

Effectiveness of Combining Medication and Lifestyle Modification with Iranian Traditional Medicine Measures Compared to Medication Alone on the Sleep Quality of Children with Attention-Deficit Hyperactivity Disorder

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Abstract

We are writing to express our appreciation for the recent article titled "Effectiveness of Combining Medication and Lifestyle Modification with Iranian Traditional Medicine Measures Compared to Medication Alone on the Sleep Quality of Children with Attention-Deficit Hyperactivity Disorder" by Rahimi et al., published in the Journal of Pediatric Perspectives (2025; 13(1):19219-19241). This study addresses a critical and often overlooked aspect of Attention-Deficit Hyperactivity Disorder (ADHD) management -sleep quality in children- and provides valuable insights into the potential benefits of integrating lifestyle modifications with traditional pharmacological treatments. The findings contribute significantly to the growing body of research on holistic approaches to managing ADHD, and we commend the authors for their important work.

Key Words: Lifestyle modification, Sleep quality.

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DEAR EDITOR

We are writing to express our appreciation for the recent article titled "Effectiveness of Combining Medication and Lifestyle Modification with Iranian Traditional Medicine Measures Compared to Medication Alone on the Sleep Quality of Children with Attention-Deficit Hyperactivity Disorder" by Rahimi et al., published in the *Journal of Pediatric Perspectives* (2025; 13(1):19219-19241). This study addresses a critical and often overlooked aspect of Attention-Deficit Hyperactivity Disorder (ADHD) management- sleep quality in children- and provides valuable insights into the potential benefits of integrating lifestyle modifications with traditional pharmacological treatments (1). The findings contribute significantly to the growing body of research on holistic approaches to managing ADHD, and we commend the authors for their important work.

The authors have undertaken a commendable effort to explore the synergistic effects of combining medication with lifestyle changes, particularly those rooted in Iranian traditional medicine, on improving sleep quality in children with ADHD. The mixed-methods approach, incorporating both qualitative and quantitative analyses, adds depth to the study and strengthens its findings (1). The development of a lifestyle modification package grounded in traditional medicine principles is particularly innovative and highlights the importance of culturally relevant interventions in healthcare.

The results of the study are compelling, demonstrating that the combination of medication and lifestyle modifications significantly improves sleep quality compared to medication alone. This finding is crucial, as sleep disturbances are a common comorbidity in children with ADHD and can exacerbate the core

symptoms of the disorder (2). The study's emphasis on non-pharmacological interventions, such as dietary adjustments, physical activity, and sleep hygiene, aligns with the growing demand for holistic and integrative approaches to managing ADHD.

However, we would like to raise a few points for consideration. While the study provides robust evidence for the effectiveness of the combined intervention, it would be beneficial to explore the long-term sustainability of these lifestyle changes. Future research could investigate whether the improvements in sleep quality are maintained over extended periods and whether these changes lead to broader benefits in academic performance, behavioral outcomes, and overall quality of life for children with ADHD.

While the study's contributions are substantial, several methodological aspects warrant discussion. First, reliance on self-reported sleep data introduces potential recall bias. Incorporating objective measures, such as actigraphy or polysomnography, could enhance reliability in future work. Second, the non-blinded design common in lifestyle intervention trials may amplify placebo effects, especially given the cultural resonance of ITM. Clarifying steps taken to mitigate observer bias (e.g., independent assessors) would strengthen transparency. Lastly, while the statistical analysis is robust, reporting effect sizes and controlling for confounders (e.g., socioeconomic status, comorbid conditions) would better contextualize the clinical significance of findings.

Additionally, the study's sample size, while adequate for the initial findings, could be expanded in future research to include a more diverse population. This would help determine whether the observed benefits are generalizable across different cultural and socioeconomic contexts. Furthermore, exploring the

specific mechanisms through which lifestyle modifications exert their effects such as changes in circadian rhythms, neurotransmitter activity, or stress reduction could provide deeper insights into the underlying biological processes (3).

The study's focus on Iranian traditional medicine is a valuable contribution to the field, but it would be interesting to see how these findings compare to other traditional or alternative medicine practices globally. Comparative studies could help identify universal principles of lifestyle modification that are effective across different cultural frameworks (4).

Finally, the study highlights ITM as a key component but could further elucidate its specific practices. For instance:

- Which ITM interventions (e.g., herbal regimens, dietary protocols) were prioritized, and how were they standardized?
- Were potential herb-drug interactions assessed, given the concurrent use of ADHD medications?

Standardization and safety evaluations are critical for reproducibility, particularly given regional variability in traditional practices.

In conclusion, we commend the authors for their rigorous and insightful research. This study not only advances our understanding of ADHD management but also underscores the importance of integrating traditional and modern medical practices to improve patient outcomes. I look forward to seeing further research in this area, particularly conducting trials comparing ITM with other systems (e.g., Ayurveda, Traditional Chinese Medicine) to identify universal principles versus culture-specific effects and develop clear

protocols for integrating ITM into ADHD care, including guidelines for monitoring herb-drug interactions and standardizing practices.

CONFLICT OF INTEREST

The authors declare that they have no competing interests to disclose in relation to this paper.

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AUTHORS CONTRIBUTIONS

All authors contributed to the compilation and editing of this article.

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