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Adult ADD/ADHD-The Information You Need to Know

Attention Deficit Disorder (ADD) is the term used for a neurological condition marked by difficulties with attention and concentration and usually difficulties with self-control and overactivity or restlessness. It is also known as Attention Deficit Hyperactivity Disorder (ADHD) because many individuals with ADD are or were overactive and impulsive. About 5% of all people have ADD.

ADD is recognized by mental health professionals as one of the most common disorders of childhood, and was previously thought to resolve in adolescence. Over the past decade there has been a growing awareness that for many if not most individuals with ADD it persists into adulthood. Effective treatment for adult ADD is a relatively new area of study.

ADD affects many aspects of life. It affects academic and vocational success, personal and family relationships, emotions and self-esteem. ADD individuals often share a number of positive qualities such as creativity, spontaneity, inventiveness, and sensitivity to others. But it also leads to disorganization, procrastination, difficulty with task completion, and feeling overwhelmed.

The Nature of ADD

ADD is commonly described as a disorder consisting of chronic difficulties in the areas of attention/concentration, impulsivity, and overactivity. In addition to these "core" symptoms, other symptoms and problems include distractibility, forgetfulness, lack of persistence with tasks, frequent boredom, failure to delay speech or action when appropriate, fidgetiness, restlessness, being "always on the go," disorganization, difficulty coping with stressful situations, temper outbursts, and frequently changing moods. Not every ADD individual displays all these symptoms. Some ADD individuals have mainly the attentional difficulties and do not have the overactivity and impulsivity. These symptoms frequently lead to low self-esteem, problems with planning and executing tasks, a disorganized lifestyle, poor problemsolving skills, frequent job or relationship changes, social and relationship difficulties, a chronic pattern of underachievement, and/or inconsistency in work production and performance. Children often display problems with behavior, socialization, and school performance. Many individuals with ADD may have a coexisting problem such as anxiety or depression, a learning disability, or drug/alcohol abuse. It may be that they focus on and seek help for this problem, not recognizing its link to ADD.

Causes

ADD is widely recognized among experts as having a biological, neurological basis. It is currently understood as the result of a part or parts of the brain not regulating self-control of attention, impulses, and activity level as it should, likely due in part to a lack of certain neurochemicals. While it is usually an inherited condition, it may be exacerbated by environmental and other factors such as parenting, adversity, or educational environment.

Progression

ADD individuals are generally born with ADD. It usually becomes manifest in early childhood. Often it becomes more apparent during elementary school years because of the demands of school experience. For some individuals it may not become apparent until later in life. During adolescence changes in the ADD manifestation often occur. It may be less outwardly obvious, especially when hyperactivity diminishes. For some individuals, it seems to end. For the majority, it usually continues to impact in many ways throughout adulthood, although greater control may be achieved in various ways.

Diagnosis

ADD is widespread in our society. It seems males are much more likely to be diagnosed with ADD than females. There is no definitive test for ADD, and it is one of the most difficult diagnoses to assess. ADD can only be diagnosed by a mental health or medical clinician trained and experienced in the area of ADD. Comprehensive interviews covering childhood and adult history of academics, relationships, behavior, etc. are necessary to establish a diagnosis. Rating scales and certain tests are often helpful and employed. Because the main symptoms of ADD overlap with other conditions as well as with "normal" experience, a qualified professional is required to rule out other conditions that may produce symptoms resembling ADD. ADD should not be self-diagnosed. If you think you have ADD it is recommended that you consult a professional.

Treatment

ADD is not an all or nothing condition, but occurs in degrees. It is possible to have a mild case that can be relatively easy to manage. Some people have severe symptoms and problems that can impair their functioning greatly. Even severe ADD can, with effort, medication, and support, be managed effectively.

People with moderate to severe problems related to ADD should consider treatment with a professional with training and experience in ADD. Medications can be helpful. Counseling is often indicated to deal not only with the symptoms, but also the resulting issues related to emotions, self-esteem, relationships, work performance, school performance, etc. Parent counseling has been shown to be effective in helping children with ADD. Coaching is another service providing support for ADD. Greater effectiveness and reaching of potential can be had. There is much that can be done to help the individual struggling with ADD.

Learning new ways to gain control of ADD-related problems is an important part of coping with ADD. A first step is to gain insight and understanding of how ADD impacts in your life. This understanding can then be used to identify the challenges and eventually to develop new strategies and skills for dealing with your (or your child's) ADD symptoms and problems. An ADD coach or therapist specializing in the treatment of ADD can be very helpful in this process.

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Dr. Morgan's practice focuses on assessment and counseling for a variety of issues including ADHD and learning problems and disabilities. He has published several professional articles on ADHD and frequently speaks on the subject. Dr. Morgan is on the professional advisory board of Chester County CHADD.

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