

## 1. What is ADHD?

Attention deficit hyperactivity disorder is a genetically determined condition that affects those parts of the brain that control attention, impulses and concentration. It is thought to affect 3 to 7% of school age children.<sup>1 2</sup> The best description for ADHD is that a child who suffers from this condition shows disruptive behaviours which cannot be explained by any other psychiatric condition and are not in keeping with those of the same-aged people with similar intelligence and development. These behaviours are usually first noticed in early childhood, and they are more extreme than simple “misbehaving”. Children with ADHD have difficulty focussing their attention to complete a specific task. Additionally they can be hyperactive and impulsive and can suffer from mood swings and “social clumsiness”.

## 2. When does ADHD develop?

ADHD develops in childhood and is most commonly noticed at the age of 5.<sup>1</sup> Research suggests that 80% of children diagnosed with ADHD continue to experience symptoms during adolescence and 67% continue to have symptoms into adulthood.<sup>1</sup>

## 3. Does every person with ADHD have the same symptoms?

The symptoms of ADHD (impulsivity, hyperactivity and inattention) are not seen to the same degree in all people diagnosed with this condition. As a result, clinicians recognise three types of people with ADHD<sup>2</sup>: -

The mostly (predominantly) hyperactive-impulsive type

The mostly (predominantly) inattentive type

The combined type (which make up the majority of ADHD cases)

There is also a fourth type, which does not fit into any of the three categories and which healthcare professionals classify as ADHD not otherwise specified.<sup>2</sup>

## 4. What causes ADHD?

ADHD has multiple causes. However the evidence so far shows that it is not caused by poor parenting, rather, it is caused by a complicated combination of factors. These factors include changes in those parts of the brain which control impulses and concentration (neurobiological factors) and genetic, inherited and environmental factors.

## 5. Is ADHD genetic?

ADHD has a significant genetic component: most differences in severity of symptoms are due to genetic factors. For example, if a family has one ADHD child, there is a 30-40% chance that another brother/sister will also have the condition and a 45% chance (or greater) that at least one parent has the condition<sup>1</sup>. If the child with ADHD has an identical twin, the likelihood that the twin will also have the disorder is about 90%.<sup>1</sup>

Other research has suggested that in a small percentage of cases, ADHD can be due to injury (during development) to specific regions of the brain. For example, use of alcohol or tobacco during pregnancy, premature delivery with associated minor brain bleeding or accidental head injury after birth, could all cause ADHD-like symptoms. ADHD is not associated with purely social factors such as poor parenting (child management), family stress, divorce, excessive TV viewing or video game playing, or diet, although some of these factors can exacerbate a pre-existing condition.

## 6. What treatments are typically recommended for ADHD?

There are typically four steps in the management of ADHD: -

- Proper diagnostic evaluation by an experienced psychiatrist or paediatrician
- Information provided for parents and teachers
- Discussions between healthcare professional and parents and teachers on behavioural therapy and educational support (such as special educational services)
- Medication

Most experts agree that the most effective way to treat ADHD is with several complimentary approaches. An effective treatment plan will involve a combination of treatments such as psychiatry, psychology, appropriate educational interventions, behavioural therapy and medication. Depending on the needs of the individual child, a combination of medical, teaching and behavioural support can help the child to reach his/her full potential and

live as normal a life as possible, having meaningful relationships and reducing family stress.

### **7. What shall I do if I think my child or somebody I know has ADHD?**

There is no specific test for ADHD but it is important that a psychiatrist or paediatrician makes a diagnostic evaluation. If you suspect that your child or a child you know has ADHD you may wish to alert their parent or teacher, so that s/he can be referred early and so that the condition can be identified. This will enable treatment (whether behavioural, psychological or medication) to be started, to help the child to achieve their full potential.

### **8. Who can diagnose ADHD?**

ADHD is diagnosed by a healthcare professional, usually a child psychiatrist or paediatrician. However a team of people may be involved in the steps to diagnosis and decisions regarding therapy. These people can include: -


- Child psychiatrist
- Neuropsychologist
- Child psychologist
- Paediatrician
- Paediatric neurologist
- Psychiatric social worker
- Educational psychologist
- Specialists in speech and language, auditory processing, occupational therapy etc
- Teacher
- GP

#### References:

<sup>1</sup> Green C and Chee K. Understanding ADHD – A Parent's Guide to Attention Deficit Hyperactivity Disorder in Children. Vermillion Publishing 1997. ISBN 0 009 181700 5

<sup>2</sup> American Psychiatric Association DSM IV diagnostic criteria

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