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EXPERT ROUNDTABLE SUPPLEMENT

BEST PRACTICES IN ADULT ADHD: SPECIAL CONSIDERATIONS

AUTHORS

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ABSTRACT

The treatment of adult attention-deficit/hyperactivity disorder (ADHD) is not without potential complications. Concerns exist regarding the cardiovascular safety of ADHD medications. The vulnerability of ADHD patients to cardiovascular problems may be unclear during diagnosis, and can require close attention by the physician before and during treatment. ADHD may be obscured by the presence of mimics, conditions responsible for symptoms or impairments that look like, and may be confused for, ADHD. Mimics can divert attention away from the real underlying disorder and can compel a physician to prescribe unnecessary treatment. There is also concern about the potential for diversion and misuse of ADHD medications. To avoid these possible complications, clinicians must screen patients for preexisting cardiovascular events and family history of cardiac dysfunction. The American Heart Association has recently published guidelines for cardiovascular monitoring for children and adolescents who are receiving psychostimulant therapy. To rule out the possibility of medical or psychiatric mimics, diagnosis must be thoughtful and thorough. Neuropsychiatric testing may help identify certain mimic conditions. Though it appears that rates of stimulant abuse are not higher among treated ADHD patients compared to the general population, physicians must be vigilant about the possibility of misuse among their patients.

In the final segment of a 3-part Expert Roundtable Supplement series on Best Practices in Adult ADHD, Lenard A. Adler, MD, offers an introduction to the special considerations in treating adult ADHD; Jeffrey H. Newcorn, MD, reviews issues in safety and cardiovascular risk for ADHD patients; Thomas J. Spencer, MD, reviews data on the diversion and misuse of stimulant medications; and Mark A. Stein, PhD, discusses conditions that mimic or present co-morbid with ADHD as well as neuropsychological testing.



MBL

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EXPERT ROUNDTABLE SUPPLEMENT

An expert panel review of clinical challenges in psychiatry

Accreditation Statement

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medicine physicians.

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The Mount Sinai School of Medicine designates this educational activity for a maximum of 2 *AMA PRA Category 1 Credit(s)*TM. Physicians should only claim credit commensurate with the extent of their participation in the activity.

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This activity has been peer reviewed and approved by James C.-Y. Chou, MD, associate professor of psychiatry at the Mount Sinai School of Medicine. Review Date: October 2, 2008.

Statement of Need and Purpose

There are numerous reasons to treat attention-deficit/hyperactivity disorder in adults, including to minimize impairment from core symptoms, to alter the course of co-morbid disorders, and to prevent deterioration. However, the treatment of adult ADHD is not without potential complications. While ADHD medications are generally considered to be safe, concerns exist regarding the cardiovascular safety of certain medications. The issue of sudden cardiac death is all the more important in adults treated with stimulants, as adults are generally thought to be more at risk for underlying cardiovascular illness, including hypertension, arrhythmia and cardiac ischemia. The vulnerability of ADHD patients to cardiovascular problems require close attention by the physician before and during treatment. Other considerations in the treatment of adult ADHD include the potential for abuse, misuse, or diversion of ADHD medications and the presence of medical or psychiatric conditions that mimic ADHD. The diagnosis of adult ADHD is predicated on certainty that the symptoms of inattention and/or hyperactivity-impulsivity are not better explained by another disorder. This requirement is often thought to focus on co-morbid mental health disorders, such as mood disorders or substance use disorders. However, several medical conditions, such as thyroid disorders, obesity, sleep disorders, and seizure disorders can also present with similar symptoms. It is important for clinicians to be educated on the latest methods and guidelines used to avoid such complications, such as appropriate screening for preexisting cardiovascular events and family history of cardiac dysfunction; thorough diagnoses to rule out medical or psychiatric mimics; and appropriate care and monitoring of patients at risk for abuse, misuse, or diversion of their medications.

Target Audience

This activity is designed to meet the educational needs of psychiatrists.

Learning Objectives

- Discuss the potential cardiovascular risks of ADHD treatments and appropriate screening methods to identify at-risk patients.
- Distinguish between abuse, misuse, and diversion of medications, and discuss how these problems pertain to patients with ADHD.
- Review the conditions that tend to simulate ADHD and methods of ruling out these conditions at the early stages of diagnosis.

Faculty Disclosures

Lenard A. Adler, MD, is a consultant to and on the advisory boards of Abbott, Cephalon, Cortex, Eli Lilly, Novartis, Ortho-McNeil/Janssen/Johnson and Johnson, Merck, New River, Organon, Pfizer, Psychogenics, sanofi-aventis, and Shire; is on the speaker's bureaus of Eli Lilly and Shire; and receives grant/research support from Abbott, Bristol-Myers Squibb, Cephalon, Cortex, Eli Lilly, Janssen, Johnson and Johnson, Merck, the National Institute of Drug Abuse, New River, Novartis, Ortho-McNeil, Pfizer, and Shire.

Jeffrey H. Newcorn, MD, is a consultant to Abbott, Biobehavioral Diagnostics, Eli Lilly, Lupin, Novartis, Ortho-McNeil, Psychogenics, sanofi-aventis, and Shire; and receives research support from Eli Lilly and Ortho-McNeil.

Thomas J. Spencer, MD, is a speaker for Eli Lilly, GlaxoSmithKline, Janssen, Novartis, Ortho-McNeil, and Shire; is on the advisory boards of Cephalon, Eli Lilly, GlaxoSmithKline, Janssen, Novartis, Ortho-McNeil, Pfizer, and Shire; and receives research support from Cephalon, Eli Lilly, GlaxoSmithKline, Janssen, the National Institute of Mental Health, Novartis, Ortho-McNeil, Pfizer, and Shire.

Mark A. Stein, PhD, is a consultant/advisor to Abbott, Novartis, and Pfizer; is a speaker for Novartis and Ortho-McNeil; and receives research support from Eli Lilly, the National Institute of Mental Health, Novartis, Organon, Ortho-McNeil, and Pfizer.

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Peer Reviewer

James C.-Y. Chou, MD, has received honoraria from AstraZeneca, Bristol-Myers Squibb, Eli Lilly, Janssen, and Pfizer.

To Receive Credit for this Activity

Read this Expert Roundtable Supplement, reflect on the information presented, and complete the CME posttest and evaluation on pages 19 and 20. To obtain credit, you should score 70% or better. Early submission of this posttest is encouraged. Please submit this posttest by October 1, 2010 to be eligible for credit.

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A related audio CME PsychCast™ will also be available online in November 2008 at: cmepsychcast.mblcommunications.com and via iTunes.

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