
Challenges in the transition of care for adolescents With attention-deficit/hyperactivity disorder.

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Attention-deficit/hyperactivity disorder (ADHD) is often considered a childhood disorder. However, in those diagnosed with ADHD as children, inattention, impulsivity, and hyperactivity can persist into adulthood, causing significant functional impairment and emotional distress, even if the condition no longer meets diagnostic criteria. This review examines the developmental and psychosocial factors to consider in adolescents with ADHD and the strategies that facilitate the transition from pediatric to adult care. Our findings are based on PubMed database searches conducted on November 29, 2011, that identified articles pertaining to ADHD and continuity or transition in medical care for adolescents published in English within the 5-year period preceding this date. Adolescents with ADHD face specific burdens associated with transitioning into adulthood that can impede the achievement of academic and occupational goals. The main finding of the literature review was that ADHD treatment rates decline sharply from childhood through young adulthood, despite the fact that functional impairment often persists. Moreover, although psychosocial therapy can play an important role in resolving functional difficulties and encouraging patient adherence to pharmacotherapy, the existing literature focuses mainly on pharmacotherapy as first-line treatment for ADHD. Therefore, careful, advanced planning to ensure continuity of medical and psychiatric care is essential. This planning involves the pediatric service that has been providing care, the adult service that will assume the responsibility of providing care, the young person with ADHD, and the family. Although recommendations for planning initiatives have been developed by a variety of professional organizations, they do not seem to be routinely implemented for the transition of ADHD care. Such careful advanced transition planning can ensure continuity of treatment, encourage treatment adherence, and help young individuals adjust to new life circumstances and avoid negative educational, social, and vocational results. Guidelines designed to facilitate this transition of care may be helpful.