

Adult ADHD Overview



Nature, Prevalence and Profile of ADHD in Adults

- ADHD affects 4-5% of US Adults
- ADHD significantly affects quality of life. The most prevalent areas of life affected by ADHD in adults are relationships, followed by psychological health, life productivity and life outlook.
- Effective medication and non-pharmacologic treatment strategies exist for adult ADHD. Pharmacological treatment show a positive impact on outcomes, long-term prognosis, and quality of life. Cognitive Behavioral Therapy is also effective.

Clinical Presentation and Criteria for Diagnosis in Adults

- **Diagnosis of ADHD should be made over the course of multiple visits with multiple sources of information**
- **Use the DSM-5 Classification System for ADHD:** To diagnose ADHD in adults and adolescents age 17 or older, only **5** symptoms are needed instead of the usual 6 needed for younger children. Symptoms might look different in adults, e.g., hyperactivity may appear as extreme restlessness or exhausting others with their activity.

Symptoms of Inattention	Symptoms of Hyperactivity & Impulsivity
Often fails to give close attention to detail or makes mistakes	Often fidgets with or taps hands and feet, or squirms in seat
Often has difficulty sustaining attention in tasks or activities	Often leaves seat in situations when remaining seated is expected
Often does not seem to listen when spoken to directly	Often runs and climbs in situations where it is appropriate (in adolescents or adults, may be limited to feeling restless)
Often does not follow through on instructions and fails to finish schoolwork or workplace duties	Often unable to play or engage in leisure activities quietly
Often has difficulty organizing tasks and activities	Is often 'on the go,' acting as if 'driven by a motor'
Often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort	Often talks excessively
Often loses things necessary for tasks and activities	Often blurts out answers before a question has been completed
Is easily distracted by extraneous stimuli	Often has difficulty waiting their turn
Is often forgetful in daily activities	Often interrupts or intrudes on others

Important Considerations in Diagnostic Evaluation:

- Evidence of a persistent pattern of inattention and/or hyperactivity-impulsivity with several symptoms present prior to age 12 and in two or more settings (e.g. at home, school or work; with friends or relative, in other activities), evidence that the symptoms affect development or function such as reduce the quality of life, social, academic or occupational functioning
- Symptoms do not occur exclusively during the course of schizophrenia or another psychotic disorder, and are not better explained by another mental disorder (e.g. mood disorder, anxiety disorder, dissociative disorder, personality disorder, substance intoxication or withdrawal)

Types of ADHD

- Predominantly Inattentive Presentation
- Predominantly Hyperactive-Impulsive Presentation
- Predominately Combined Presentation
- In addition to the ADHD presentation, DSM-5 further classifies the ADHD severity of the present symptoms as "mild," "moderate," or "severe."

Tools and Resources Useful for Screening and Assessment

- **Interview;** The single most important part of a comprehensive ADHD evaluation is a structured or semi-structured interview, which provides a detailed history of the individual. Assess age of onset of problems, family history of ADHD, maternal history of alcohol and smoking during pregnancy, medical history such as endocrine and metabolic disorders or neurologic disorders
- **Review of symptoms common to adults with ADHD;** such as stress, hot temper, sleep problems, emotional over reactivity (Utah Adult Criteria)
- **Assessment of comorbid conditions;** Depression (PHQ-9), Anxiety (GAD-7), Substance abuse (NIDA Quick Screen), PTSD symptoms (PC-PTSD), Mania/hypomania (HCL-32)
- **Review of functional impairment;** such as family, occupation/school, relationships, money management, leisure and recreational activities, driving problems, daily responsibilities, home/family and STD's and unplanned pregnancies (Barkley and Murphy: Current Symptoms Scale-Self-Report Form and Current Symptoms Scale- Other Report Form). Impairment in at least 2 areas is necessary to meet the full diagnosis.
- **Laboratory;** Urine drug screen, other laboratory testing as appropriate based on medical history

ADHD Diagnostic Codes:

ICD-10-CM codes for ADHD include:

- F90.0, Attention-deficit hyperactivity disorder, predominantly inattentive type
- F90.1, Attention-deficit hyperactivity disorder, predominantly hyperactive type
- F90.2, Attention-deficit hyperactivity disorder, combined type
- F90.8, Attention-deficit hyperactivity disorder, other type
- F90.9, Attention-deficit hyperactivity disorder, unspecified type