



## ADHD Facts: Dispelling the Myths

**MYTH:** ADHD is not real.

**FACT: ADHD is real.** ADHD is a medical neurobiological disorder recognized by all of the major medical associations and government health agencies due to overwhelming scientific evidence.

**MYTH:** ADHD occurs only in boys who outgrow it in adolescence

**FACT:** ADHD conservatively occurs in 5% of children: 80% maintain the diagnosis into adolescence, with at least 60% affected by core symptoms in adulthood. Research shows that at least 4% of adults worldwide have ADHD. While three times as many boys are diagnosed with ADHD, we now know that we most likely misdiagnosing the girls, who tend to be less hyperactive, because incident rates are almost equal between men and women in adulthood.

**MYTH:** ADHD is over diagnosed because everyone has difficulty paying attention.

**FACT:** Diagnosis is a complex process. Although many people may exhibit *some* of the symptoms *some* of the time, the symptoms must be considered an impairment to daily functioning to receive a diagnosis of ADHD.

**MYTH:** ADHD is caused by bad parenting, eating too much sugar, poor teachers, too much TV, etc.

**FACT:** Parenting styles do not cause ADHD. Diets and limiting food additives and sugar will not cure ADHD. Research shows that ADHD is a brain-based disorder that is inherited (genetic) most of the time. There are three subtypes of ADHD: predominately inattentive, predominately hyperactive and combined subtype.

**MYTH:** People with ADHD don't want to focus or complete tasks that they don't enjoy.

**FACT:** ADHD is a problem with the regulation of attention, not just inattention. People may misconstrue the ability of someone with ADHD to "hyperfocus" – the ability to over-focus on a highly stimulating task (like a video game) for hours – as focus being an issue of willpower. Being unable to prioritize your attention can have significant impact.

**MYTH:** Teachers, doctors and parents just want to medicate children to make them easier to manage.

**FACT:** Treatment for ADHD should always be multi-modal. First and foremost, it must include education of the child's caregivers, and the child and adult themselves, on what ADHD is and how it impacts them. Learning accommodations are required; coaching or counseling may be helpful to teach management strategies. Research indicates that medication can be beneficial, but is not always required.

**MYTH:** Taking ADHD medication increases a child's risk of future drug abuse.

**FACT:** Research has shown that people with ADHD who take medication may actually have lower rates of substance abuse than people with ADHD who don't receive treatment. Those with untreated ADHD may turn to substance abuse as a form of self-medication.

**MYTH:** ADHD is not a big deal.

**FACT:** Children with untreated ADHD are at a greater risk for: problems with learning resulting in academic difficulties (3-fold risk for high school dropout); low self-esteem; substance abuse; sustaining injuries and having accidents (2-fold increased risk of injuries, particularly head injuries/fractures, and 2- to 4-fold risk of motor vehicle accidents as a driver); developing other mental health problems (i.e. depression, anxiety); family dysfunction; and decreased likelihood of full-time employment and lower household income when they grow up.