

Diagnosis

There is no single test to diagnose ADHD. Therefore, a comprehensive evaluation is necessary to establish a diagnosis, rule out other causes, and determine the presence or absence of co-existing conditions. Such an evaluation requires time and effort and should include a careful history and a clinical assessment of the individual's academic, social, and emotional functioning and developmental level.

Several types of professionals can diagnose ADHD including clinical psychologists, clinical social workers, nurse practitioners, neurologists, psychiatrists, and pediatricians. Regardless of who does the evaluation, the use of the DSM-5 diagnostic criteria for ADHD is necessary.

Treatment

Treating ADHD often requires medical, educational, behavioral, and psychological intervention. Working closely with health care and other professionals, treatment should be tailored to the unique needs of each individual and family to help the patient control symptoms, cope with the disorder, improve overall psychological well-being and manage social relationships. Depending on the age of the individual with ADHD, treatment may include:

- parent training
- medication
- skills training
- counseling
- behavioral therapy
- educational supports
- education regarding ADHD



The National Resource Center on ADHD (NRC) is a program of Children and Adults with Attention-Deficit/Hyperactivity Disorder, Inc. (CHADD). It was established through a cooperative agreement with the Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities, to serve as the national clearinghouse for the latest evidence-based information on ADHD.

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**National
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Center
on ADHD**
A Program of CHADD

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What
is
ADHD?

ADHD: the Facts

Everybody can have difficulty sitting still, paying attention, or controlling impulsive behavior once in a while. For some people, however, the problems are so pervasive and persistent that they interfere with every aspect of their life: home, academic, social, and work.

Attention-deficit/hyperactivity disorder (ADHD) is a common behavioral condition affecting 11 percent of school-age children. Symptoms continue into adulthood in more than three-quarters of cases. ADHD is characterized by developmentally inappropriate levels of inattention, impulsivity, and hyperactivity.

Individuals with ADHD can be very successful in life. However, without identification and proper treatment, ADHD may have serious consequences, including school failure, family stress and disruption, depression, problems with relationships, substance abuse, delinquency, accidental injuries, and job failure. Early identification and treatment are extremely important.

Causes

Despite multiple studies, researchers have yet to determine the exact causes of ADHD. However, scientists have discovered a strong genetic link since ADHD can run in families. More than 20 genetic studies have shown evidence that ADHD is strongly inherited. ADHD is a complex disorder, which is the result of multiple interacting genes.

Other factors in the environment may increase the likelihood of having ADHD:

- exposure to lead or pesticides in early childhood
- premature birth or low birth weight
- brain injury

Scientists continue to study the exact relationship of ADHD to environmental factors, but point out that there is no single cause that explains all cases of ADHD and that many factors may play a part.



Symptoms

Typically, ADHD symptoms arise in early childhood. According to the DSM-5, several symptoms are required to be present before the age of 12. In making the diagnosis, children should have six or more symptoms of the disorder present; adolescents age 17 and older and adults should have at least five of the symptoms present. The DSM-5 lists three presentations of ADHD—predominantly inattentive, hyperactive-impulsive, and combined. The symptoms for each are adapted and summarized below.

ADHD Predominantly Inattentive

- fails to give close attention to details or makes careless mistakes
- has difficulty sustaining attention
- does not appear to listen
- struggles to follow through with instructions
- has difficulty with organization
- avoids or dislikes tasks requiring sustained mental effort
- loses things
- is easily distracted
- is forgetful in daily activities

ADHD Predominantly Hyperactive-Impulsive

- fidgets with hands or feet or squirms in chair
- has difficulty remaining seated
- runs about or climbs excessively in children; extreme restlessness in adults
- difficulty engaging in activities quietly
- acts as if driven by a motor
- talks excessively
- blurts out answers before questions have been completed
- difficulty waiting or taking turns
- interrupts or intrudes upon others

ADHD Combined

- The individual meets the criteria for both predominantly inattentive and hyperactive-impulsive ADHD presentations.

These symptoms can change over time, so children may fit different presentations as they get older.