

The below letter asked the DSM-V committee to:

Find some way to acknowledge that most of the rest of the world thinks there is a link between at least some food additives and ADHD...

The letter was submitted to the DSM-V web page, was mailed to APA and also mailed to all four committee chairs:

Drs. Kupfer, Regier, Shaffer and Castellanos

And the letter ends with suggestion that:

If the APA declines to acknowledge anything about food additives in the DSM-V but the rest of the world turns out to have been correct while the APA was doing that, it could mean legal trouble for the APA. There could be vulnerability here to class action law suits from insurance companies and from aggrieved patients.

To: [dsm5@psych.org](mailto:dsm5@psych.org)

June 15, 2012

Subject: Suggestions for [ADHD in DSM-V](#):

Suggestion 1: Sentence structure would read a little better if the introductory line of the diagnostic definition started with:  
"AD/HD consists of the following pattern of behavior, in multiple settings and giving rise to social, educational or work performance difficulties:"

Suggestion 2: The definitive list could be a little more definitive if it included some of these symptoms:  
expelled from play school because not potty trained,  
late bed wetting (age 4 to 6+),  
clitoral self-stimulation (publicly noticeable in very young to age of modesty)  
frequent self-destructive accidents (daily or multiple daily things like speed riding bicycle under chinning bar and knocking self on ground when head hits bar),  
persistent immediacy (as demanding and getting attention from adults by pounding head on floor or jumping from excessive height),  
inability to learn from mistakes or punishment,  
fear of exams,  
and for adults,  
insomnia,  
difficult co-workers, and  
turnover of jobs and/or relationships.

**Suggestion 3 (necessary):** Find some way to acknowledge that most of the rest of the world thinks there is a link between at least some food additives and ADHD. A way to do this with minimal change from DSM-IV could be, after qualifier sentence E, to add another qualifier something like:

"F. The symptoms are not mitigated by removal of petroleum-based colorings or preservatives from foods. If they are, the condition is physiologic rather than classic psychiatric AD/HD."

The reason Suggestion 3 is claimed to be "necessary" for the APA has more to do with practicality rather than with truth. The DSM is a successful publication and used widely as a diagnostic bible. If the APA declines to acknowledge anything about food additives in the DSM-V but the rest of the world turns out to have been correct while the APA was doing that, it could mean legal trouble for the APA. There could be vulnerability here to class action law suits from insurance companies and from aggrieved patients.

The common statement "Additives may cause hyperactivity in at most a few percent of very young children," should be avoided. Feingold's 1977 publication reported a placebo-free result of hyperkinesis remission in 10-20% patients due to removal of only BHT and BHA.

Dr. Edward H. Takken, PhD  
address

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Web page [www.dsm5.org](http://www.dsm5.org) claims to take suggestions for DSM-V but does not actually offer a way to do it. So this June 15, 2012, email is being replicated with hard copy postmarked the same date to the APA and committee chairs as follows:  
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