

News

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Refer to: Lucy Whitehead, Cohn & Wolfe, +44 (0) 20 7331 5315
Angela Conoley, Cohn & Wolfe, +44 (0) 20 7331 5320

ADHD impacts entire family; parents urge for faster diagnosis Average wait of two years to diagnose one of the most common childhood disorders

BERLIN - New findings from an international survey of parents, presented today in Berlin, highlight an urgent need for improved diagnosis and greater support for the families of children with Attention Deficit Hyperactivity Disorder (ADHD). The survey, spearheaded by the World Federation for Mental Health (WFMH) in partnership with Eli Lilly and Company, reveals that the length of time to ADHD diagnosis by a health professional can differ widely from region to region. While in the US the average time to diagnosis is one year, in Italy, parents wait an average of just over three years to obtain a correct diagnosis for their child.

Dr. Russell Barkley, Professor of Psychiatry at the Medical University of South Carolina, US, who helped to design the survey, commented: "Two years to diagnosis is far too long to wait when you consider the speed at which children develop mentally and emotionally. With greater general awareness of the disorder we hope that physicians will be able to more quickly refer patients to specialists if ADHD is suspected, so that an appropriate diagnosis and management plan can be established."

Independent market research company Ipsos conducted the survey of 760 parents of children and adolescents with ADHD in eight countries.

Results of the survey also reveal that 63% of parents feel that their family doctors do not know enough about the disorder, with more than 31% of the families reporting difficulties securing a referral to a specialist able to diagnose ADHD.

ADHD is one of the most common disorders of childhood and adolescence, affecting 3-7% of school-aged children.¹ The disorder is characterised by hyperactive or impulsive behaviours and problems with attention that are not in keeping with the child's intellectual ability or stage of development.¹ Mental health experts now believe that these symptoms arise from a more serious impairment in the development of self-control, and that the disorder largely arises from neurological and genetic factors.

Parents and siblings are also adversely affected by the problems associated with ADHD. Almost all parents surveyed (91%) reported that they often feel stressed or worried by their child's ADHD, with 63% reporting that family activities are disturbed by their child's behaviour. More than half (53%) of parents stated that their child has been excluded from social activities, with 86% expressing concern that ADHD will threaten their child's academic success.

Once ADHD has been diagnosed correctly, it is essential that the child is able to receive effective therapy to treat the disorder. This can include a combination of approaches, including medication, behavioural and psychological treatment/therapies, along with educational accommodations. Parents reported that they find treatment improves concentration at school (86%), helps their child to better interact socially (76%) and relieves pressure on the family (81%). An overwhelming 92% of parents agreed that children should be given the opportunity to receive medication for ADHD, if that is the parent's choice.

However, even with treatment, many parents still find it difficult to cope with their child's ADHD symptoms throughout the day. Only 44% of parents currently feel that their child is receiving treatment that effectively controls symptoms throughout the day. Early morning before school, after school hours and evening time are highlighted as particularly difficult by 77%, 82% and 75% of parents, respectively.

"While ADHD can cause difficulties at school, these findings demonstrate that home life and other family members are often also negatively impacted," said Dr. Barkley. "Positive social interactions with family and peers are keys to social effectiveness and

strong self esteem. Parents and their physicians should work together to ensure that ADHD symptoms throughout the day are also addressed."

"When parents are actively involved in their child's health care, it benefits both the child and the health of the entire family," said Preston Garrison, Secretary General and Chief Executive Officer, WFMH. "I want to congratulate the parents involved in this survey for their steadfast dedication to improving their children's lives. I encourage other parents who feel their child may have ADHD to continue to talk to their doctors and to advocate for better care."

Data from each of the countries represented in the survey can be found at www.wfmh.org.

The World Federation for Mental Health is an international interdisciplinary membership organization whose goals are to heighten public awareness of mental health, gain understanding and improve attitudes about mental disorders, promote mental health and well-being, prevent mental, behavioural and emotional disorders, and improve the care and treatment of people affected by these disorders.

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Reference

¹American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders*, fourth edition. Washington, DC, American Psychiatric Association. 1994

Notes to editors

- 100 people were surveyed by telephone in each of the following countries: Australia, Germany, Italy, The Netherlands, Spain, UK and US. 60 people were surveyed in Mexico.
- The WFMH and Eli Lilly and Company wish to acknowledge and thank the support of the advocacy groups from around the world that assisted in the survey recruitment:

Australia

- **ADD Association, Queensland (ADDAQ)**
<http://www.addaq.org.au>
- **Learning and Attentional Disorders Society (LADS)**
<http://www.ladswa.com.au> Tel: +61 (0) 893 467 544
- **Learning Difficulties Coalition NSW**
<http://www.learningdifficultiescoalition.org.au>

Germany

- **Juvenus**
<http://www.juvenus.de> Tel: +49 (0) 2631 54641

- Italy
- **AIFA**
<http://www.aifa.it>
- Mexico
- **AMDAH**
<http://www.deficitdeatencion.org> Tel: + 52 5253 9190
- The Netherlands
- **Balans**
<http://www.balansdigitaal.nl> Tel: + 31 (0) 3022 55050
- Spain
- **ADANA Fundacion**
<http://www.f-adana.org> Tel: +34 93 241 19 79
 - **ANSHDA**
<http://www.anshda.org> Tel: +34 9135 60207
 - **APNADAH**
<http://www.tda-h.com/APNADAH.html> Tel: +34 6061 27 224
- UK
- **ADDISS**
<http://www.addiss.co.uk>
- USA
- **CHADD**
<http://www.chadd.org> or <http://www.help4adhd.org>