

September 2008**PRESS RELEASE****NICE guidelines are set to improve care and management
of children, young people and adults with ADHD**

The National Institute for Health and Clinical Excellence (NICE) and the National Collaborating Centre for Mental Health have today (24 September 2008) published a guideline on the diagnosis and management of attention deficit hyperactivity disorder (ADHD) in children, young people and adults.

ADHD is a common behavioural disorder in children and young people estimated to affect up to 3% of school-age children and young people in the UK, and about 2% of adults worldwide. It usually starts in early childhood and some people will continue to have ADHD as adults. Severe ADHD is sometimes known as 'hyperkinetic disorder'. The symptoms of ADHD include: being inattentive (unable to concentrate for very long or finish a task); hyperactivity (fidgety and unable to sit still); and impulsive (speaking without thinking about the consequences). It is an extremely distressing disorder, affecting the person as well as their families and carers.

Key recommendations from the guideline include:

- Trusts should ensure that specialist ADHD teams for children, young people and adults jointly develop age-appropriate training programmes for the diagnosis and management of ADHD for professionals who have contact with people with ADHD.
- Parent-training/education programmes should be offered as first line treatment of ADHD. Healthcare professionals should offer parents or carers of pre-school children with ADHD a referral to a parent-training/education programme as the first-line treatment.

- Teachers who have received training about ADHD and its management should provide behavioural interventions in the classroom to help children and young people with ADHD.
- If the child or young person with ADHD has moderate levels of impairment, the parents or carers should be offered referral to a group parent-training/education programme, either on its own or together with a group treatment programme (cognitive behavioural therapy [CBT] and/or social skills training) for the child or young person.
- In school-age children and young people with severe ADHD, drug treatment should be offered as the first-line treatment. Parents should also be offered a group-based parent-training/education programme.
- Drug treatment for children and young people with ADHD should always form part of a comprehensive treatment plan that includes psychological, behavioural and educational advice and interventions.
- Drug treatment for adults with ADHD should always form part of a comprehensive treatment programme that addresses psychological, behavioural and educational or occupational needs.

“Dr Gillian Leng, NICE Deputy Chief Executive, and Executive Lead for this guidance said: “Today’s guideline, which is published during ADHD awareness week, is the first guideline to address the diagnosis and management of ADHD within both clinical and education settings. At its heart is the recognition of the importance of establishing a multidisciplinary team, including the person with ADHD, their family and their teachers in order to help support the person with ADHD achieve their full potential.”

Professor Eric Taylor, Head of Department of Child and Adolescent Psychiatry and GDG Chair said: “I believe these guidelines will make people with ADHD, and their families, more confident that their problems will be recognised and can often be helped; and that they will provide professionals with a framework for good practice nationally.”

Dr Tim Kendall, Joint Director, National Collaborating Centre for Mental Health and Adult Consultant Psychiatrist said: “In an ordinary comprehensive of around 1,400 children there can be up to 30 children with ADHD. With this guideline we are

providing the most comprehensive approach to diagnosing and managing children with ADHD right across the spectrum of care."

Dr Kapil Sayal, Senior Lecturer in Child and Adolescent Psychiatry and GDG member said: "These guidelines will help to ensure that ADHD is accurately identified and recognised by health professionals. There needs to be improved awareness, identification and recognition of children and young people with these problems, so that they are able to access the right care at the right time."

Dr Nicola Salt, GP and Guideline Development Group member says: "These guidelines will help to increase GPs' awareness of ADHD and give clear guidance on when it is appropriate to refer to specialist ADHD teams for formal diagnosis. It also stresses the importance of good teamwork and shared care agreements with ADHD specialists in ongoing drug prescribing and monitoring of stable patients."

Dr Christine Merrell, Education Specialist and Guideline Development Group member says: "Teachers and early years practitioners are well placed to identify children and young people with disorders of conduct and behaviour, including ADHD, and they are advised to refer such cases to the school special educational needs coordinators for further consideration. From the perspective of providing effective support for children with ADHD within educational settings, at the local level, written information about the characteristics and behavioural management of ADHD should be produced jointly by healthcare and educational services and made available to teachers. Communication between services is important and following diagnosis healthcare professionals should, with the consent of parents or carers, contact the setting to advise them on the severity of a child's symptoms and treatment plan. At a national level, the Department for Children, Schools and Families should consider enhancing the education of trainee teachers so that they are better able to recognise the signs and symptoms of ADHD."

ADHD carer and Guideline Development Group member says: "The publication of these first national guidelines on the treatment of people with ADHD is very much welcomed and should make a significant difference in reducing variations in how treatment is currently delivered. The recommendations provide clear guidance for people with this challenging and often stigmatising condition on what they can expect from both health and educational services. While clearly stating what the most effective treatments are, the guidance is also explicit in ensuring that people's

choices for different treatment options can be taken into account if they find one treatment more acceptable than another, or if their first choice of treatment proves to be unsuitable. The guidance is published with an accompanying version specifically written for people with ADHD and the people who provide support and care, which should help people access the treatment to which they are entitled.”

Ends

Notes to Editors

1. The guidance is available at www.nice.org.uk/CG72.

About NICE

2. The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
3. NICE produces guidance in three areas of health:
 - **public health** – guidance on the promotion of good health and the prevention of ill health for those working in the NHS, local authorities and the wider public and voluntary sector
 - **health technologies** – guidance on the use of new and existing medicines, treatments and procedures within the NHS
 - **clinical practice** – guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS.