

Preface

International specialists created this guide to the identification and treatment of Attention Deficit Hyperactivity Disorder (ADHD) in adults. They offer advice for practical, comprehensive, and personalized care, drawing from their extensive experience and unique expertise. Their chapters distill the clinical implications of over three decades of research. This guide can help clinicians of any specialty adopt best practices for assessment and treatment of ADHD in adults.

Through international contributions, the guide presents a state-of-the-art consensus on clinical care for ADHD in adulthood. The initial chapter describes the condition and its importance. The next few chapters explain diagnosis and treatment planning. Subsequent chapters explore treatment options in detail. The final chapter addresses common dilemmas in clinical practice. The Appendix includes material that facilitates assessment and treatment, including brief guides and inventories that can be photocopied for clinical use.

Here are some highlights of how the chapters that follow address practical clinical concerns:

- *ADHD is a biologically based, highly heritable syndrome impairing daily life roles that onsets in childhood and often persists into adulthood.* A primer on the neurobiology and clinical importance of ADHD is offered in the initial chapter, *ADHD in Adults: a Clinical Concern*.
- *The diagnosis is made primarily through a clinical encounter.* The chapter on *Clinical Assessment of ADHD in Adults* introduces a practical approach to capturing current and historical symptoms of ADHD, using the *Adult ADHD Symptoms and Roles Inventory (ASRI)*, and a *Differential Diagnosis* inventory. These resources are also found in the Appendix, along with a *step-by-step Diagnosis Checklist*.
- *ADHD manifests differently in different individuals.* The *Clinical Assessment* chapter and the *ASRI* facilitate comprehensive evaluation of impact through a focus on function in life roles. A *Treatment Planning* chapter offers a systematic approach to tailoring intervention to the strengths, challenges, and individual goals of a patient. The take-home principles of this chapter are summarized in a

Treatment Planning and Tracking guide in the Appendix for easy clinical reference. The chapters on ADHD in Families and on Adolescence and Young Adulthood explore how assessment and treatment can be adapted to different life contexts. Assessment of ADHD impact is aided by the self-report Weiss Functional Impairment Rating Scale in the Appendix.

- *Several medication and non-medication supports are useful.* Chapters on Treatment Planning, Stimulant Pharmacotherapy, Non-stimulant Drug Treatments, and Psychosocial Treatment describe how to choose and optimize interventions. Treatment History and Treatment Tracking forms in the Appendix facilitate capture of information needed to choose initial treatments and monitor them.
- *Adults with ADHD are often burdened by other challenges.* This includes organizational problems beyond core ADHD symptoms (self-regulatory or organizational difficulty), as well as any condition which compromises optimal brain function. Several chapters detail how to identify and support these conditions. The chapters on Clinical Assessment, Treatment Planning, and Neuropsychological Assessment present practical approaches to evaluating complex presentations. A Differential Diagnosis and Neurological Comorbidity Inventory in the Appendix guides clinicians to identify comorbidity. Clinical management of specific comorbidities is reviewed in the chapters on Common Comorbidities and the chapter on Adolescence and Young Adulthood.
- *Many conditions other than ADHD manifest in poor control of attention or behavior.* The Clinical Assessment and Treatment Planning chapters guide differentiation from other conditions. The Differential Diagnosis and Neurological Comorbidity Inventory also facilitate thorough differential diagnosis.
- *ADHD impacts other people.* The Assessment and Treatment Planning chapters emphasize the importance of assessing impact on relationships. The ADHD in Families chapter offers a detailed exploration of the relational impact of ADHD, and practical ways of intervening. The ASRI third-party self-report inventory, in the Appendix, also facilitates identification of symptoms that impair relationships.
- *Clinicians can face tough decisions in complicated presentations of ADHD.* All chapters emphasize pragmatic approaches to clinical decisions. The final chapter presents one clinician's approach to common dilemmas practice in an urban setting.

This text is thus an extraordinary effort to inform and advise clinicians in the identification and support of ADHD in adults. The principles and strategies set forth in this guide will help the reader develop or refine clinical approaches that suit the population they work with. The reader is also encouraged to rely on local standards of clinical practice if they conflict with any recommendation in this guide. Hopefully, our work will foster adoption of thoughtful support of ADHD in adulthood.

ADHD in Adults

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