



WHAT ARE THE SYMPTOMS OF ADHD IN ADULTS?

Adult Attention Deficit Hypersensitivity Disorder (ADHD) is a neurobiological condition of adults. Approximately, one to two third of children with the symptoms at an early age continue to show the notable ADHD symptoms throughout in the whole life. These symptoms include impulsivity, distractibility and restlessness, which impair the one's executive functions (approaching to tasks and management of memory) causing the significant and persistent impairment among different areas of life. The diagnosis includes the examination of a personal history, clinical assessments and the observational evidence from family members and school records as well as neurological tests. The successful treatment of conditions is based on the combination of a cognitive behavioral therapy, medication and coaching and training.

UNDERSTANDING THE DIAGNOSIS OF ADHD. Health care providers, such as child psychologists and pediatricians, can diagnose

ADHD through the help of standard guidelines from the American Academy of Pediatrics. The diagnosis involves the collection of information from various sources, including caregivers, schools and parents. They consider the manner in which the child's behavior compares to that of a normal child of the similar age. Some of symptoms they consider while inspecting the child's behavior include fidgeting with hands or feet feeling restless or squirming while seated; climbing, running, or leaving a seat in the situations where the quiet or sitting behavior is expected; blurting out responses before getting the whole question; intruding or interrupting on others; having a difficulty in taking turns, waiting in line or enjoying leisure activities quietly; and adults or adolescents feel restless or talk excessively.

CAUSES OF ADHD IN ADULTS. The current research shows that the frontal lobe, caudate nucleus, basal ganglia and cerebellum play a key role in causing ADHD. This is because the above mentioned areas are engaged into complex behavior regulating processes often known functions that are executive by nature, and they include working memory, inhibition, self-monitoring, planning, verbal and emotional regulation and motor control. ADHD is related with subtle but critical functional and structural differences in the brain, more specifically those regions supporting the crucial physiological processes. Such processes include memory and an executive function, learning and speed of processing information. The cognitive study demonstrates that persons with ADHD process information at a slower pace in comparison to their peers. In addition, they have some difficulties with

executive functions, such as working memory.

SIGNS AND SYMPTOMS OF (ADHD). Occasionally, its normal for children to daydream during classes, forgets their homework, act without thinking, or get fidgety at the dinning table. However, impulsivity, inattention and hyperactivity are also the signs of attention disorder (ADHD), which can affect the ability of a child to get along with others and learn. Recognizing the signs and symptoms of this disorder is the first step of addressing the problem. The symptoms of ADHD can be unpredictable and situational or invariable. In certain cases, individuals diagnosed with ADHD concentrate on the events of excitements, while others have a difficulty in concentrating under any given circumstances. Some seek the stimulation, while others enthusiastically avoid it. Some are ill-behaved, resistant and later antisocial, while others may be eager people-pleaser, with some outgoing while others withdrawn. Attention deficit hyperactivity disorder (ADHD) appears at the early childhood. It characterized by some difficulties in inhibiting spontaneous responses from speech attentiveness to movements. Normally, the signs and symptoms of this disorder appear before the age of seven. However, it is difficult to distinguish between the normal kid's behavior and attention deficit disorder.

According to Biederman et al., the key features of ADHD are hypersensitivity, inattention and impulsivity. However, because most children display such behaviors from time to time, it is critical not to

assume that every kid seen with these symptoms has ADHD. The advice from a qualified mental health professional should be sought in the event that the symptoms continue. Symptoms usually develop for the term of several months. Before the lack of attention is noticed, this appears later when hypersensitivity and impulsiveness are observed. Different forms of the disorder may result into the kid being labeled, for instance, a discipline problem. Often unmotivated is the label that may be used to describe an impulsive child. This may only be suspected once the child's distractibility, hypersensitivity, impulsivity, or the lack of attention begins to affect friendships, behavior at home and the school performance. A diagnosis of ADHD includes three key symptoms: hypersensitivity, impulsiveness and attentiveness. There are three subtypes of ADHD, which are recognized by medical professionals. They are discussed below.

Hyperactive-Impulsive: This is the case where impulsivity-hyperactivity, but not the symptoms of inattention, has been demonstrated for a period not less than half a year. This is to extent that is inappropriate and disruptive for the individual's level of development. Hyperactive children seem to be in a motion, playing or dashing everywhere. They sit still during a school lesson or dinner or a story can be difficult for them to listen. Such kids fidget or squirm in their seats or sometimes roaming around the room. At some intakes, they may wiggle their feet, noisily tapping their pencil, or touching everything. They may try to do everything simultaneously or feel the need to stay busy. The indications of hypersensitivity-impulsivity

include:

1. Fidgeting with hands or feet, feeling restless, or squirming while seated;
2. Climbing, running, or leaving a seat in situations where quiet or sitting behavior is expected;
3. Blurting out responses before getting the whole question;
4. Intruding or interrupting on others;
5. Having the difficulty in taking turns, waiting in line or enjoying leisure activities quietly;
6. Adults or adolescents feel restless or talk excessively;

Inattentive: it is the case where inattention, but not the symptoms of impulsivity-hypersensitivity, has been demonstrated for a period of at least six months. This is to extent that is inappropriate and disruptive for the individual's level of development. Children diagnosed with Inattentive ADHD may get bored with a task after just some few minutes or may have a trouble concentrating on a single thing. However, they usually have no problem paying the attention when they are doing something they enjoy. For instance, homework is a problem for most children. They may leave an assignment at school or forget writing it down. They may bring a wrong book home or they do remember at all. When the homework is finally completed, it will be full of mistakes and most often accompanied by the frustration for their parents and a child. Inattentive children are rarely hyperactive or

impulsive, though they have a considerable problem paying the attention to something. They seem to be daydreaming, slow moving, easily confused and lethargic. They process the information less accurately and more slowly than other children. Such kids have hard time understanding some written or oral instructions from a teacher. The child sits quietly committing frequent mistakes and seems to be working, although not attending or understanding instructions or tasks to be accomplished. Such children often get along better with their colleagues compared to more hyperactive and impulsive forms, as they may seem not to have the similar sorts of social problems common with various forms of ADHD. They have the problems with regards to inattention and are often overlooked because of this. The indications of hypersensitivity-impulsivity include:

1. Making careless mistakes at work, schoolwork or other play activities, and not giving the close attention to details;
2. Become easily distracted by irrelevant sounds and sights;
3. Failing to pay attention to instructions, not finishing chores, woks, or duties and making careless mistakes;
4. Forgetting or losing things such as toys, books, pencil, assignments or tools necessary for completing a task;
5. Skipping the activity to another and having trouble organizing activities;
6. When spoken directly they do not seem to be listening;
7. Disliking or avoiding things that require a lot of mental efforts

for an extended period;

Combined: it is the case where the symptoms of both inattention and impulsivity-hypersensitivity have been demonstrated for a period of at least six months. This is to extent that is inappropriate and disruptive for the individual's level of development. Such children, exhibiting impulsivity, hyperactivity, and inattention, are considered to have all the above symptoms.

SCHOOL ISSUES AND INTERVENTIONS. It is critical for teachers to be aware of that despite ADHD having a number of perspectives, there is the enough scientific evidence affirming not only its detrimental impact of individuals, but also its existence. Classroom practices can greatly make a difference for the children diagnosed with ADHD. The diagnosis of this condition is based on the development of inappropriate behavioral symptoms, which begins during pre-school years and persists throughout childhood, adolescence and ultimately adulthood. Medical, legal and educational organizations view the condition as a behavioral disorder, though they also recognize that many children with the disorder also have some learning disabilities. Many kids with the disorder, not just those with a learning disability, are at a great risk for academic failure or underachievement despite having the average intellectual abilities. Longitudinal epidemiological assessments in the United States and Canada have demonstrated that the children with ADHD are predicted to have the subsequently lower achievement scores in mathematics and reading. These studies also

have showed an increased risk for high school incompleteness and grade repetition, as well as underemployment and a poor performance at the workplace in adulthood.

MEETING THE CHALLENGE. It is no doubt that ADHD creates the numerous opportunities for overcoming adversity. Some families and children are better able to meet the challenges of this condition. This is demonstrated in the glimpsed in the research, which have been done on resilience. Resilience does imply avoiding adversity but adapting despite the threatening circumstances and challenges. The disorder places youth and children at risk for various life problems. The research has showed that certain protective factors can be helpful in minimizing the possibilities of negative effects on at risk children and youth. Among these protective aspects are: the connection to caring and competent adults, ordinary parents, intellectual ability, self-efficacy (the ability or power to produce a desired outcome), pleasing personality, self-control on emotions, the attention and behavior, and society-valued talents.

FUTURE DIRECTIONS IN ADHD. Using a range of research methods and tools, scientists have begun uncovering the new information regarding the role of brain in ADHD and effective treatment for this disorder. Such studies will in the end result in the improvement of personal fulfillment, as well as productivity, of person with ADHD. For instance, the use of novel techniques, such as brain imaging, to observe the performance of the brain, is already providing some

insights regarding the causes of ADHD. Other studies seek to identify the conditions of early childhood and pregnancy, which may result or contribute to these differences in the brain. As the body of knowledge continues to grow, scientists may in the coming days learn how to prevent such differences, or the way of treating them. In addition, researchers are trying to determine whether there are different varieties of the disorder. Researchers, with the further study, may establish that ADHD covers a variety of disorders, each with its own range of treatment requirements and symptoms. Scientists, for instance, are exploring whether there are any significant differences between the children diagnosed with ADHD, who have depression, anxiety, or conduct disorder, and those who do not. Others are studying slight physical variations, which might distinguish the difference types of ADHD. Scientists can only begin distinguishing the treatment of each type of ADHD when clusters of differences can be established.

A non-stimulant mechanism of actions, which is a new drug, may be approved to treat ADHD. Guanfacine tablets are selective alpha_{2A}-agonist in development for once daily treatment of the disorder. An NDA for monotherapy was submitted to treat the symptoms associated with ADHD throughout the day and received a letter of approval from FDA in June 2007. The institution of approval requested for the additional information with regards to the company conducting the additional clinical work related to label the drug. In addition, other studies are examining the long-term outcomes of ADHD, with respect of how children with the conditions turn out in

comparison to their brothers and sisters without such an disorder. This also concerns how adults are expected to handle their children with the studies targeting to understand ADHD in adults. Such studies provide insights into the various treatments or services, which are intended to help children with ADHD growing into well functioning adults and caring parents. Animal studies are also useful in adding to the researchers' knowledge regarding ADHD in humans. Animals, under study, make it possible studying some of the causes of ADHD in the ways that are impossible to be studied among people. An animal research, additionally, allows the effectiveness and safety of experimental new drugs to be tested long before they can be administered to humans. An NIH-sponsored group of scientists is studying dog to establish how a new stimulant drug is similar to Ritalin act in the brain. Through studies of animals and human beings, scientists, piece by piece, are beginning to understand the biological nature of ADHD. Now, the study is providing insights on the inner working of the brain as scientists pursue in developing new medications and assessments of new forms of treatment.

Societal Impact. The economic and social impact of ADHD is widespread. The condition may influence on the ability to work of holding a regular job, which can extend adversely beyond an individual to affect their whole life. This may impede social activities and can hugely impact on costs. Adults diagnosed with the disorder are more likely to be dismissed from their jobs; and their relationships at home often deteriorate. According to the surveys in Europe, the parents of

children with ADHD complain that the disorder affect the subjects' ability to follow family routines, which is particularly evident during the early evening/late afternoon and late evening periods.

A critical point is the influence of ADHD on everyday's activities, which not only impacts on parents, but also the patients' carers and families. Coordinated support, both non-medical and medical, is important for the aims of helping the patient to avoid hard difficulties as a result of their state. Patients suffering from ADHD, who remain untreated or those not related to hospitals, are at high hazard for a bad treatment during a teenage age resulting to having not many friends, constructive leisure, work tasks, and lowered life quality later in life. ADHD impacts on all spheres of life, from an early childhood to adulthood; offering solutions and recognizing it can assist patients to cope with dwelling with the condition. It may impact on individuals with diverse ways in a different period of their lives. For instance, hypersensitivity manifests in pre-school-aged children as demanding and incessant extremes of activity. In school-aged children, it exhibits itself as inappropriate situation and excessive movement rather than every occasion. In adults and adolescents, hypersensitivity is observed as excessive supported inside sense of restlessness and fidgetiness.

A person's development, not surprisingly, can be influenced sharply by the disorder, and their activities and quality of life in higher education or at school as well as worksite are impaired. Children at a school-going age diagnosed with the condition tend to demonstrate persistence of

inattention and hypersensitivity, high level of any disruptive behavior and poor school achievement that their mates that do not obtain with any mental problems on their health. Adults with ADHD, in the worksite, experience more difficulties with their colleagues and employers than the ones having no ADHD, while absenteeism, lateness, no ability to complete the necessary loads of work and excessive error all exacerbating their problems. This results to high levels of unemployment, including high periods of unemployment and turnover of jobs. Methods for enhancing relaxation, concentration, self-control, and self-respect may be critical. For example, participation in the group of support based at school is instrumental at improving acception of self-esteem among teenagers. Other problems with health, such as obstacles in language and speech, may be enhanced through consulting with professionals, such as occupational or speech therapists. It is notable that early intervention can improve the long-term outcome for persons with ADHD. It is less likely that services, which improve difficulties experienced in the frame of language, speech and movement, will be demanded when kids start school.