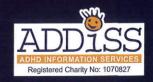


issue 38

The voice of ADDISS - The National ADHD Information and Support Service



Objective Markers for ADHD Diagnosis



ADDISS is the **National Attention Deficit Disorder Information &** Support Service.

information and resources about Attention Deficit Hyperactivity Disorder (ADHD) to anyone who needs assistance - parents, sufferers, teachers or health professionals. All our activities are supported by our Professional Board of expert advisers.

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You will receive this newsletter four times a year, notification of talks across the UK and abroad, notification of new publications as well as special offers including discounted entrance to conferences and training events.

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Unwrapping the Gifts of ADHD in

Dr Edward Hallowell speaks to a packed audience of students and staff at Pembroke College, Cambridge University, joined by ADHD champion and man of the moment Rory Bremner.

By Sarah Holme, ADHD news

HE HIGHEST undiagnosed group of individuals with ADHD are those that achieve a good level of education and are 'successful' in life. ADHD, particularly in highly functioning individuals, can go unrecognised because people are doing well and because a lot of stigma still exists around ADHD.

There are many examples of adults with ADHD that have had very successful and high profile careers, but also the opposite. Dr Hallowell explains,

"ADHD can take an individual one way or the other and that is why it is so important to know about it".

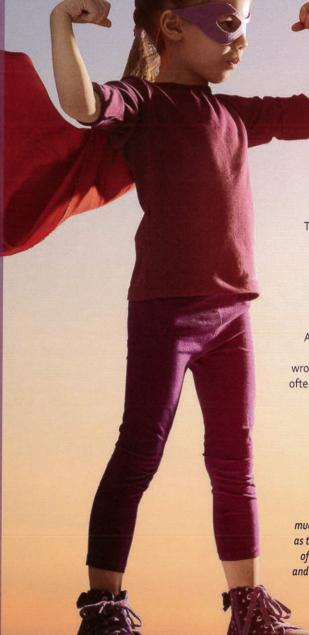
In the early-mid 1900s, the idea that 'free will' controlled a person's actions was at the centre of the thinking on ADHD and other disorders with behavioural symptoms. Individuals with behavioural patterns which we now recognise as ADHD were simply considered bad, lazy, willful or stupid. Children and adults with ADHD would simply be pressured to 'try harder' and would be consistently misunderstood. ADHD was viewed as an issue of morality, not biology, and echoes of this are still present in society today. People with ADHD are still often unaware, and when diagnosed can be reluctant to 'own' their diagnosis and speak about it freely without shame.

The medical model of ADHD accepted today is an improvement but it still, falls short. It focuses on what is wrong with the individual and negative aspects of symptoms: hyperactivity, impulsivity and inattentiveness.

Dr Hallowell suggests that the real disabilities of ADHD are shame, fear and the belief that you are disordered because of something you are doing wrong. These negative feelings and beliefs are more often what blocks people with ADHD from achieving all they can, not the ADHD itself.

> Dr Hallowell reasons that it is time to update the medical model with a strength-based model of ADHD.

"ADHD has such a negative association now – it is associated with difficulty and disorder but would be much better described as "creative-person syndrome" or as the "entrepreneurial trait". This trait is a combination of positives and negatives, an amalgam of advantages and disadvantages. Having ADHD is like having a Ferrari engine for a brain with bicycle brakes- it is powerful and fast but you need to work at strengthening the brakes. With proper help, individuals with ADHD can do great things - they can be game changers and paradigm breakers."



High Performers

THE UNSPOKEN SIDE EFFECTS OF ADHD – SHAME, GUILT AND LOW SELFESTEEM

The issues that adults and children have with their executive function means they have difficulties with planning, prioritising and organisation. They also have a fundamentally different sense of time with only two settings – 'now' and 'not now'. Individuals with ADHD may live a life of chronic procrastination, only able to focus where adrenaline is high. Consequently, ADHDers often find success in high pressure/intense jobs.

ADHD individuals are often searching for high stimulation that ordinary life often doesn't provide. There is a persistent 'itch' at the core of ADHD. Maladaptive habits for scratching the itch like substance abuse (8x more likely in individuals with ADHD), gambling, sexual risk taking and excessive shopping can arise. However, there are fantastic adaptive ways to scratch the itch – creativity in music, art and technology, close human relationships and exercise.

People with ADHD are victims of enthusiasm – they often over commit to new projects as their eyes are bigger than their stomachs, and there can be problems following through.

This can arise in relationships too. ADHDers are often impatient, feeling things should 'hurry up', but this can be a useful tool in situations such as meetings. ADHDers have a low tolerance for frustration, they can be prone to meltdowns and go from 0-60 in no time.

LIVE CONFIDENTLY AND WITHOUT SHAME

Not knowing that ADHD is at the root of these things can bring a person down and can lead to feelings of shame, guilt and low self-esteem as people wonder 'what is wrong with them?' Children and adults with ADHD frequently struggle with low self-esteem, so much so that many ADHDers chronically underachieve.

Women are the biggest undiagnosed group of ADHD. They are typified in girls by the quiet daydreamer that underachieves. They also struggle the most with low self-esteem. For women, finding their positive self-esteem is the biggest benefit to being diagnosed with ADHD.

Above all, Dr Hallowell's message is one of encouragement, "The good news is that with a diagnosis of ADHD individuals can come out of hiding and there is no reason to feel any shame. You just need to have the courage to be who you are – you will feel so much better. The world will love you, it is OK."

There are many positives to having ADHD:

- Originality
- Creativity
- Sparkle
- A zest for life
- Intuition
- An uncanny ability to see into an issue

ADHDers are like 'X-men', and as well as the traits listed above, ADHDers tend to be big-hearted, generous, trusting, tenacious, entrepreneurial and too transparent to be deceitful.

'YOU'RE DOING FINE!' - WHY BOTHER GETTING HELP?

Why get a diagnosis and get additional help? Dr Hallowell compares having ADHD to driving on square wheels. You can move yourself forward fine, but treatment lets you get so much more mileage with the same amount of effort. Who knows what you could achieve!

There are certain lifestyle changes that could particularly benefit you

- Good health
- Positive contact with people
- Coaching
- Medication

Medication can improve focus in about 80% of cases with no side effect. Stimulant medications can be very useful. Some people view medication as cheating when it applies to conditions of the mind, but this simply isn't the case. Medication is not the whole treatment but it can really help, and it is never too late to pursue a diagnosis. Dr Hallowell also was highly in favour of coaching for adults with ADHD to help them address issues and get the most out of their lives.

Dr Hallowell's message to those with ADHD:

66 Be proud and spread the word!
In doing so you will help free
those who have ADHD and
don't know it

Dr Edward (Ned)
Hallowell, M.D
is a graduate of
Harvard College and
Tulane School of
Medicine,
Dr Hallowell is a
child and adult
psychiatrist and
the founder of The

Hallowell Center for Cognitive and Emotional Health in Boston MetroWest, New York City, San Francisco and Seattle. He was a member of the faculty of the Harvard Medical School from 1983 to 2004 until he retired to devote his full professional attention to his clinical practice, lectures, and the writing of books. Dr Hallowell is a prolific speaker on topics relating to ADHD and has written numerous books including *Driven to Distraction*.

www.drhallowell.com

Many of the modern models of adhd miss the positives

ADHD symptoms can be turned on their heads to reveal their light side as well as dark:

Distractibility = CURIOSITY

ADHDers are highly curious – we are held back by nothing, in trouble one minute but making life changing discoveries like Penicillin the next.

Impulsivity = CREATIVITY

Creativity is impulsivity gone right!

Hyperactive = GREAT ENERGY

Existing models encourage us to see this only as a bad thing but, of course, it can be a highly desirable attribute in many professions.

Distractibility = HYPERFOCUS

People with ADHD can be easily bored by things that hold no interest for them but the flip side of this is incredible hyper focus when something is interesting



Objective markers for ADHD diagnosis

Children and adults with ADHD have special brains. It can be a struggle, but ADHDers are neurodiverse individuals with a unique outlook on life and the ability to change the world.

RADITIONALLY, our understanding of neurodiversity (differences in the way our brains develop and process the world) has been based on observation and subjective assessment of behavioural symptoms in multiple settings only once they are severe enough to be noticed.

This has taken ADHD diagnosis and support a long way. Research from groups around the world is now also building widespread knowledge and understanding that ADHD brains are structurally and functionally different from non-ADHD brains and do not develop and operate in the same way.

OBJECTIVE MEASURES HELP SHOW THAT ADHD IS REAL

■ Objectives measures which are not reliant on the severity of symptoms could offer the chance for earlier diagnosis and treatment of ADHD before behavioural symptoms become bad enough to be identified and diagnosed by current methods. Bringing greater objectivity to ADHD diagnosis could also increase acceptance and understanding of ADHD as a genuine neurobiological condition.

PHYSICAL DIFFERENCES LINKED TO ADHD

New technologies are emerging that allow scientists to see and measure these differences.

Many of these technologies are still in their early stages, and as yet there are no tests validated for mainstream ADHD diagnosis, but it is hoped that one day these technologies could provide an objective means to diagnose ADHD. In the last issue of ADHDnews, we reported on research by Radboud University in the Netherlands which measured and showed clear differences in the brain structure of ADHD vs non-ADHD individuals ("ADHD is a brain disorder, not a label for poor parenting, says scientists", ADHDnews issue 37).

Another example is the Braingaze method, which uses eye tracking technology to capture tiny eye movements that differ in ADHD vs non-ADHD individuals (www.braingaze.com)

THE SCIENCE BEHIND BRAINGAZE

When we focus hard on a task, our eyes make very small, very quick movements (called cognitive vergence). These eye movements are too small for us to see un-aided, but they can be tracked with specialised equipment and computer software.

These eye movements correspond to what the brain is doing – the harder we concentrate, the stronger this eye movement becomes. When a person is not concentrating, there is little or no eye

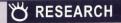


movement, and so cognitive vergence is a way to physically measure a person's concentration profile over a set time.

These very specific eye movements are controlled by an area of the brain closely associated with ADHD and the pattern of eye movements is different in ADHD compared to non-ADHD.

In studies where children both with and without ADHD are given a simple task to focus on, there is strong eye movement in children without ADHD, but not in children diagnosed with ADHD.

The Braingaze method is a 10-minute assessment set up like a computer game, to help with diagnosing ADHD in 7-14-year-old children. The Braingaze developers, neuropsychologists Professor Hans Super and his colleagues, have produced very good results discriminating ADHD specifically and work is now being done to replicate results in larger groups, and to trial it to discern other neurodevelopmental conditions such as autism.





Can stimulant medication help children with ADHD Stop, Look and Listen?

A study carried out by researchers at the Universities of Strathclyde and Dundee provides new insights into the effects of stimulant medication on the pedestrian behaviour of children with ADHD.

By Dr Sinéad Rhodes, Deputy Director of the Salvesen Mindroom Centre, University of Edinburgh

N THE WINTER 2016 Issue of the ADDISS newsletter (ADHDnews issue 36), a group of researchers from the Universities of Strathclyde and Dundee reported on findings from a recently completed study of pedestrian behaviour in 61 children with ADHD.

The bottom line of that report was that children with ADHD show considerable difficulties when crossing the road. Children with ADHD make a number of mistakes that put them at risk. These included difficulties in 1) planning a safe route across the road, 2) identifying gaps between cars in a flow of traffic that were large enough to cross, and 3) making predictions about what other road users intend to do and what actions they plan to make. We identified the difficulties children

with ADHD had at the roadside by testing them at the initial time of their diagnosis before they had been prescribed medication. Approximately 14 months later we invited the children to take part in a second testing session which occurred around 7 months after they had begun treatment with stimulant medication. 31 of the 61 children with ADHD we had originally tested were able to take part in this second testing session while on their medication on this occasion. We also tested 31 of the 61 typically developing children at the same time point so that we could analyse what differences arose from development as opposed to the effects of the medication itself. Like the first testing session, all children completed computer tasks assessing three pedestrian skills: safe place finding, visual timing, and driver's intentions. They also completed tasks of memory and impulse control so that we could attempt to identify the reasons underlying any improvement in their pedestrian skills.

Stimulant medication improved most but not all aspects of impaired pedestrian skills. On some pedestrian tasks children with ADHD now performed at the same level as typically developing children despite having shown significant difficulties with the tasks when off medication. Medication improved their performance in relation to safe place finding and predicting drivers' intentions, raising it to the level of the typically developing comparison group. It was these pedestrian skills that we had already shown were linked with inhibition and short term delayed memory, when the children had been previously tested off medication. Now tested after going onto treatment, we found that the medication improved performance on the impulse control and short-term memory tasks suggesting that the improvements in pedestrian behavior on medication may be at least in part due to improvements in memory and impulse control.

We also found that medication improved some but not all aspects of performance of the third pedestrian skill we studied - gap timing. Medication improved the size of gaps children with ADHD chose in a flow of traffic that they were willing to cross through and they made fewer tight fits. Children with ADHD however continued to underestimate the time needed to complete a crossing compared with control children when on medication. Overall then treatment with medication had a wide variety of positive impacts on pedestrian behaviour and cognitive function leaving just some aspects of gap timing estimation still impaired.

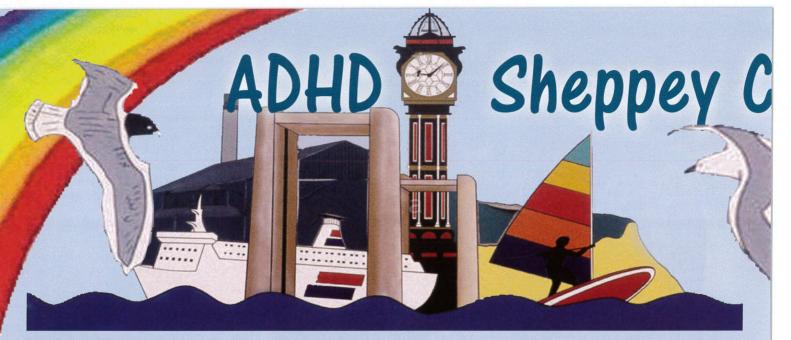
BOTTOM LINE

We had already shown that drug naïve children with ADHD were at risk of making a range of mistakes at the roadside including difficulties with planning a safe route across the road, identifying gaps between cars in a flow of traffic that were large enough to cross, and making predictions about what other road users intend to do and what actions they plan to make. Treatment with stimulant medication improved aspects of all of these three types of pedestrian skill and had a significant positive effect on memory and impulse control. No negative effects of medication on pedestrian skills or cognition were observed. The positive effects of stimulant medication on pedestrian skills are likely to arise, at least in part, from improvements in memory and impulse control that were also observed with medication

THIS STUDY WAS CARRIED OUT BY:

Dr Martin Toye • Prof Jimmie Thomson

Professor David Coghill • Dr Sinéad Rhodes





Beverley Nolker

For just over five years I have facilitated the ADHD Sheppey Support Group on

the Isle of Sheppey in Kent.

We provide support, and both accredited and non-accredited training for parents, carers and individuals affected by ADHD. We meet on a weekly basis and organise a monthly adult ADHD support group and a bi-weekly upcycling art workshop which provides a safe, social environment for creative ADHD'ers!

After attending many ADDISS conferences, I knew that the Isle of Sheppey needed a taste of the magic which Andrea Bilbow manages to bring to her events.

That small nugget of an idea came to fruition when, in 2016, Andrea Bilbow, Kevin Roberts, Jerry Mills and Marko Ferek came to the Island to share their experiences of ADHD and we held our first ADHD Sheppey conference.

I had seen them all talk on many occasions and each time they had been able to enlighten, inspire and motivate me to learn and understand more. As expected, that first ADHD Sheppey conference in 2016 was a huge success. There was singing and dancing and, I must say, many delegates had not experienced a conference This year the Island wanted more!"

ON 15TH MARCH 2017, we held our second conference which was even more successful than the previous event. Over 130 delegates attended from various backgrounds - teachers, parents, carers, prison staff and local health professionals.



JERRY MILLS

a singer-songwriter from the United States gave an emotive talk on how ADHD had affected his life and how he overcame many challenges to become the motivational

speaker he is today. The response was overwhelming, especially about Jerry's songs and stories. One delegate commented, 'I felt like weeping during Jerry's talk – for the child in me who was consistently misunderstood and unsupported.' Many people resonated with the struggles he had experienced and were touched by his ability to communicate that through his music.



onference 2017



DR PHILIP ASHERSON

Professor of Molecular Psychiatry at the MRC Social, Genetic and Developmental Psychiatry Centre, King's College, London and

consultant psychiatrist at the Maudsley Hospital, spoke about emotional symptoms and mind wandering in ADHD. He was able to convey insights into ADHD which delegates had not previously considered. Feedback from his talk was life-affirming, 'Hearing Professor Asherson speak has helped me understand my son more and how to support him.'; another said; 'Understanding the underlying elements of ADHD has been extremely beneficial, rather than focusing on the behaviours.'

There was a lot of excitement and anticipation for our next speaker,



DR LORETTA GIORCELLI.

Many of the teaching professionals in the lecture theatre had heard about her whilst conducting their professional training, so being able to hear her speak in person

was a rare treat. Dr Loretta Giorcelli trained as a primary/special education teacher in Queensland, Australia in the late 1960s and shared her knowledge and experience of special educational needs from primary through to secondary school education. Loretta also discussed the strategies which can be implemented to create a healthier more balanced home life. One attendee said, 'I've learnt about ways to help build resilience at home with regards to ADHD –



KERRY MILES and EMMA HARVEY

from the
Information,
Advice and Support
Service in Kent
(IASK) shared their
vast knowledge
of navigating

the education system for young people with special educational needs. Since the conference has taken place, many families have contacted me to say they have contacted IASK for support and how valuable it has been. Some attendees had not been aware of the services IASK offered and said

that 'One of the most valuable things I learnt from the conference was the service that IASK offers. It was really helpful to hear other people's points of view and problems they had experienced.



MARKO FEREK



schools, universities, hospitals and at many conferences around the world. Marko shared the innovative research which he carried out in Croatia last year and articulated his own, personal story of growing up in a school system which did not cater for children with ADHD. Many parents and carers as well as professionals resonated with Marko's story. Feedback from his talk was overwhelming,

understanding of ADHD.' 'Marko's personal story was moving and really touched me. I work in a school and will strive to make positive changes for the children in my care, particularly the ones that have ADHD.

Our final, and eagerly anticipated, speaker was the wonderful Andrea Bilbow. She delivered an effortless presentation on the 1-2-3 Magic course which had been devised by Dr Thomas Phelan. Many of the parents, carers and school staff found this introduction to 1-2-3 Magic beneficial and have since asked to attend a structured training program. One parent said, 'I was really looking forward to hearing about the 1-2-3 Magic model. I had heard of the concept from friends but Andrea explained how it works in a really clear and concise way. I can't wait to do the course and put it into action!'

Other feedback from the conference included:

Grank you for this conference and for giving ADHD the importance it deserves. Also, for breaking the isolation I feel as a parent, which is a world away from my experience is a professional.

The most valuable part of the conference was listening to presentations from people who are living with ADHD, who have a real understanding.

Interesting and wonderful speakers. I'm so glad there is more awareness growing to include children to achieve their full potential.

I cannot thank Andrea Bilbow enough for the work that she and ADDISS do to help raise awareness for ADHD.

The conferences are so empowering and life-affirming. They help to raise awareness and improve outcomes for people affected by ADHD.



UKAAN

UK ADULT ADHD NETWORK

UKAAN WAS FOUNDED in March 2009 by a group of mental health specialists who run clinical services for adults with ADHD within the NHS.

▶ The network was established in response to UK guidelines from the National Institute of Health and Clinical Excellence and the British Association for Psychopharmacology, which for the first time gave evidence-based guidance on the need to diagnose and treat ADHD in adults as well as in children; and in response to the relative lack of training and support in this area for professionals working within adult mental health services.

UKAAN objectives include the provision of expert training and further development of the training programme, the provision of a supportive forum for membership of healthcare and allied professionals, to develop a research network to increase the evidence base for effective treatments and to develop interactive online tools and apps for users.

UKAAN has achieved many great things for the adult ADHD community in the UK since it began. It has published papers on adult ADHD, including consensus statements, to raise awareness and standards of care and diagnosis of adult ADHD; it has also published 'The handbook of Attention Deficit Hyperactive disorder in Adults'.

UKAAN provides support, education, research & training for mental health professionals working with adults with ADHD

Last year, UKAAN set up a regional hub network with the aim of setting up local networks for clinicians actively involved in the diagnosis and treatment of adult ADHD, to support them and the associated services in the region, whilst supporting and promoting the activities of UKAAN and stimulating new training events at the same time.

UKAAN runs training courses for mental health professional for the assessment, diagnosis and treatment of adults with ADHD; these courses continue to be over-subscribed, reflecting the continued and growing recognition of the need for adult mental health professionals to be trained in the diagnosis and treatment of ADHD.

Every 18 months, UKAAN also holds an annual congress for mental health professionals to come together and learn from each other on how to serve the adult ADHD community

better. Last year's conference brought together leading experts on adult ADHD who presented state of the art research and best clinical practice on the diagnosis and treatment of ADHD across lifespan.

"ADHD is a common disorder affecting around 5% of children and 3% of adults, with symptoms and impairments that overlap with other common mental health disorders. The role that ADHD plays in the health of many adults presenting with mental health problems is now much more widely recognised, yet recent evidence suggests that in many cases the disorder still goes unrecognised or treated. Our vision is to bring ADHD into the mainstream, so that all mental health professionals have the knowledge and understanding to diagnose and treat ADHD, in the same way as other common mental health disorders



OCTOBER IS...

🖔 COMMUNITY

ADHD AWARENESS MONTH

Members of ADHD Europe voted at this years AGM to make the theme:

ADHD in Women and Girls!

Contact ADDISS if you would like to find out more about events or if you would like to host one yourself!

ADHDnews is here to spread the word about what's going on in the ADHD community!

We invite individuals & groups to share your ADHD-related articles/event details/stories/research/reviews, etc. Please send any interesting/informative/inspiring/ or humourous content to: **ADHDnews@ADDISS.co.uk**