About ADHD

ADHD is not a new disease. ADHD and other disorders with similar symptoms have been described for more than a century. Although ADHD may seem more common today than in the past, this is largely due to an increase in research. Research has led to better awareness of the disease by healthcare professionals, leading to better diagnosis.

Is there a difference between ADD, ADHD and AD/HD?

ADHD is the accurate medical term for a condition that has had several other names in the past, including ADD.

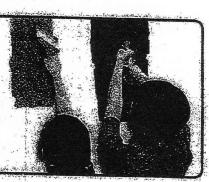


ADHD: A lifelong condition

If you (or your child) have been diagnosed with ADHD, you (or they) are not alone: ADHD is a common disorder.

IN CHILDREN

In fact, ADHD affects between 5% and 12% of school-aged children, making it the most commonly diagnosed psychiatric disorder in childhood. This means that an average grade school class will include between 1 and 3 children with ADHD.



IN ADOLESCENTS AND ADULTS

What's more, ADHD is not a disease that only occurs in children; patients with ADHD can continue to have symptoms into adolescence and adulthood. Among people diagnosed with ADHD as children, 80% keep their core symptoms of ADHD in adolescence and more than 60% keep some core symptoms in adulthood.



What is ADHD?

Whether in children, adolescents or adults, the diagnostic criteria for ADHD are the same. There are 3 symptom areas of ADHD that doctors look at: inattention, hyperactivity and impulsivity. However, as a patient gets older, the inattentive symptoms may be more frequent, as some patients tend to become less disruptive with age than they were during grade school.

Inattention may be the primary symptom in some patients, while hyperactivity and impulsivity may be the primary symptoms in others.

For a patient to be diagnosed with the Inattentive Type of ADHD, at least 6 of the following symptoms must occur often and be present in 2 or more settings. For older adolescents and adults, (aged 17 and older), at least 5 symptoms must occur often.

- Making careless mistakes or not paying attention to details
- Not being able to pay attention for a long time
- · Not listening well
- Not finishing tasks
- Not being well organized
- Avoiding tasks that require a prolonged mental effort
- Losing personal belongings (in children: toys, homework and books; in adolescents and adults: keys, bills and wallet)
- · Being easily distracted
- * Being forgetful

For a patient to be diagnosed with the Hyperactive-Impulsive Type of ADHD, at least 6 of the following symptoms must occur often and be present in 2 or more settings. For older adolescents and adults, (aged 17 and older), at least 5 symptoms must occur often.

- Fidgeting and squirming
- · Leaving seat
- Running and climbing when it's not the time or place
- Difficulty with doing quiet activities
- "On the go"
- Talking excessively
- Blurting out answers
- Not being able to wait his or her turn
- · Intruding on others

Patients affected by ADHD may also have problems in all categories of symptoms. When at least 6 symptoms are present in each category, this is called the Combined Type of ADHD.

Patients with the Inattentive Type of ADHD are often described as dreamers.

Children with the Hyperactive-Impulsive Type of ADHD are often described as being a handful or "on the go".

Adolescents and adults with the Hyperactiveimpulsive Type of ADHD may not be as physically hyperactive as children; but they often describe an internal feeling of restlessness or like their mind is always switching channels.



Diagnosis of ADHD

You or your child have been diagnosed with ADHD because the symptoms:

- Were more severe than what is typically seen in patients of the same age.
- Caused clinically significant impairment; such as in social, academic or occupational function; and were present in two or more settings, such as at school (or work) and at home:
- Haid been going on for at least 6 months.

Diagnosis of ADHD requires doctors to rule out other problems that may look like or have some symptoms in common with ADHD. For instance, problems in school could also be caused by other medical problems such as poor vision, attention lapses from other causes or a middle ear infection that causes on again/off-again hearing/loss.

It is also true that everyone, regardless of age, will behave in a way that could be described as *inattentive*, *hyperactive* or *impulsive* at one point or another. Not every child who misbehaves or adult who has difficulty completing duties in the workplace will immediately quality for a diagnosis of ADHD: this is why proper diagnosis is important.

ADHD across the lifespan

Although the diagnostic criteria for ADHD are similar for children, adolescents and adults, symptoms and subtypes may change for patients with ADHD over the course of their lives.

Hyperactivity and impulsivity may decrease as patients get older, while the demands on their attention and cognitive skills may increase with the responsibilities that come with adulthood. In other words, even adults with ADHD feel that it's impossible to get organized, even though they may be able to sit quietly in a chair.

A correct diagnosis can, however, bring a sense of relief, whether it happens in childhood or adulthood: patients can then start to understand why they have certain problems.

The different phases of ADHD symptoms

and a subject to be a super transfer of the superior transcription	the supplication of the su
Childhood	Adulthood
Hype	ractivity
e.g., Can't sit still, always "on the go"	Hyperactivity with feelings of restlessness
e.g., Climbs or runs at inappropriate times	 Signs of excessive motor activity are less common in adulthood
	 e.g., Difficulty engaging in quiet activities
Imp	oulsivity
e.g., Blurting out answers	e.g., Blurting out answers
e.g., Intrusive, Interrupting others	• e.g., intrusive, interrupting others
lna	ttention
· e.g., Difficulty sustaining attention	e.g., Difficulty sustaining attention
e.g., Easily distracted	• e.g., Easily distracted
e.g., Difficulty completing schoolwork	 e.g., Difficulty completing duties in the workplace

Causes of ADHD

Research suggests that the symptoms of ADHD come from biological causes. ADHD is suspected to be a problem related to the hard wiring of circuits within the brain, as well as with the chemicals that carry signals within the circuits of the brain. Researchers believe that ADHD may be caused by a decreased level of certain of these chemicals, dopamine and norepinephrine, in certain parts of the brain.

We now know that ADHD is hereditary (it tends to run in families), which means that certain genes determine how the circuits and chemicals in our brains function.

† The mode of therapeutic action of amphetamines in Albention Deficit Hyperactivity Disorder (ADHD) is not known.

ADHD is NOT caused by:

- * A lack of willpower
- w Watching too much television
- Bad parenting



Effective treatment of ADHD

Effective treatment of ADHD may include a wide-ranging approach involving medical, psychological and educational strategies.

For children, some strategies might include, for example, behaviour reinforcement techniques, training in social skills; study techniques and organizational strategies. Parents and educators are usually involved in the intervention plan, Each intervention plan must be individualized to meet a specific child's needs.

As ADHD patients get older, whether they are newly diagnosed as adults or grew up after having been diagnosed and treated for ADHD, they can benefit from strategies and techniques similar to those used with children. In addition, services from life coaches are available to help patients deal with the added responsibilities that come with adulthood.

Medication is also beneficial for many patients with ADHD. Once a diagnosis has been confirmed, and the doctor has determined that medication is appropriate, the first step for the doctor is to decide which medication might best control the symptoms while causing the least amount of side effects. Managing the symptoms of ADHD goes a long way towards helping other strategies be as effective as possible. Generally speaking, the combination of behavioural and medication therapies provides the most beneficial strategy in the treatment of ADHD.



Tips for supporting a child with ADHD

While taking VYVANSE may be helpful in managing symptoms of ADHD, a total treatment plan involves more than taking medication: you can help your child manage ADHD symptoms by helping him or her modify behaviours and be organized.

- Keep in mind that ADHD is a condition and that children are likely not misbehaving on purpose; often, behaviours are a way for them to express frustration or an inability to do what is being asked of them.
- * Strategies and tools for organization can help.
 - o If a child has problems remembering tasks such as what they need to do to get ready for school in the morning, it can be helpful to tape lists to mirrors and doors.
- of f a child has problems with time management; calendars, agendas, timers or alarms can be very beneficial.
- Allow the child extra time by giving him or her advance notice: changing focus quickly can be hard for a child with ADHD; it may be helpful to give a 5- to 10-minute reminder of an upcoming transition such as having to turn off the television to come have dinner.
- Establishing a daily routine may help the child know what to expect.

 This may include taking VYVANSE at the same time every day, such as right after the child wakes up in the morning

