



ADHD

Natalie Chaplin

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- ▶ what ADHD is
- ▶ myth busting
- ▶ assessment
- ▶ treatment
 - ▶ living with ADHD



THE SCATTERED BRAIN

STATISTICS AND WHAT THEY SUGGEST

- ▶ 5-10% children in Australia are living with ADHD symptoms- like international prevalence studies
- ▶ 2.5% adults in Australia are living with ADHD symptoms
- ▶ Statistics suggest we are accurately diagnosing children, but are not accurately diagnosing adults
- ▶ ADHD Australia suggests approximately 75% with ADHD remain undiagnosed

- ▶ Neurodevelopmental disorder

- ▶ Genetic susceptibility

- ▶ Inattention

- ▶ Hyperactivity

- ▶ Impulsivity

- ▶ Emotional dysregulation

- ▶ “melt downs”

Excessive
Most of the time
Over a sustained period
School/work/home
Developmentally inappropriate

Impacts:

School/work performance

Relationships

Time management (tasks)

Boys : hyperactive, impulsive

Girls : inattentive, distractible

WHAT IS ADHD?

Adults

Hyperactivity: restlessness, difficulty relaxing, constant mental activity

Impulsivity: thoughtlessness, impatience, excessive spending

- ▶ **School** – not completing schoolwork, distractible or disruptive in class, oppositional behaviour, conflict with peers
- ▶ **Home** – forgetful, no sense of time, never does homework, disorganized, messy room, losing things all the time
- ▶ **Behaviour problems:** risk taking, impulsive
- ▶ **Mood:** depressed, stressed, overwhelmed, irritable, oppositional, 'bored'

Children and Adolescents

<https://www.youtube.com/watch?v=167se17RNHw#ddg-play>

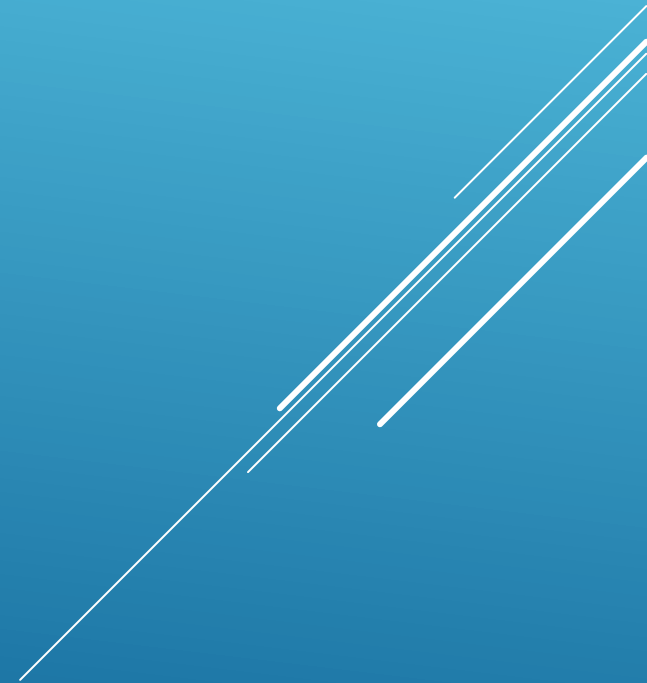
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- ▶ **Mood:** anxiety, depression, stress
- ▶ **Work:** Failing at work, conflict with employers, losing jobs or missing promotions
- ▶ **Relationship** and **marital** problems
- ▶ **Addictive behaviours:** drugs and alcohol, gambling, gaming
- ▶ **Legal problems** from impulsive behaviour
- ▶ **Financial problems:** not paying bills, not doing tax returns

Adults

- ▶ Underactivity of certain parts of the brain especially the 'frontal lobe'
- ▶ Lack of 'executive function' – planning, time management, judgement, setting priorities, self control, delayed gratification, task switching
 - ▶ Classroom and teacher metaphor
 - ▶ CEO metaphor
- ▶ Underactivity of dopamine systems which regulate reward and motivation (so everything is less exciting and interesting)
- ▶ Need higher levels of stimulation for optimal brain functioning (which explains risk taking and addictive behaviours)


THE UNDERLYING ISSUES




OVERLAP WITH OTHER CONDITIONS

- ▶ Autism
 - ▶ Anxiety
 - ▶ Depression
 - ▶ Drug and alcohol problems
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MYTHS

- ▶ It is due to bad parenting
 - ▶ They are deliberately defiant and naughty
 - ▶ They will grow out of it
 - ▶ It is just a modern fad
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- ▶ Treatment
 - ▶ Education about the condition
 - ▶ Support and allowances at school
 - ▶ Psychological support and coaching to manage ADHD challenges (time management, stress management, self esteem)
 - ▶ Medication: Ritalin, concerta, dexamfetamine, Vyvanse
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- ▶ Medication
- ▶ Benefits
 - ▶ Improved executive function, motivation, mental energy, educational function
 - ▶ Improved social functioning
 - ▶ Improved mood
- ▶ Limitations
 - ▶ Medication can make you better at doing things but not always better at choosing what to do
 - ▶ Psychological and behavioural interventions are also important
- ▶ Risks
 - ▶ Loss of appetite, loss of weight, slowed growth (in younger children)
 - ▶ Sleep problems
 - ▶ Heart issues (sometimes)
- ▶ Myths
 - ▶ 'Turns you into a zombie' (but can make the person hyperfocused at higher doses)
 - ▶ More likely to become a drug addict (the opposite is true)



ADHD ASSESSMENT

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Psychiatrists

Psychologists

Pediatricians

WHO CAN DIAGNOSE





- ▶ Identify the presenting symptoms
- ▶ Assess the impact of these symptoms on daily functioning
- ▶ Determine whether ADHD is the underlying cause or if another condition is contributing.
 - ▶ Note: Many symptoms overlap across different disorder

PURPOSE OF ASSESSMENT



Limited availability of trained clinicians in local regions



Fewer services that understand adult presentations of ADHD



High out-of-pocket costs associated with private assessments



Longer waitlists due to fewer providers



Uncertainty about whether assessment is necessary



Confusion about how to start the process or where to go



Stigma in smaller communities around seeking mental health support



Travel distance and lack of transport options to access services

BARRIERS TO ASSESSMENT IN RURAL AREAS

ASSESSMENT OF CHILDREN/ YOUTH

Parent Interview
(approx. 90 mins)

Interview with Child
or Young Person

Review of School
Reports

Review of Relevant
Medical Information

Consultation with
Teacher and Other
Professionals (e.g.
OT, Speech
Pathologist)

Observation in
Classroom

Standardised Testing
and Assessments

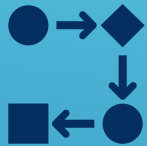
Scoring,
Interpretation and
Report Writing

Feedback Session
with Parents (approx.
60 min)

Finalising and
Sending the Written
Report

ASSESSMENT OF ADULTS

- ▶ Clinical Interview (approx. 90 min)
- ▶ Review of Developmental Documentation
 - ▶ Review of School Records (symptoms need to be seen prior to age 12, retrospective recollection unreliable-confirmation bias)
 - ▶ Review of Medical Records
- ▶ Clinical Interview with Relevant Family (e.g. partner, parent)
- ▶ Standardised Testing and Assessments
- ▶ Scoring, Interpretation and Report Writing
- ▶ Feedback Session (approx. 60 min)
- ▶ Finalising Report and Sending Written Report



The process can be time-consuming and involves multiple appointments



Assessment services can be costly



Requires gathering detailed information from various sources (e.g. schools, medical history, allied health providers etc.)



An assessment may not always result in an ADHD diagnosis

IMPORTANT CONSIDERATIONS FOR ASSESSMENT

TREATMENT

- ▶ Learn about the condition
- ▶ Support and allowances at school
- ▶ Psychological support and coaching to manage ADHD challenges
 - ▶ time management,
 - ▶ stress management,
 - ▶ self esteem
- ▶ Medication: Ritalin, Concerta, dexamphetamine, Vyvanse

MEDICATION

► Benefits

- Improved executive function, motivation, mental energy, educational function
- Improved social functioning
- Improved mood

► Limitations

- Medication can make you better at doing things but not always better at choosing what to do
- Psychological and behavioural interventions are also important

► Risks

- Loss of appetite, loss of weight, slowed growth (in younger children)
- Sleep problems
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► Myths

- 'Turns you into a zombie' (but can make the person hyperfocused at higher doses)
- More likely to become a drug addict (the opposite is true)

REFERENCES

- ▶ <https://adhdguideline.aadpa.com.au/>
- ▶ The World Federation of ADHD Guide
- ▶ Inquiry into assessment and support services for people with ADHD. Suicide Prevention Australia Submission- June 2023
- ▶ Australian Evidence-Based Clinical Guideline for Attention Deficit Hyperactivity Disorder (ADHD) 1st edition 2022