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ADHD and Coexisting Disorders (Overview)

About the series: These five information sheets provide an overview of attention-deficit/hyperactivity disorder (ADHD) and some of the more common conditions that coexist with ADHD. Extended versions of each may be found at www.help4adhd.org.

Any disorder can coexist with ADHD (Attention-Deficit/Hyperactivity Disorder), but certain disorders seem to co-occur more often. In fact, up to two thirds of children with ADHD may also have another disorder. Just as untreated ADHD can have long-term effects, so too can other untreated disorders.

As part of the diagnostic process for ADHD, the health professional must determine if there are any other psychiatric or neurological disorders affecting the child. The symptoms of ADHD may often overlap with those of other conditions. The challenge for the clinician is to determine whether a symptom belongs to ADHD, to a different disorder, or to both disorders at the same time. For some individuals, the overlap of symptoms among the various disorders makes multiple diagnoses possible. By conducting a complete evaluation, a trained health professional familiar with ADHD and these other disorders will be able to make the correct diagnosis(es). Interviews and questionnaires are often used to obtain information from the patient, the patient's family and his or her teachers to screen for these other disorders.

Disorders that commonly co-occur with ADHD include:

DISRUPTIVE BEHAVIOR DISORDERS

- **Oppositional Defiant Disorder:** Oppositional Defiant Disorder (ODD), involves a pattern of frequently arguing with adults, frequently getting angry and refusing to follow rules, blaming others and being resentful, spiteful, and vindictive.
- **Conduct Disorder:** Children with Conduct Disorder (CD) frequently break rules. They can be violent with people or animals, destroy property, lie or steal things and skip school. CD is often described as delinquency and children who have ADHD and conduct disorder may have especially difficult lives.

Treatment: Children with ADHD and ODD or CD are treated with therapies aimed at changing their behavior so as to discourage damaging behaviors and encourage positive ones. This means providing strong, clear structure and incentives and rewards for positive behaviors as part of an overall management plan. Medication can also help.

MOOD DISORDERS

- **Depression:** Children with ADHD often feel left out of social activities. Their poor social skills may mean they have difficulty making friends, are not invited to play at other children's homes or are not chosen for sports teams or other groups. This can harm a child's self-esteem and contribute to depression. Children with ADHD can become discouraged and abnormally sad. They may keep to themselves, stop doing things they once enjoyed, lose their appetite, criticize themselves excessively, or even talk about dying.

Treatment: Treatment for a child with ADHD and depression involves making the child's life as stress-free as possible. Parents and teachers can arrange play in small groups and children can be closely watched at school. Antidepressant medications can also be used, sometimes alone or along with medications for ADHD.

- **Mania/Bipolar disorder:** Bipolar disorder involves periods of elevated mood (excessively happy or irritable) that is outside of the norm, as well as periods of depression. Children who are manic may have moods that change very rapidly, seemingly for no reason. They may be irritable a lot of the time or be aggressive for no apparent reason. The combination of ADHD and mania often leads to severe difficulty functioning at home and at school.

Treatment: When a child has bipolar disorder and ADHD at the same time, it usually means that the child's mood should be stabilized with medication before ADHD medications can work. Treatment from a trained child and adolescent psychiatrist is essential.

ANXIETY DISORDERS

- These disorders include phobias, Panic Disorder, Obsessive-Compulsive Disorder (OCD) and Generalized Anxiety Disorder (GAD). A person with an anxiety disorder usually worries too much about a lot of things. He or she may also feel "on edge," stressed out, tired, tense and have trouble sleeping. Children with ADHD and an anxiety disorder usually have more school, family, and social problems than children who have ADHD alone.

Treatment: Children with anxiety disorders are taught how to pay attention to events and things that may bring about anxiety and fear. By becoming more aware, they are encouraged to address their thoughts or feelings. Relaxation techniques for stressful situations can also help. Those with ADHD and anxiety usually don't respond as well as others with ADHD to conventional ADHD medication, so other medications, such as antidepressants or anti-anxiety medications, may be used.

TICS AND TOURETTE SYNDROME

- Tics are sudden, rapid, repetitive, involuntary movements or sounds. Movements such as excessive eye blinking or throat clearing often occur between the ages of 10-12 years and appear worse when a child is nervous or tired. Temporary tics usually go away over one-to-two years. Tourette Syndrome is a less common, but more serious tic disorder, where children may make noises (e.g., barking a word or sound) and movements (e.g., repetitive eye blinking) almost every day for years.

Treatment: Tics can also become more noticeable when patients are treated with stimulants. Sometimes, lowering the dose or using a non-stimulant ADHD medication can help.

LEARNING DISABILITIES

- Learning at school can be hard for children with ADHD. Depending on how these conditions are defined, up to 50 percent of children with ADHD also have a learning disability. Some have trouble reading or doing math calculations, but this doesn't mean they are less intelligent than other children.

Treatment: Learning disabilities and ADHD should be treated taking into account the student's individual needs and strengths. A student may need special education services. Medications do not specifically improve learning disorders.

SUBSTANCE ABUSE:

- Substance abuse is more common in youth with ADHD than in youth without the disorder. It can also run in families.

Treatment: Early intervention to prevent behavior problems often associated with substance abuse is crucial. Certain forms of therapy such as Cognitive Behavior Therapy and family therapy may help.

For more information on ADHD and Coexisting Disorders, please see *What We Know #5: ADHD and Coexisting Disorders* on our website at: www.help4adhd.org/en/treatment/coexisting/WWK5.

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For further information about ADHD or CHADD, please contact:

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