

What Adults Need to Know—Before and After an ADHD Diagnosis

by Cynthia Hammer, MSW

DECIDING TO SEEK A DIAGNOSIS FOR ADHD IS FRAUGHT WITH EMOTIONS

Scenario one: You think you might have ADHD, but worry you're wrong and fear being told, "You don't have ADHD." You are not alone in this worry. Sadly, it is true, adults are told they don't have ADHD even when they do because not enough physicians are familiar with how ADHD presents in adults.

Sometimes, an adult was diagnosed with ADHD in childhood, but never sought treatment or stopped their treatment. When their lives spiral out of control, they finally want treatment for their ADHD. But even with a record of their childhood diagnosis, they may still encounter scenario one.

Scenario two: You think you have ADHD and fear having it confirmed. You would rather have personality quirks than a disorder. The stigma, falsely attached to ADHD, affects your willingness to be diagnosed. You fear a diagnosis because you don't realize how life-changing, in a good way, diagnosis and treatment will be. With diagnosis and treatment, life gets better.

I was told by a psychologist experienced in diagnosing adults with ADHD that adults who think they have ADHD are usually correct. However, to ease your mind in advance and provide yourself with concrete information to share with your clinician, print out and complete the ADHD-RS <https://add.org/wp-content/uploads/2015/03/adhd-questionnaire-ASRS111.pdf> The maximum score is 54 but the average range for someone with ADHD is between 30-40.

Another good source is the DIVA 5, a structured interview for adult ADHD that is valid and reliable for diagnosing adult ADHD. <https://www.divacenter.eu/DIVA.aspx?id=528> The website states it is for clinicians trained in its use, but I easily understood it and completed it. It costs about \$10 to download and takes 60-90 minutes to complete. Its detail will teach you the manifestations of ADHD, whether the inattentive or hyperactive/impulsive presentation.

WHY BELIEVE YOU HAVE ADHD BEFORE SEEKING A DIAGNOSIS

REASON ONE

If the physician you see is reluctant to prescribe a **long-acting amphetamine** which is the usual treatment of adult ADHD, you can advocate for the correct treatment. Here are the medications and doses your physician should prescribe after diagnosing your ADHD unless he provides a good reason for not doing so.

Drug	Strength
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Adderall XR	5 mg, 10 mg, 15 mg, 20mg, 25 mg
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Vyvanse	20 mg, 30 mg, 40 mg, 50 mg, 60 mg,
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*Focalin XR is also an amphetamine, but contains only one amphetamine salt, dexamethylphenidate, while Adderall and Vyvanse contain four kinds of amphetamine salts.

Typically, you would start at a low dose and slowly increase it every few days. You can track your improvements by completing the ASRS111 or DIVA5 again and again. A good response would be getting your ASRS score below 18 or a DIVA 5 with fewer checkmarks. Side effects to the medication should resolve within a month, but if not, you should next try a **long-acting methylphenidate** medication.

Drug Strength

Concerta 18 mg, 27 mg, 36 mg, 54 mg

Daytrana 10 mg, 15 mg, 20 mg, 30 mg, 40 mg

Ritalin LA 10 mg, 20 mg, 30 mg, 40 mg

From research, we know that stimulants are the most effective treatment for ADHD. It might take several months to find the right medication or the right combination of medications at the right dose for you. There are over 30 medications used to treat ADHD. The two tables list the most popular ones.

Medication dose does not rely on your age, weight, or severity of the condition. What works for one person won't necessarily be what works for you. ADHD is very individual in its presentation and treatment. To get a general feel for how people respond to various medications, read reviews at <https://www.webmd.com/drugs/2/index> Only after failing with both kinds of stimulant medications should you be prescribed Strattera, a non-stimulant medication for the treatment of ADHD unless the physician can explain why he is prescribing something else for you.

REASON TWO

The longer you went with untreated ADHD, the more likely you are to have co-morbid depression and/or anxiety. If the physician diagnoses depression along with your ADHD, he might want to treat the depression first. About 25% of adults with untreated ADHD have depression. Treatment is more effective if both, not just the depression, get treated together. If you have anxiety, which almost 50% of adults with untreated ADHD report having, treatment of your ADHD may reduce your anxiety, then you won't need a separate medication for your anxiety. But if you do, your anxiety should be treated only after seeing how much it resolves with the ADHD medication.

REASON THREE

The physician will not diagnose your ADHD and has bizarre explanations for why he or she won't. The most common, and incorrect, explanation is that you are too smart; you did well in school; you graduated from college. Other times the physician believes you have ADHD but won't prescribe a stimulant because he fears you are drug-seeking. While some people with undiagnosed ADHD have histories of substance abuse, this shouldn't prevent a physician from prescribing stimulant medication. The physician can supervise its use. Even people in a drug treatment program have fewer relapses when their ADHD is treated. If you encounter either of these responses, know that you have seen a physician not knowledgeable about ADHD. You need to find another physician to diagnose and treat you.

If you get evaluated by a physician who doesn't follow the latest research on diagnosing and treating adult ADHD, getting help for your troubled life help can be delayed for years. This is why it is important to work with a knowledgeable clinician. You might find a psychologist to diagnose your ADHD and a physician to treat it, or a physician who both diagnoses and treats you. In either scenario, you want knowledgeable providers who have evaluated and/or treated many adults with ADHD.

How will you find knowledgeable clinicians? Search online ADHD directories, such as <https://chadd.org/professional-directory/> ; <https://directory.additudemag.com/> and <https://add.org/professional-directory/> but realize providers pay for their listings. Do further research by visiting the websites of possible candidates and reading online reviews by former patients. If you can't locate an experienced provider near you, find a provider that diagnoses and treats adult ADHD remotely via telemed.

Here are some telemed sources:

cererebral.com

donefirst.com ;

www.circlemedical.com ;

www.adhdonline.com

www.helloahead.com

www.norcaladhd.com

www.lamwell.com

Here are questions for evaluating telemed resources for ADHD.

- Can you diagnose and treat ADHD in adults?
- Can you prescribe stimulants or only non-stimulant medications?
- Are you approved to provide service in the state where I reside?
- What insurance companies cover your services? What percentage of the charges do they pay?
- Do you bill insurance or am I expected to?
- How much does an evaluation cost? What are the costs of follow-up appointments?

When you go for an evaluation, bring someone with you who has known you for a while. People with ADHD typically have poor memories, especially of their childhood.

AFTER YOUR DIAGNOSIS

1. Stay the course. Don't give up on finding a medication that helps you. Too many get discouraged and don't persist when the first medication doesn't help. Don't let alternate treatments, which research has

not shown to be effective, tempt you. Persistence usually pays off as over 80% of people with ADHD are helped by medication. Because, online I often see people asking one another about what medicine they take or which ones didn't help them, I remind you, a medication and dose that is effective for one person with ADHD may not be the right medication for you.

2. Get educated about ADHD from reliable sources, such as the websites of CHADD, ADDA, the Inattentive ADHD Coalition, and ADDitude Magazine. Read recommended books, watch videos by Russell Barkley, Ph.D., and Jessica McCabe, and participate in webinars featuring noted ADHD providers and researchers.

3. Focus on creating good habits: eight hours of sleep each night, one hour of exercise at least three times a week, nutritious meals in moderate amounts, along with mindfulness training to reduce your stress.

4. Seek support and guidance from others with ADHD. There are several ADHD groups on Facebook and Reddit where people share their experiences.

5. Consider adding individual coaching or cognitive behavioral therapy to the mix if you struggle to implement new behaviors, continue to feel overwhelmed or feel you aren't making progress. The ADHD Coaches Association has a directory of coaches, (<https://www.adhdcoaches.org/find-your-coach>) while Psychology Today lists therapists. (<https://www.psychologytoday.com/us/therapists>). Select the location, then use the filters to choose ADHD under Issues and ADHD and CBT for Type of Therapy. Most coaches work via zoom but therapists generally see clients in person. However, some offer both or have totally transitioned to zoom calls. Here is a list of online therapists <https://www.verywellmind.com/best-online-therapy-4691206> .

Note: The medical information in this article was obtained from two excellent webinars produced to educate family physicians about ADHD but available for anyone to watch.

<https://www.naceonline.com/courses/diagnosis-and-pharmacotherapy-of-adhd-and-comorbid-anxiety-and-depression-in-children-and-adolescents> with Dr. Greg Mattingly (webinar available until July 2022)

<https://www.youtube.com/watch?v=6fLiiCrNdXs> Overcoming the Challenges in the Recognition and Management of Adult ADHD in Managed Care with Dr. Leonard Adler and Dr. Oren Mason (webinar available until December 22, 2022)

Addendum: Dr. Oren Mason, a family physician who specializes in treating ADHD and related disorder advises physicians to screen for ADHD when a patient presents with any of the following problems:

Clinical

- Depression, bipolar
- Anxiety, OCD, PTSD
- Poor SSRI response

- Alcoholism or alcohol abuse
- Substance abuse
- Nicotine addiction
- Multiple serious injuries
- 2 or more STD's
- Crisis pregnancy
- Medical non-compliance

Social

- Pattern of unstable relationships
- Few friends
- Poor social support network
- School disciplinary problems
- Divorce
- Marital discord
- Unresolved marital issues
- Job loss and underemployment
- Frequent job change
- Arrest or incarceration

Self-Management

- Late for appointments
- Educational under-performance or curtailment
- Multiple MVA's/moving violations
- Impulsive shopping
- Burdensome debts
- Credit overextension
- Financial mismanagement

*The information in this article is not intended to be medical advice. It is the opinions of an educated person ADHD.