ADHD Treatment in Native American Youth

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Learning Objectives
At the end of this presentation, participants will be able to:
• Recognize comorbidities that could mimic signs/symptoms of ADHD
• List three ADHD medications and categorize as stimulant vs non-stimulant
• Acquire new knowledge regarding cultural and psychosocial stressors affecting ADHD that requires close collaboration between clinicians, schools, parents, and children

Introducing the Presenter
Steven Sust is the middle child of 3 boys born to Hong Kong immigrant parents who raised them in downtown Philadelphia. He received a bachelor’s degree in psychology from GWU, medical degree from UVA, and postgraduate training at UPenn and Stanford. His work experiences range broadly from state psychiatric hospitals, county specialty MH clinics and emergency rooms to school mental health and schizophrenia research at NIH. Current interests include primary care behavioral health integration, cultural psychiatry, school mental health, and working with underserved populations.

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Disclaimer
The views expressed in this presentation are those of the speaker and do not necessarily represent the views, policies, and positions of the Indian Health Service (IHS), or the U.S. Department of Health and Human Services (HHS).
Personal Disclosures

• I am a cisgender male of Cuban influenced Chinese descent
• I have no formally diagnosed family history of mental illness
• I have sought out and received my own mental health care
• I have both knowingly and unknowingly contributed to bias and most “isms,” and will try to improve upon these areas of growth

Risk factors for prenatal counseling

Link to Article

Considering ADHD diagnosis?

Link to DSM5 ADHD diagnostic criteria

TRAMA
• Feelings of fear, helplessness, uncertainty, vulnerability
• Excess social anxiety and agitation
• Avoidance of reminders and trauma
• Irritability, quick to anger
• Feelings of guilt or shame
• Disorganization, forgetfulness, inattention
•“Feel like part of your body”
• Continually feeling on alert for threat or danger
• Thoughts, images, memories, or nightmares

ADHD
• Difficulty sustaining attention
• Difficulty following instructions
• Difficult with organization
• Fidgeting or squirming
• Difficulty waiting or taking turns
• Talking excessively
• Losing things necessary for tasks or activities
• Interrupting or intruding on others
Consider Which ADHD Scale?

Vanderbilt ADHD Teacher Rating Scale

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Link to NICHQ Vanderbilt Assessment Scales
Link to AAP toolkit

Inattention
Hyperactivity
O.D.D.

9

List some of the “preferred” activities that youth love to engage in

10

The Multimodal Treatment of Attention Deficit Hyperactivity Disorder Study

A 14-Month Randomized Clinical Trial of Treatment Strategies for Attention-Deficit/ Hyperactivity Disorder

Primary References:
AACAP “Practice Parameter for the Assessment and Treatment of Children and Adolescents with Attention Deficit/Hyperactivity Disorder,” AACAP 48, 7 (2002): 30-56

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...stimulant treatment of childhood ADHD does not appear to increase or reduce the risk of later developing SUD, beyond the doubled risk associated with the disorder itself...