

Attention-Deficit Hyperactivity Disorder

Progressive Case Conference Trainee Guide

Contributors

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Pre-Assessment Learning

Before attending this session, please review the ADHD self-study guide.

Overview

Attention-deficit hyperactivity disorder (ADHD) has been increasingly diagnosed in adults, leading to a greater number of women of reproductive age who are using stimulants to address ADHD. In addition, it is plausible that the increased number of tasks in motherhood as well as cognitive changes in the brain during pregnancy and postpartum can impact the course of ADHD, although little data exists in this area overall. This section will highlight the course of ADHD in pregnancy and focus on both nonpharmacologic and pharmacologic treatment strategies in pregnancy and postpartum.

Session

Review self-study materials (10 min) Apply knowledge to a new case (40 minutes) Wrap-up (10 minutes)

Learning Objectives

- 1. Appreciate the interface of pregnancy and postpartum on the natural history of ADHD
- 2. Understand changes in the course of ADHD throughout pregnancy and postpartum
- 3. Discuss the safety profile of medication management of ADHD in pregnancy and postpartum
- 4. Understand nonpharmacologic treatment options for ADHD in pregnancy and postpartum

Case Presentation

Part 1a: Preconception

Rani is a 34 year old woman who presents to a reproductive psychiatrist for a preconception consultation regarding the management of ADHD in pregnancy. She is married, lives with her husband, and works full-time as a financial consultant. Rani reports that in elementary school, teachers had noted excessive distractibility and fidgeting, interfering with learning. Her family history was notable for ADHD in her father and an undiagnosed anxiety disorder in her mother. After extensive neuropsychological testing was performed, she was diagnosed with attention-deficit hyperactivity disorder, combined type. She was subsequently started on Ritalin and received testing accommodations throughout the rest of her schooling. Since graduating from college, she has worked for the same



employer and continues to perform well with a set routine. She was eventually switched over to Adderall to good effect. She has received excellent reviews at work and is proud of her high performance despite her ADHD diagnosis. She currently takes Adderall XR 20 mg PO qAm and Adderall IR 5 mg PO q2-3pm.

1. What points of discussion should her psychiatrist mention during the visit regarding the natural history of ADHD in women of reproductive age?

2. What points of discussion should her psychiatrist mention with regard specifically to the course of ADHD in pregnancy and postpartum?

Part 1b: Preconception

Rani and her psychiatrist then discuss medication use of ADHD medications in pregnancy itself. Rani mentions that she feels worried because she had read on the internet that stimulants are "totally harmful" in pregnancy and should never be used, but on the other hand she worries about how she is going to perform at work and manage at home without being on medications at all.

1. What are the medication options for treating ADHD during pregnancy itself, and what should the psychiatrist mention in terms of their safety profile?

2. Rani asks if there are any situation in which she can take her stimulant in pregnancy. How should the psychiatrist respond?

3. Rani and her psychiatrist then discuss nonpharmacologic treatment options.



Part 2: Sixteen Weeks Pregnant

Rani presents at 16 weeks' gestation having tapered off and discontinued all stimulants prior to getting pregnant. She reports that initially she was worried about worsening of her ADHD symptoms. She describes that she lost her employee badge, missed an important project deadline, was chronically running late to meetings and failed to submit her monthly expenses. She worried about her job performance and lost sleep over it.

However, Rani then starts to implement the nonpharmacologic treatment options, and for an important deadline she used low dose stimulants for a brief period of time (2 weeks). To minimize potential exposure, she worked on using the lowest effective dose of the stimulant and decided to take it only during the work week and not on the weekends. She also decided to use the immediate release formulation of the medication instead of the sustained release with the aim of reducing exposure as well. She reports that CBT for ADHD has given her some practical approaches to organizing and prioritizing her tasks. She walks 2 miles a day and is practicing mindfulness techniques. Her workplace made some accommodations for her. She moved to a corner office with more privacy and less distractions. She is able to start her day at 9 AM instead of at 8 AM and work from home on Fridays.

Part 3: 33 Weeks Pregnant

Rani returns at 33 weeks, she reports that her ADHD feels under control, is well managed and she is able to sleep better. She and her psychiatrist have made a plan to meet with her husband to plan for the postpartum period. Her OBGYN is pleased with her blood pressure control and weight progression. Fetal growth and development is normal. She asks about the postpartum period and lactation. She and her husband have made a plan to get some help with some household chores and gives her breaks in the evenings.

1. What is the relationship of stimulant use in breastfeeding?

Resources for Adults with ADHD

1. Taking Charge of Adult ADHD - 1st Edition, by Russell A. Barkley (Author)

2. Mastering Your Adult ADHD: A Cognitive-Behavioral Treatment Program, Client Workbook (Treatments That Work) Paperback – 15 Jun 2017 by Steven A. Safren (Author), Susan E. Sprich (Contributor), Carol A. Perlman (Contributor)

3. Understand Your Brain, Get More Done: The ADHD Executive Functions Workbook Paperback – April 1, 2012 by Ari Tuckman PsyD MBA (Author)

4. The Mindfulness Prescription for Adult ADHD: An 8-Step Program for Strengthening Attention, Managing Emotions, and Achieving Your Goals Paperback – 28 Mar 2012 by Lidia Zylowska (Author)

5. Women with Attention Deficit Disorder - May 1, 2005 by Sari Solden (Author), MS (Author)

6. You Mean I'm Not Lazy, Stupid or Crazy?!: The Classic Self-Help Book for Adults with Attention Deficit Disorder Paperback – April 25, 2006 by Kate Kelly (Author), Peggy Ramundo (Author), Edward M. Hallowell M.D. (Foreword)



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