

What is ADHD?

Information for parents

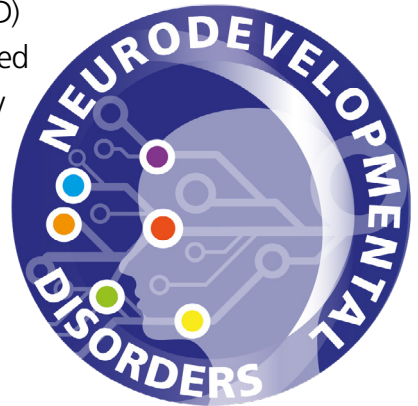


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Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental disorder and is defined by NICE as a pattern of inattention, impulsivity and/ or hyperactivity that is persistent and interferes with functioning or development. Symptoms will:



- start before age 12
- occur in more than one setting
- be present for at least 6 months
- significantly impact on social and academic performance
- not be linked to another mental disorder/ diagnosis



Inattention

You may observe your child experiencing difficulty:

- Remaining on task, does not pay close attention to detail
- Being easily distracted/ loses focus, doesn't appear to listen when spoken to
- Being disorganised, losing or forgetting things
- Avoids activities that need sustained concentration/ mental effort.

Hyperactivity

You may observe your child to be:

- Excessively active
- Unable to sit still, fidgeting or squirming in their seat
- Getting up in class and walking around when remaining seated is expected
- Running or climbing more than other children
- Talking excessively, making noises or tapping, inability to play quietly.



Impulsivity

Your child may:

- Have limited awareness of danger, they may do things that put them at risk such as running out in to the road without looking
- Not think about the consequences of their actions, they may say or do something that gets them in to trouble or puts them in danger
- Shout out (rather than put their hand up), talk over or interrupt others
- Start arguments or fights
- Teenagers may engage in risky activities such as drinking alcohol, smoking cannabis or having underage/ unprotected sex.

What causes ADHD?

- Certain areas of the brain (including the frontal lobe, basal ganglia and cerebellum) play a significant role in ADHD as these areas of the brain are involved in complex processes that regulate behaviour. These processes are called executive functions and include regulation



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of inhibition, working memory, planning, self-monitoring, verbal regulation, motor control and emotional regulation. According to the National Institute for Mental Health the brain matures in a normal pattern in children with ADHD, however there is a delay of 2 to 3 years compared with other children their age without ADHD

- Fewer chemicals (noradrenaline and dopamine) in the nerve endings of the frontal lobe of the brain to carry messages to other parts of the brain and around the body
- Exposure of the foetus during pregnancy to toxic substances such as alcohol, tobacco or illicit substances
- Heredity – ADHD can be passed on genetically, more than one generation of the same family can have a diagnosis
- Low birth weight
- Being born prematurely (before 37 weeks gestation)
- Brain trauma – in the womb or during the first few years of life

What does NOT cause ADHD?

- Diet – it was previously believed that ADHD could be caused by allergies or sensitivities to food, however research carried out over 20 years has not supported this belief.
- Social, cultural or environmental factors – ADHD does not discriminate and affects children from all backgrounds

ADHD facts and figures:

- Approximately 2.4% of the child population has a diagnosis of ADHD
- ADHD is more commonly diagnosed in boys than girls, ratio is approximately 4:1
- Approximately 15% of children retain their diagnosis of ADHD in to adulthood. There appears to be a lack of research and this is the result from only one study so is by no means conclusive

ADHD and other difficulties

It is not unusual for children and young people with ADHD to have other difficulties and your child may already have other diagnoses.

There are also other things such as attachment difficulties or severe lack of sleep that can present as similar to ADHD. Other potential reasons for your child's symptoms are considered during the assessment for ADHD and prior to diagnosis.

If you would like this in large print, braille or on audiotape or would like this document in an alternative language, please contact the Patient Advice and Liaison Service on 0800 015 4334.

Amharic

ይህንን ጽሑፍ በግልጽ እንዲታይዎ በትልቁ፣ በብሬል ተጽፎ ወይም በቱፕ ተቀጥቶ ወይም በሌላ ቋንቋ ተጽፎ ለሌሎች የሚፈልጉ ከሆነ የሰበከተኞች ምክርና ግንኙነት አገልግሎትን በዚህ ቁጥር 0800 015 4334 ደውሎ ያነጋግሩ።

Arabic

إذا أردت الحصول على هذه الوثيقة بالخط الكبير أو بلغة برايل أو على هيئة شريط صوتي أو مترجمة إلى لغة بديلة فيرجى الاتصال بخدمة التنسيق ونصيحة المريض Patient Advice and Liaison Service على رقم الهاتف 0800 015 4334 .

Bengali

আপনি যদি এটা বড় অক্ষরের ছাপায়, ব্রেইল-এ, বা কানে শোনার টেইপ-এ পেতে চান অথবা আপনি যদি এই কাগজটা অন্য কোন ভাষায় পেতে চান, তাহলে দয়া করে 0800 015 4334 নম্বরে পেশেন্ট এ্যাড্‌ভাইস এন্ড লিয়েজঁ সার্ভিসের সাথে যোগাযোগ করবেন।

Cantonese (traditional Chinese)

如果你希望本文件是采用大字印刷、盲文或录音磁带等格式，或者希望本文件是使用其它的语言，请联络病患建议与联络服务 (Patient Advice and Liaison Service)，电话号码：0800 015 4334。

Czech

Pokud byste chtěli dokument psaný většími písmeny, brailovým písmem nebo na zvukové kazetě nebo v jiném jazyku, prosím, kontaktujte poradenskou službu pacientům na tel. 0800 015 4334.

Farsi

در صورت تمایل به داشتن این سند به نسخه ای با چاپ درشت تر، به خط بریل یا نسخه صوتی، و یا به زبانی دیگر، لطفاً با دفتر خدمات مشاوره و هماهنگی بیماران به شماره تلفن ۰۸۰۰۰۱۵۴۳۳ تماس حاصل نمایید.

French

Si vous désirez ce document en gros caractères, en braille, enregistré sur cassette audio ou dans une autre langue, veuillez contacter le service de conseils et liaison des patients [Patients Advice and Liaison Service] au 0800 015 4334.

Kurdish Sorani

هه‌نگه‌ر نهم زانیاریانه به چایی گهواره، برائیل یان لاسه‌ر شریقی دهنگی دهخوازیت باخود نهم به‌لگه‌نامابه دیکه دهخوازیت، تکلیه په‌موندی بکه به‌خزمه‌گوزاری زینمایی و هاوناهه‌نگی نه‌خوشه‌وه به‌ژماره 0800 015 4334.

Polish

Jeżeli dokument wymagany jest w wersji drukowanej dużą czcionką lub alfabetem Braille'a, na kasecie audio lub w innym języku, prosimy o kontakt z zespołem ds. kontaktów z pacjentami (Patient Advice and Liaison Service) pod numerem telefonu 0800 015 4334.

Punjabi

ਜੇ ਤੁਸੀਂ ਇਸ ਨੂੰ ਵੱਡੀ ਛਪਾਈ, ਬ੍ਰੇਲ ਜਾਂ ਸੁਣਨ ਵਾਲੀ ਟੇਪ ਤੇ ਚੱਟੇ ਵੇ ਜਾਂ ਇਸ ਸਮਰਾਥਨ ਨੂੰ ਹੋਰ ਭਾਸ਼ਾ ਵਿੱਚ ਚੱਟੇ ਵੇ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਮਰੀਜ਼ ਸਲਾਹ ਅਤੇ ਤਾਲ-ਮੇਲ ਸੇਵਾ (Patient Advice and Liaison Service) ਨਾਲ 0800 015 4334 ਤੇ ਸੰਪਰਕ ਕਰੋ।

Somali

Haddii aad jeclaan lahayd in aad kan ku hesho far waaweyn, farta braille ee dadka indhaha la' ama cajalad dhegeysi ah ama haddii aad jeclaan lahayd in aad dukumeentan ku hesho luqad kale, fadlan Adeegga Talobixinta iyo Xiriirinta ee Bukaanleyda (Patient Advice and Liaison Service) kala soo xiriir lambarka 0800 015 4334.

Turkish

Bu belgeyi büyük yazı, braille (kör alfabesi) veya ses kaydı olarak veya başka bir dilde almak istiyorsanız, lütfen 0800 015 4334 no.lu telefondan Hasta Danışmanlık ve İrtibat Hizmetleri ile bağlantıya geçiniz.

Urdu

اگر آپ یہ بڑی چھپائی، بریل میں یا صوتی ٹیپ پر حاصل کرنا چاہیں یا یہ دستاویز کسی متبادل زبان میں چاہیں تو براۓ کرم پیشاپیش ایڈوائس اینڈ لیاؤن سروس سے 0800 015 4334 پر رابطہ کریں۔

Vietnamese

Nếu muốn có tài liệu này dưới dạng in chữ cỡ lớn hơn, chữ nổi braille hay bằng ghi âm, hoặc bằng một ngôn ngữ khác, xin quý vị liên hệ bộ phận Dịch vụ Tư vấn và Liên lạc với Bệnh nhân theo số 0800 015 4334.

This information is correct at the time of publishing
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