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## **Clinical Updates on ADHD**

**ADHD** – The essential feature of Attention-Deficit/Hyperactivity Disorder is a persistent pattern of inattention and /or hyperactivity-impulsivity that is more frequently displayed and more severe than is typically observed in individuals at a comparable level of development.

### **Subtypes**

ADHD, Combined Type

ADHD, Predominantly Inattentive Type

ADHD, Predominantly Hyperactive-Impulsive Type

**Prevalence** – 5-15% of School age children; Not at much information for the adult population. ADHD does not go away, but young adults and adults often have more developed compensatory strategies and their symptoms do not manifest in such obvious ways.

**Associated Features and Disorders** – associated features vary depending on age and developmental stage but may include the following:

Low frustration tolerance  
Temper outbursts  
Bossiness and Stubbornness,  
Excessive and frequent insistence that requests be made  
Mood instability  
Rejection and poor self-esteem  
Impaired academic achievement  
Conflicts with parents and school authorities  
Oppositional and Defiant Behavior  
Co-morbid Disorders include Mood Disorders, Anxiety Disorders  
Learning Disorders and Communications Disorders

### **DSM-V Diagnostic Criteria**

Inattention – 6 or more of the following

Fails to give close attention to details/makes careless mistakes  
Difficulty sustaining attention in tasks or play activities  
Does not seem to listen when spoken to directly

- Does not follow through on instructions and fails to finish work
- Difficulty organizing tasks and activities
- Avoids task that may require sustained mental efforts
- Loses things
- Easily distracted by extraneous stimuli
- Forgetful in daily activities

Hyperactivity-impulsivity – 6 or more of the next 2 categories

- Fidgets with hands or feet or squirms in seat
- Leaves seat in classroom or in other setting
- Runs about or climbs excessively in inappropriate settings
- Difficulty playing or engaging in activities quietly
- “On the go” or acts as if “driven by a motor”
- Talks excessively

Impulsivity

- Blurts out answers before questions have been completed
- Difficulty waiting turn
- Interrupts or intrudes on others (butts into conversations/games)

The symptoms that caused impairment were present before age 7 years – even if they did not cause significant impairment until a later age. Genders manifest symptoms differently.

Some Impairment from the symptoms in present in two or more settings

Clear evidence of clinically significant impairment in social, academic or occupational functioning

**Treatment interventions**