Attention Deficit Hyperactivity Disorder (ADHD) is one of the most prevalent mental disorders of childhood (with prevalence rates varying from 5% to 10%) and it can continue through adolescence and adulthood. ADHD’s impact on society is enormous in terms of financial cost, stress to families, disruption in schools, and the potential for leading to criminality and substance abuse. There is an extensive literature on ADHD, but relatively little emphasis has been placed on regional, cultural differences, and diversity variables, such as ethnicity. Moreover, services and interventions available for children with ADHD and their families vary from country to country starting with minimal (or no) interventions available and ending with a personalized medicine type approach. This session aims to describe a diversity of approaches in diagnosing and treating ADHD across the world. A complex ADHD case will be presented, and speakers from all WPA regions will describe how they would assess and manage such a case in their region. In addition to this, brief overviews of the latest and the most important developments on ADHD will be presented from each region.

http://dx.doi.org/10.1016/j.neurenf.2012.05.409

We-S-435

ADHD in WPA region I, The Americas
A.P.S. Guerrero
Department of Psychiatry, University of Hawaii, Honolulu, USA

Introduction/objectives.-- Representing WPA Region I, the presenter will discuss the case from the perspective of a child psychiatrist practicing in the United States of America (USA) specifically, the culturally diverse state of Hawaii.

Methods.-- The presenter will discuss: how a child would typically present for care, diagnostic criteria application, common comorbidities and differential diagnoses, rating tools, and availability and acceptability of various treatment modalities.

Results.-- ADHD evaluation and treatment in the USA is strongly influenced by practice parameters - notably from the American Academy of Child and Adolescent Psychiatry. Access to care is also influenced by a shortage of child psychiatrists (workforce of around 7000, in comparison to a calculated need of up to 30,000).

Discussion/conclusion.-- In discussing the care of ADHD from multiple regions, the panel hopes to share experiences that can optimize our approach to one of the most common child psychiatric conditions in the world.

http://dx.doi.org/10.1016/j.neurenf.2012.05.410

We-S-436

ADHD in WPA region II. Europe
E. Koren
Department of Child and Adolescent Psychiatry, Moscow Research Institute of Psychiatry, Moscow, Russian Federation

Introduction/objectives.-- The presenter will discuss the ADHD case from perspective of the Russian routine clinical practice.

Methods.-- Children with ADHD are typically referred to psychiatrists and “modern trend” neurologists. ADHD is diagnosed mostly among school age children using ICD-10 criteria. Comorbidities and differential diagnoses, and availability and acceptability of various treatment modalities will be discussed.

Results.-- ADHD prevalence rates in the Russia are in the range of 3-7% up to 18%. There are no official standards for ADHD evaluation and treatment. Pharmacological treatment is most common, including prescription of nootropic agents, psychostimulants however are prohibited. In academic settings multimodal approaches is used.

Discussion/conclusion.-- The panel hopes to discusses age-threshold for diagnosis, to share experiences concerning a need to advance evidence-based models for mental health care delivery for ADHD.

http://dx.doi.org/10.1016/j.neurenf.2012.05.411