

ATTENTION DEFICIT HYPERACTIVITY

(ADHD)

DEFINITION

MOST COMMON
PSYCHIATRIC DISORDER IN
CHILDREN
MOST STUDIED CHILDHOOD
PSYCHIATRIC DISORDER

A NEUROBIOLOGICAL CONDITION
WITH MAINLY BEHAVIORAL
MANIFESTATIONS

HISTORY

“attention deficit” in Shakespeare’s
Henry VIII (1500s)

“The Story of Fidgety Philip” by
Dr. Heinrich Hoffman (1845)

Series of lectures to the Royal
College of Physicians by Sir
George Still (1902)

HISTORY

became known as “minimal
brain dysfunction” (MBD)

“Brain-injured Child Syndrome”
in the United States (1918)

“Hyperactive Child Syndrome” and
“Hyperkinetic reaction of
Childhood” (from 1950s to the
1960s)

HISTORY

DSM-IV: SUBTYPES

ADHD, predominantly Inattentive

ADHD, predominantly
Hyperactive-Impulsive

ADHD, combined type

CORE SYMPTOMS

Children with ADHD

Developmentally inappropriate

Appears in different settings

Affects functioning in at least two areas

CORE SYMPTOMS

INATTENTION

Often becomes easily distracted by irrelevant sights and sounds

Often failing to pay attention to details and making careless mistakes

Rarely follows instructions carefully and completely losing or forgetting things

Often skipping from one uncompleted activity to another

CORE SYMPTOMS

HYPERACTIVE-IMPULSIVE

Feeling restless, often fidgeting with hands or feet; squirmy while seated

Running, climbing or leaving seat when sitting or quiet behavior is expected

Blurting out answers before hearing the whole question

Having difficulty waiting in line or taking turns

DIAGNOSIS

Specialty	Diagnosis	Medication	Counseling/ Therapy
Psychiatrists	+	+	+
Psychologists	+	-	+
Pediatricians or Family physicians	+	+	-
Neurologists	+	+	-

DIAGNOSIS

Possible causes of ADHD-like behaviors



A sudden change in child's life (deaths in the family, parental separation)

Undetected seizures (petit mal or temporal lobe epilepsy)

A middle ear infection causing intermittent hearing loss

DIAGNOSIS

Possible causes of ADHD-like behaviors



Medical disorders that may affect brain functioning

Underachievement caused by learning disability

Anxiety or depression

DIAGNOSIS

Prenatal factors

Neurobiological Basis of ADHD

Environmental Agents

Food Additives and Sugar

Genetics

DIAGNOSIS

Disorders that may accompany ADHD

Learning Disabilities

Tourette Syndrome

Oppositional Defiant Disorder

Conduct Disorder

Anxiety and depression

Bipolar Mood Disorder

TREATMENT

Pharmacological Interventions

Psycho-Stimulants

Methylphenidate

Non-stimulants

Atomoxetine

Pharmacological Interventions

Anti-depressants

Selective Serotonin Reuptake Inhibitors (SSRIs)

Tricyclic antidepressants (TCAs)

α – Adrenergic Agents

Clonidine and Guanfacine

Non-Pharmacological Interventions

Psychotherapy

Behavioral Therapy

Social Skills Training

Support Groups

Parenting Skills Training

Alternative Treatments

Some Simple Behavioral Interventions

Schedule.

Organize needed everyday items.

Use homework and notebook organizers.

Avoid distractions.

Limit choices.

Some Simple Behavioral Interventions

Change interactions with child.

Use goals and rewards.

Discipline effectively.

Help child discover a talent.

ADHD in the classroom

Reduce seating distractions.

Use a homework folder for parent-teacher communications.

Break down assignments.

Give positive reinforcements.

ADHD in the classroom

Teach good study skills.

Supervise.

Be sensitive to self-esteem issues.

Involve the school counselor/psychologist.