

# ATTENTION-DEFICIT/ HYPERACTIVITY DISORDER

*Attention-Deficit/Hyperactivity Disorder (AD/HD) is a neurobiologically based developmental disability estimated to affect three to five percent of the school-age population. The common characteristics are inattention, impulsivity, and hyperactivity.*

## ▼ What Causes AD/HD?

No one knows exactly what causes AD/HD. Scientific evidence suggests that the disorder is genetically transmitted in many cases and results from a chemical imbalance. Parents and teachers do *not* cause AD/HD.

## ▼ Warning Signs

The following behaviors are associated with the disorder:

- **Inattention** — A child with AD/HD is usually described as having a short attention span. Some children may have difficulty concentrating on tasks. Others have trouble knowing where to start.
- **Hyperactivity** — Excessive activity is the most visible sign if AD/HD is present. The hyperactive child or pre-schooler is generally described as “always on the go.”
- **Impulsivity** — Children may act before thinking because they have difficulty controlling impulses. This may lead children to speak out of turn, interrupt others, and engage in what looks like risk-taking behavior.

AD/HD most commonly falls into three subtypes.

- *Combined Type* — multiple symptoms of inattention, impulsivity, and hyperactivity;
- *Predominately Inattentive Type* — multiple symptoms of inattention with few, if any, of hyperactivity;
- *Predominately Hyperactive-Impulsive Type* — multiple symptoms of hyperactivity-impulsivity with few, if any, of inattention.

These subtypes take into account that some children with AD/HD have little or no trouble sitting still, but may be predominately inattentive and, as a result, have difficulty getting or staying focused on a task. Other children may be able to pay attention but lose focus because they may be predominately hyperactive impulsive.

## ▼ Don't All Children Show These Signs Occasionally?

From time to time, all children may show some of the signs associated with AD/HD. However, even if he or she does so consistently, do not draw the conclusion that the child has the disorder. A proper evaluation must be completed.

## ▼ Getting Help

An accurate diagnosis requires an assessment conducted by a well-trained professional (such as a developmental pediatrician, child psychologist, or a pediatric neurologist.) A proper diagnostic evaluation includes the following elements:

- A thorough medical and family history
- A physical examination
- Interviews with the parents and child, and the child's teachers
- Behavior rating scales completed by parents and teachers
- Observation of the child
- A variety of psychological tests to measure IQ and social and emotional adjustment, as well as to indicate the presence of certain learning disabilities.

## ▼ Treating a Child With AD/HD

No cure or “quick fix” exists to treat AD/HD. The symptoms, however, can be managed through a combination of efforts including education, intervention, behavior management, and medication. In some cases, individual or family counseling is advised. Medication has proven effective, but most experts agree that it should never be the only treatment used.

Sources:

- American Psychiatric Association, *Diagnostic and statistical manual of mental disorders*.
- Fowler M., *Maybe you know my kid: A parent's guide to identifying, understanding, and helping your child with AD/HD* (2nd ed.)

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