han Chinese boys (from age 6 to 12) with ADHD, Combined Type participated in the study. Prior to MPH treatment, predictors were assessed. Treatment outcome was assessed by parents of participants via a composite measure of symptoms of ADHD, both on the rate of improvement of ADHD symptoms post-MPH treatment and the outcome of MPH treatment on ADHD symptoms. Having more severe baseline symptoms of ADHD is found to predict greater rate of improvement of ADHD symptoms post-MPH treatment and poorer outcome of MPH treatment on ADHD symptoms. In addition, poorer mothers' parenting skill of monitoring and supervision predicts better outcome of MPH treatment on ADHD symptoms. This study serves an important clinical guidance for clinicians when predicting treatment response to MPH and designing treatment plan of ADHD.