AD/HD - Mental Health Interview

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This is an extended version of Dr Weinstein's television interview from KSDK Channel 5, (St. Louis affiliate of NBC).

What is AD/HD?

AD/HD stands for Attention-Deficit/Hyperactivity Disorder. It is a chronic condition of inattention, hyperactivity, or impulsivity causing impairment well beyond what you see in most developing children. As it becomes a problem in the child's school and family/relationship functioning, it is diagnosed and treated.

How many children have AD/HD in the U.S.?

The range of kids with AD/HD in the U.S. is estimated at 1-2 million, or 1 in every classroom, prevalence rates are about 5% (on the axerage).

Are there different types of AD/HD?

Yes. There is the Inattentive Type, problems with sustaining attention and what used to be called ADD, the Hyperactive/Impulsive Type, noted by impulsivity and motor overactivity, and the Combined Type, which is a combination of both sets of symptoms.

What causes AD/HD? What myths are out there that people think cause AD/HD?

- 1) It is hard to find something more inherited than AD/HD. Identical twin studies (reared in different environments) = 80-90%, fraternal twin studies = 30-40%.
- 2) There are many myths out there, but briefly, it is worth saying that you can cause kids to be worried, sad, angry, or oppositional, but you cannot cause them to have AD/HD.
- 3) None of the controlled studies looking at food dyes, vitamin deficiencies, and other diet related factors have provided adequate evidence for causing or alleviating AD/HD symptoms.

Is AD/HD overdiagnosed?

No, it actually is underdiagnosed. Epidemiological studies suggest 3-5% have it, but we are not seeing as many kids in treatment for AD/HD. Only 1 in 5 children in the U.S. are being adequately diagnosed or treated for mental health diagnoses.

Can you inherit AD/HD? Do more boys or girls have AD/HD?

Yes it is primarily inherited/genetic, and for every girl who has AD/HD, there are up to 6 to 9 boys who have it.

Does AD/HD go away in adolescence or adulthood?

80% of school age children continue to have AD/HD as teenagers and approximately 50% will have AD/HD as adults.

How would I know if my child should be evaluated for AD/HD?

If your child is having the symptoms for at least 6 months and they seem far worse than their peers and their symptoms are getting in the way of their schooling, socialization, or behavior at home, then it is worth having them evaluated.

Consider seeking an evaluation when ANY of the following conditions exist:

- 1. For at least 6 months the child has displayed activity, inattentiveness, and impulsiveness far greater than in other children of the same age (the symptoms talked about are much worse than other children the same age).
- 2. For at least a few months other parents have been telling you that your child has much poorer self-control or is far more active, impulsive, and inattentive when with other children than is normal.
- 3. Far more of your time and energy is required to manage and keep the child safe than other parents invest.
- 4. Other children do not like to play with your child and avoid the child because of excessively active, emotional, or aggressive behavior.
- 5. A day-care staff member or schoolteacher has informed you that your child has been having significant behavioral problems for several months.
- 6. You frequently lose your temper with this child; you feel as if you are on the verge of excessive physical discipline or might even harm the child; or you are greatly fatigued, exhausted, or even depressed as a consequence of managing or raising this child.

*Taken from: Barkley, R. (2000). Taking charge of ADHD: The complete, authoritative guide for parents.

New York: NY, Guilford Press.

How does medication help children with AD/HD?

Medication targets the symptoms of inattentive, impulsive, and hyperactive symptoms, but falls short of addressing the family communication and conflict problems, parenting skills/styles, social and coping skills, and learning issues.

Are kids who are on medication or off medication at more risk for substance abuse as adolescents? Recent studies suggest teenagers with AD/HD are 5 times less likely to abuse substances if they are taking their prescribed stimulant medication.

Do children who take medicine for AD/HD have to be on the medication for the rest of their life? It depends, about half continue to have symptoms causing impairment into adulthood.

For More Information:

Please call Dr. Dan Weinstein's Office at (314) 646-7100 or go to his website at http://webpages.charter.net/drdan

And for more information on Psychotherapy Saint Louis go to their website at http://www.psychotherapysaintlouis.org