

# Guideline Recommendations for the Diagnosis and Treatment of Adult ADHD without Comorbidity



## Measurement-based care

- Treatment targets need to be precisely defined
- Use of rating scales recommended
- Effectiveness and safety/tolerability of medication treatment must be systematically assessed
- Assessment of medication compliance at each visit

## Recommended scales for adult ADHD:

- ✓ Adult ADHD Self-Report Symptoms Checklist (ASRS), self-rating screening scale, developed for primary care providers and available to download at [www.med.nyu.edu/psych/assets/adhdscreeener.pdf](http://www.med.nyu.edu/psych/assets/adhdscreeener.pdf). (free of charge). The 6-questions ASRS-VI.1 screener is a subset of the WHO's 18-question Adult ASRS-VI.1 Symptom Checklist
- ✓ Conners Adult ADHD Diagnostic Interview, clinician administered, helps assess, diagnose and monitor treatment of ADHD in adults. Available for purchase from Multi Health Systems at [www.mhs.com](http://www.mhs.com)
- ✓ Brown Adult Attention Deficit Disorder Scale (BADDs), clinician administered, 40 items that assess five clusters of ADHD related function impairments. Available for purchase from the PsychCorp at <http://psychcorp.pearsonassessments.com>

## Level 0 Psychoeducation or other psychosocial treatments

- Assess childhood history of ADHD symptoms before age 7. However, adults may only be able to recall clear symptoms between ages 7-12 that strongly suggest ADHD
- Assess the specific current ADHD symptoms, including duration and severity by frequency and/or resultant impairment
- Use of behavioral rating scales such as the Adult ADHD Self-Report Symptom Checklist (ASRS)
- Determine level of daily impairment in multiple life domains (school, work, home)
- Obtain a thorough medical history to rule out potential medical causes of observed symptoms (such as head injury, seizure, thyroid conditions, heart condition)
- Review of education history
- Review medication history
- Obtain family history to explore the presence of similar behavioral patterns with parents, siblings, or other family members
- Obtain a psychiatric history to rule out or confirm comorbid psychiatric conditions such as anxiety/mood disorders, learning disabilities, personality disorders, and substance abuse
- Evaluate risks for the use of ADHD medications
- Precisely define treatment targets (symptom reduction, impairment reduction, disability reduction, improve quality of life)

## Level 1

*Long acting psychostimulant monotherapy*

## Level 2\*

*Psychostimulant monotherapy not tried at Level 1 (different agent or different Class including long and short-acting stimulant medications)*

## Level 3

*Atomoxetine*

## Level 4a

*Diagnostic reconsideration if none of the above agents result in satisfactory response*

## Level 4b\*

*Consider other agents such as bupropion, short acting stimulant medications and alpha-agonists*

\* Note: Risk of diversion/substance misuse should be evaluated before prescribing short-acting psychostimulants.

## FDA Approved Medications for Adults with ADHD

Medication	Typical Starting Dose	FDA Maximum Dose
<b>Amphetamine preparations</b> <b>Long-acting</b> - Lisdexamfetamine(Vyvanse) - Adderall XR	30 mg 20 mg	70 mg none
<b>Methylphenidate preparations</b> - Dexmethylphenidate (Focalin XR) - Concerta - Ritalin SR	10 mg 18 or 36 mg 20 mg	40 mg 72 mg 90 mg
<b>Non-Stimulants preparations</b> - Atomoxetine (Strattera)	40 mg	100 mg

### References:

1. Devon A. Sherwood, Jose A. Rey. Pharmacological Agents for the Treatment of Adult Attention Deficit Hyperactivity Disorder: A Review of the Literature. *Journal of Pharmacy Practice* 2006;19;336.
2. Barkley RA, Murphy KR, Fischer M. *ADHD in Adults: What the Science Says*. New York, NY. Guilford Press, 2008.
3. Faraone SV, Biederman J, Spencer T, et al. Attention-deficit/hyperactivity disorder in adults; an overview. *Biol.Psychiatry*. 2000, 48(1)9-20.
4. Weiss M, Safren ST, Solanto MV et al. Research Forum on Psychological Treatment of Adult with ADHD. *J. of Att.Dis*. 2008;
5. Goodman DW. ADHD in Adults: Update for Clinicians on Diagnosis and Assessment. *Primary Psychiatry*. Vol 16, No.11. 2009. pp38-64.
6. Kessler RC, Lenard Adler, Barkley R et al. The Prevalence and Correlates of Adult ADHD in the United States: Results from the National Comorbidity Survey Replication. *Am J Psychiatry* 2006;163:716-723.
7. Recognizing ADHD in Adults with Comorbid Mood Disorders: Implications for Identification and Management. Goodman, DW, Thase ME. *Postgraduate Medicine*, Volume 121, Issue 5, September 2009.
8. Adler L, Cohen J. Diagnosis and evaluation of adults with attention-deficit/hyperactivity disorder. *Psychiatr Clin North Am*. 2004;27(2):187-201.