ADHD: special issues in hispanic population

Su-S-052
Developmental aspects of ADHD
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Attention deficit hyperactivity disorder (ADHD) is a very common childhood disorders, affecting up to 7–8% of children, and at least one-third to one-half will continue through adulthood. Moreover it is important the high comorbidity not only in children, but in adolescents and adults. Therefore, ADHD becomes especially important when we focus on The Developmental aspects; ADHD can be observed as a risk factor for the development of another psychopathology and that add more complexity to the diagnosis along the life cycle, and confers an evolutionary risk. Not many studies has been done on Hispanic Populations about the evolutionary aspects of ADHD, this is one of the firsts.

Materials, method and results.– Correlational study with a Spanish sample of 378 patients diagnosed with ADHD in the childhood between 1988 and 2000 who had initiated treatment after been diagnosed. 88 patients had been evaluated years after (2006) with ages between 18 and 33 years old. Eighty-five percent of the patients in this study had had combined treatment.

Discussion and conclusions.– The data found in this study show lower comorbidity than other published studies (36%), the anxiety disorders (11%) and depression (21%), were the most prevalent disorders. We found lower persistence of the diagnosis of ADHD in the adulthood too (15%). Sixty-two percent of the patients use alcohol, and 14% other drugs, the cannabis was the principal drug consumed. Rest of data will be presented and discussed in the congress. This research shows data of the outcome of ADHD Spanish patients when they reach the adulthood, as this is a treated population, the results may lead to a possible protector role of the early intervention in ADHD.

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Su-S-053
ADHD: Pharmacological treatment adherence
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ADHD is a chronic pathology that involves the entire life of an individual, all long-term pathologies, poor outcome is often influenced by drug treatment discontinuation. Little research is available on pharmacological adherence in ADHD; there is evidence that long-term treatment is effective. There are few studies that evaluate ADHD treatment satisfaction, but most of them are short-term studies, except MTA. MTA was an excellent long-term study, which was done on a continuous evaluation setting. (it is not a naturalistic study). The aim of our research was to estimate how many patients were undergoing pharmacological treatment over a school year. Also to investigate whether learning difficulties and behavioral difficulties changed the pharmacological treatment compliance of patients with ADHD. Another goal of the study was to assess whether there were differences in pharmacological treatment adherence, between methylphenidate and atomoxetine, both usually used to treat ADHD children.

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Su-S-051
Spécificités du rapport risques/bénéfices dans les hospitalisations au long cours pour adolescents
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Les hospitalisations au long cours en psychiatrie de l’adolescent sont des dispositifs lourds, complexes et ambitieux, mis en oeuvre avec la perspective de susciter des changements positifs pour les jeunes patients qui en bénéficient. Néanmoins, elles ne sont pas sans comporter d’importants risques. À l’heure où l’établissement du rapport risques/bénéfices est présenté comme une exigence incontournable, nous voudrions montrer, à partir de notre expérience en soins/études, comment le cadre de soins se doit de prendre en compte cette dialectique risques/bénéfices. Les risques nous semblant liés aux interactions entre psychopathologie individuelle et fonctionnement institutionnel, nous travaillons activement à l’établissement d’un cadre de soins qui les réduise. Pour cela, nous nous situons dans une démarche institutionnelle qui prend en compte de façon dynamique la problématique individuelle du patient, ce qui suppose une approche qualitative et subtile et non quantitative ou protocolisée. Nous illustrerons notre propos par des exemples.

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Su-S-054
Irritability in attention deficit disorder. Subtype or comorbidity?
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Irritability is an important symptom in childhood psychopathology that has received an increase research attention in the last decade. There is not an operational definition of irritability that represents one and the same phenotype, which could be used by different researchers. In this research, the variable used is non-violent aggression (Althoff, 2010).

Objective.– Analyze the presence of irritability or non-violent aggression in a clinical sample referred with and without ADD.

Design.– Retrospective review of medical records.

Sample.– Five hundred patients from 6 to 16-years-old with CBCL-Parent 6–18.

Results.– The variable non-violent aggression (1) or irritability (α 0.855), is present in severe childhood psychopathology (50%) and can also distinguish two sub-groups of patients with attention deficit disorder. There are significant differences between those sub-groups in mean of Total Problems (α STP 57.7 DE 16.3 and α STP 93.1 DE 26.7), in the pattern of comorbidity, and presence of suicidal ideation.

Conclusions.– The CBCL variable of non-violent aggression allows distinguishing a clinical sub-group of ADD with severe psychopathology and if present, requires combination drug treatments.

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Su-S-055
Characteristic of symptoms of attention deficit disorder with hyperactivity (ADHD): Severity, frequency, areas of dysfunction and symptoms associated thresholds. Clinical population study of Latin-American child and adolescent
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Objective.– To establish characteristics Attention Deficit Hyperactivity Disorder (ADHD) symptoms, severity, frequency, associated areas of dysfunction and symptoms thresholds. Clinical population study of Latin-American children and adolescent.

Methods.– Children and adolescents with ADHD from Mexico, Colombia, Venezuela, Argentina were included, a Spanish DSM-IV ADHD check list (ADHD-CL) was used to establish the best clinical estimation. To reach threshold, a symptom need to be 3 in a 1–5 level evaluation for severity and frequency with at least two areas of dysfunction.

Results.– Two hundred and thirty five subjects, mean age 10.3 years, 77.8% males. ODD presented in 36.5%. All symptoms reported a moderate to high severity/frequency correlation. Inattention symptoms reported more