



Assessing and Treating Complex ADHD

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Objectives

- 1) Discuss how Attention-Deficit/Hyperactivity Disorder (ADHD) symptoms present differently over a lifespan and overlap with other psychiatric diagnoses
- 2) Discuss ADHD treatment options within this complexity

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Personal and Professional Truth

There is no such thing as “simple” ADHD



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Inherent Complexity in Human Behavior

- Especially in treating children over time
- Inattention and hyperactivity are common behaviors for multiple issues in young children (to be continued in later slide)
- You have probably been operating successfully in complexity already
- Pharmacology is relatively simple when you have figured out what you are dealing with (no magic in meds)



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Early Signs and Symptoms¹

- It's not unusual for children to be energetic, act impulsively, and have trouble focusing from time to time
- For children with ADHD, these behaviors are *persistent* and most common symptoms are hyperactivity, impulsivity, and inattention



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Teenage Signs and Symptoms¹

- Poor time management and organizational skills
- Difficulty prioritizing tasks and completing assignments on time
- Trouble managing emotions and dealing with frustration
- Risky or impulsive behaviors (such as substance use or unprotected sex)



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Adult Signs and Symptoms²

- Always losing important items (such as keys, wallets, and phones)
- Struggling to listen closely, follow instructions, or pay attention to details
- Forgetting appointments, not returning calls, or neglecting to pay bills
- Fidgeting or feeling restless and being unable to sit still for a long time
- Interrupting others or answering someone's question before they've finished asking it



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Other Diagnoses that Resemble ADHD (From DSM)

- Generalized Anxiety Disorder
 - Restlessness, difficulty concentrating or mind going blank
- Major Depressive Disorder
 - Diminished ability to think, concentrate, or make decisions
- Obsessive-Compulsive Disorder
 - Symptoms must consume a significant amount of time
- Bipolar Disorder
 - Increased energy/activity



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CDC Recommendations³

- For young children (<6 yo) with ADHD, behavior therapy is an important first step before trying medication because:
 - Parent training in behavior management has been shown to work as well as medication for ADHD in young children
 - Young children have more side effects from ADHD medications than older children
 - The long-term effects of ADHD medications on young children have not been well-studied.
- For children ≥ 6 yo, the American Academy of Pediatrics recommends combining medication treatment with behavior therapy



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CDC Recommendations³

- Stimulants are the best-known and most widely used ADHD medications. Between 70-80% of children with ADHD have fewer ADHD symptoms when taking these fast-acting medications
- Nonstimulants were approved for the treatment of ADHD in 2003. They do not work as quickly as stimulants, but their effect can last up to 24 hours



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Pharmacotherapy of the Preschool ADHD Treatment Study (PATS) Children Growing Up⁴

206 children with average age of 7.4 yo followed from previous ADHD study 3 years later

- 34.0% were on no pharmacotherapy
- 41.3% were on stimulant monotherapy
- 9.2% on atomoxetine, alone or with a stimulant
- 8.3% on an antipsychotic, usually together with a stimulant
- 7.2% on other pharmacotherapy; overall, 65.0% were on an indicated ADHD medication.



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A 14-Month Randomized Clinical Trial of Treatment Strategies for Attention-Deficit/Hyperactivity Disorder⁵

206 children with average age of 7.4 yo followed from previous ADHD study 3 years later

- 579 children with ADHD Combined Type (7 to 9.9 yo) assigned to 14 months of medication management, intensive behavioral treatment, the two combined, or standard community care
- Medication management was superior to behavioral treatment and to routine community care that included medication. Combined treatment did significantly better than medication management for core ADHD symptoms, but may have provided modest advantages for non-ADHD symptom and positive functioning outcomes.



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References

- 1) <https://magazine.medlineplus.gov/article/adhd-across-the-lifespan-what-it-looks-like-in-children-andteens#:~:text=Navigating%20ADHD%20in%20the%20teenage,ADHD%20in%20children%20and%20teens.>
- 2) <https://magazine.medlineplus.gov/article/adhd-across-the-lifespan-what-it-looks-like-in-adults/>
- 3) https://www.cdc.gov/adhd/treatment/index.html#:~:text=Treatment%20recommendations%20for%20ADHD%20vary%20by%20age,therapy%20*%20Medications%20*%20Stimulants%20*%20Nonstimulants
- 4) Vitiello B, Lazzaretto D, Yershova K, Abikoff H, Paykina N, McCracken JT, McGough JJ, Kollins SH, Greenhill LL, Wigal S, Wigal T, Riddle MA. Pharmacotherapy of the Preschool ADHD Treatment Study (PATS) Children Growing Up. *J Am Acad Child Adolesc Psychiatry.* 2015 Jul;54(7):550-6. doi: 10.1016/j.jaac.2015.04.004. Epub 2015 Apr 27. PMID: 26088659; PMCID: PMC4475273.
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