

# THE FUTURE OF ADHD IN EUROPE

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DIVA Foundation

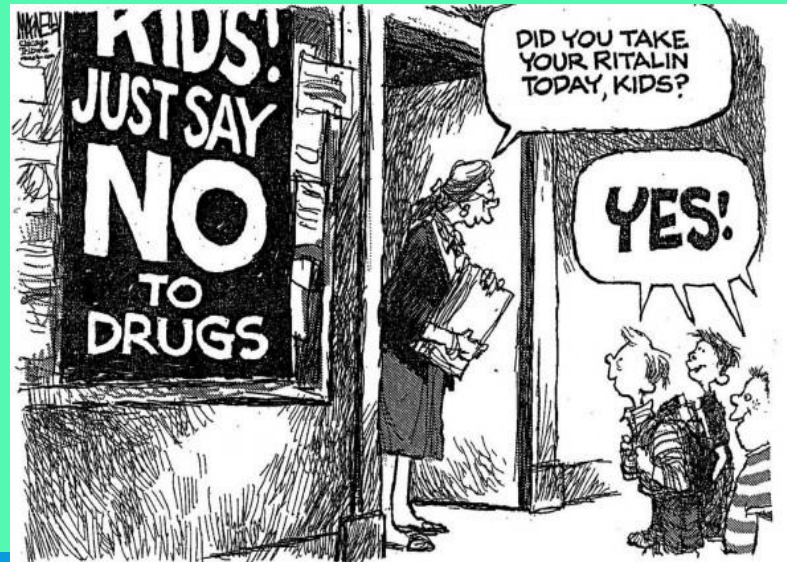
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# CONTENT

- Has ADHD a future?
- Does history predict the future?
- What future do we want in Europe?

# HAS ADHD A FUTURE?

Concept, prevalence and treatment of ADHD are currently criticised by the public, the media, the government, the schools, your neighbours ...



Why let government drug your children?



# DO THEY HAVE A POINT?

- ADHD was discovered, or 'invented' long time ago (1902), has not disappeared, and is proving its neurobiological underpinnings
- ADHD treatment for lazy parents: treatment reduces symptoms and suffering, as well as 'bad parenting' in adults with ADHD
- Emotional response to ADHD by society may go back to (self) identification that has to be denied (yes, ADHD is common)
- For governments: the perception of ADHD as a disorder increase health care costs, denial is cheaper (in the short term)
- The denial of ADHD as a disorder increases health care costs, by secondary impairment and consequences of underachievement, accidents, aggression, an unhealthy lifestyle, substance abuse, work and relationship problems

# HOW TO DEAL WITH CRITICISM?

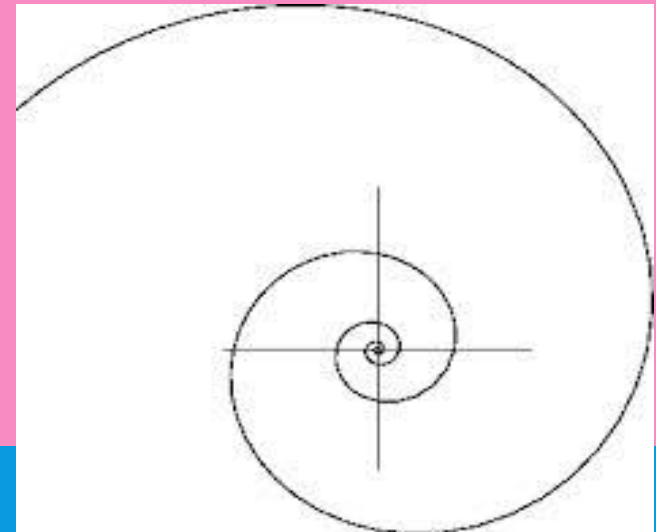
- **Stick to scientific evidence, it is the best we have**
- **Continue communicating the evidence to the public and the media**
- **Ignore those that can't be persuaded**
- **Cooperate with patients as ambassadors of the disorder and its treatment**
- **Continue to innovate and make lives of patients better for your own motivation**
- **Criticism may wax and wane, ADHD will not**

# DOES HISTORY PREDICT THE FUTURE?

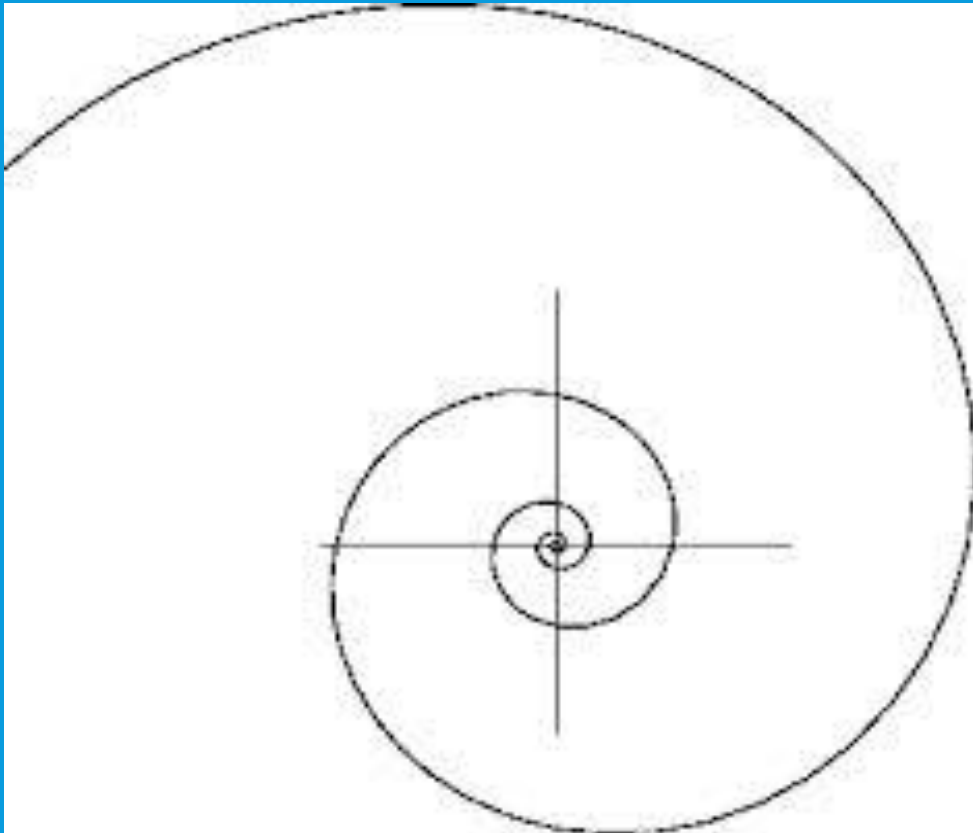
## ADHD had a slow start ...

- Different names and concepts over time, from 1902 ...
- Medical treatment in children started only from 1960's
- ADHD in adults from 1990's
- ADHD in older people from 2010

... and currently a logarithmic increase



# LOGARITMIC INCREASE IN



- Recognition of ADHD *through the lifespan*
- Assessment and treatment
- Distribution of expertise worldwide
- Availability of medical treatments

But not in:

- Access to service for patients
- Public acceptance

# A BETTER FUTURE, FOR WHOM?





# WHEN PATIENTS PROFIT, SOCIETY PROFITS

## What can current assessment and multimodal treatment of ADHD deliver to patients and society?

- Decrease of the severity of ADHD
- Decrease of the severity of comorbidity
- Better functioning in work and relationships
- Increase of self esteem
- Less injuries, aggression, suicide attempts, accidents, substance abuse ...
- Healthier lifestyle
- Less need for sickness benefit in the long term

**But many of these benefits still need proof...**

# WHEN PATIENTS PROFIT, SOCIETY PROFITS

The concept of ADHD as a lifespan disorder is spreading throughout the world:

- Diagnostic Interview for ADHD (DIVA 2.0) in adults currently in 17 languages for free online, and 7 more ongoing (up to China and Japan)!
- European Network Adult ADHD currently counts 66 members from 24 countries
- Increasing number of national networks on adult ADHD
- AND: ADHD in older people proves still prevalent in 3% of population

**DIVA**  
Foundation

*diagnostisch interview  
voor ADHD  
bij volwassenen*

# NEAR FUTURE DEVELOPMENTS

## 1. The quest for a valid diagnostic test

- Cognitive profiles of ADHD, objective computer tests
- Biomarkers: ferritin, inflammation, obesity
- Voxel based morphometry, connectivity, gray and white matter volumes
- Eye tests?
- Other?
- Meanwhile: DSM-5 opts for a lifespan perspective and larger diagnostic domains in stead of specific categories

# NEAR FUTURE DEVELOPMENTS

## ▪ 2. The search for the neurobiological background

- Developmental (early onset, continued course over time)
- Neurobiological (smaller brain areas, lower perfusion, less adequate brain functioning)
- Genetic (so many, of little effect)
- Environmental (intra-uterin hypoxia, lead, severe neglect after birth, food?, lack of sufficient vitamins?)

# NEAR FUTURE DEVELOPMENTS

## 3. The need for new effective treatments

- Diet
- Vitamins and supplements (D and B, ferritin, omega-3)
- Neurofeedback
- New medications (metadoxin)
- Light therapy (increases dopamin)
- Sport

# NEAR FUTURE DEVELOPMENTS

## 4. The need to show cost-effectiveness at a time with less budget for mental health care and research

- Cost-effectiveness studies of treatment will be demanded
- Research budgets will be reduced

*New online crowdfunding initiatives will emerge:*



- research ([www.ADHDFund.com](http://www.ADHDFund.com))
- projects ([www.restlesspeople.org](http://www.restlesspeople.org))

**ADHDFUND**  
online crowdfunding

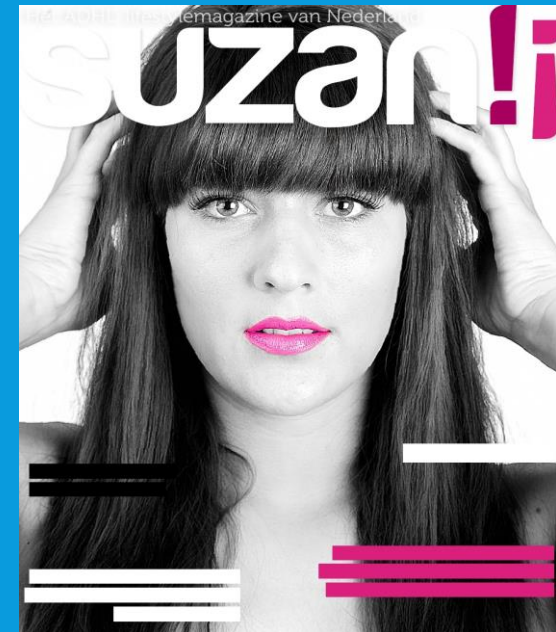
# NEAR FUTURE DEVELOPMENTS

5. Patient organisations will be (over)active online and in social media, or disappear

- Individuals with ADHD take initiative to reduce stigma and improve their lives:

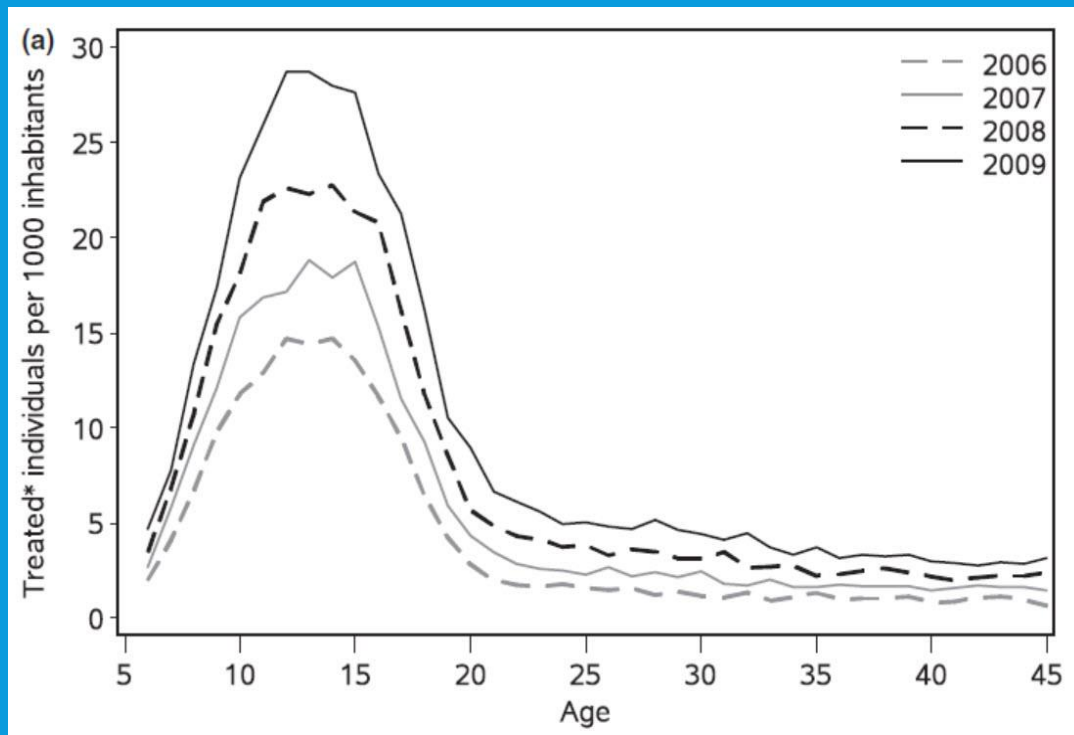
In the Netherlands there is now a real ADHD Glossy:

and soon a Benefit Concert for this Glossy:



# ACCESS TO CARE THROUGH THE LIFESPAN

## 6. Lifespan Clinics for ADHD will be set-up throughout Europe (NLs, Sweden, Denmark ...)



- . for a better transition of adolescents
- . for families
- . for older people with ADHD
- . for children < 6 yrs of age
- . for older children and adults
- . for longitudinal research



# NEAR FUTURE DEVELOPMENTS

- **7. Online education on ADHD for everyone, *for free***
- ENAA: [eunetworkadultadhd.com](http://eunetworkadultadhd.com): Anne Kjems Philipsen online education
- [adultadhd.org](http://adultadhd.org): Steve Faraone online education
- [ADHDlectures.com](http://ADHDlectures.com): 35 hours of Russell Barkley's video's online for parents and professionals

# WHAT FUTURE DO WE WANT IN EUROPE?

## Discussion

- public acceptance
- assessment and treatment
- access to care, lifespan perspective
- diagnostic test
- neurobiological background
- new effective treatments
- online education for free
- patient initiatives and networks, not just participation
- crowdfunding for research