

Is it Really AD/HD?

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Parents, physicians and teaching professionals are often faced with the question: “Is it really AD/HD (Attention Deficit/Hyperactivity Disorder)?” when thinking about a particular child, patient or student (and sometimes even themselves). This frequently results in apprehension and hesitation about seeking assistance, since clear-cut answers and varying opinions are quite typical. Fortunately, making such a determination has never been easier, given the availability of computerized continuous performance tests.

To assist with the identification process, psychoeducational assessments have typically involved the use of standardized cognitive assessment tools in combination with academic testing instruments to identify attention and learning difficulties. These methods have been very helpful despite their limitations. Increasingly, however, continuous performance tests (CPT's) are being used to: (a) help objectively assess individuals suspected of having “attention” problems (including impulsivity and/or hyperactivity), and (b) monitor the treatment of these specific areas. Used in combination with traditional psychoeducational assessment methods, which also involves obtaining a comprehensive development history with behavioural ratings and observations, CPT's can provide important information about response control and attention skills in order to assist with various aspects of the assessment process. In fact, one such test, the Integrated Visual and Auditory Continuous Performance Test, was referred to in the scientific literature as “...a new, accurate cognitive test which can provide important objective data for inclusion in the assessment of ADHD” (Fine, A.H., PhD & Goldman, L., PhD., 1995). It's also the first test of its kind to provide an objective measure of fine-motor hyperactivity.

Continuous Performance Tests (CPT's) are brief computerized assessment instruments, which measure errors of attention and impulsivity as well as the speed and variability of subjects' responses. CPT's have been

well documented in both medical and psychological published research as being effective in identifying attention difficulties and evaluating medication and treatment effects. The most useful such instruments are multimedia CPT's in that they can identify both auditory and visual strengths and weaknesses. The inclusion of both senses in the testing process has been shown to maximize the sensitivity of this instrument to “real-life” demands, such as those faced by children in the classroom setting. CPT's are also effective for individuals ranging in age from about 5 years to adult and can differentiate between various types of attention problems (i.e. Inattentive vs. Hyperactive-Impulsive vs. Combined-type), while distinguishing them from various emotional, behavioural and/or learning difficulties-all of which can be found to co-exist with AD/HD.

The ability to identify AD/HD is especially significant because while most individuals who have overt impulsive and hyperactive tendencies can be readily identified, these who do not, often go unnoticed. This may be one reason why AD/HD is diagnosed much more frequently in males as compared to females and why adults are often under-identified. Recent evidence suggests that at least 33% of children with LD (Learning Disabilities) also have AD/HD, further confirming the need to differentiate diagnoses. For those reasons alone, such testing can help avert common mislabelling and concerns with self-esteem, thus enabling the individual to gain an immediate understanding of their preferred learning style and attentional strengths.

Finally, to address any possible concerns about medication or treatment effectiveness, it should be mentioned that this is where continuous performance tests have found to be especially useful. Suppose the physician responsible for this individual has suggested a trial run of a stimulant medication. How will you know if it is helpful and to what extent? Perhaps a higher dose may be more effective or a lower dose may be just as beneficial? Maybe an entirely different medication

would be best? While this may seem to further confuse the matter, such questions can most often be answered by obtaining CPT (pre and post-medication) results in order to objectively conclude the extent of change in cognitive functioning (performance). This type of irrefutable evidence can then be used to assist inaccurate medication titration (dosage) by providing immediate feedback to the physician, thereby, avoiding lengthy medication trials and potential undesirable side-effects. This way, often within several days or sometimes even hours of receiving a prescription, an individual, in consultation with a physician who requests this kind of objective feedback, can accurately determine which medication, if any, would provide the most benefit. Similarly, this type of testing can also be used to evaluate the effectiveness of any type of therapeutic intervention (e.g. psychotherapy, behaviour modification, computerized cognitive skills training, and the like) by conducting pre- and-post- intervention testing.

In order to answer the question that is so often raised: "Is it really AD/HD?", one only needs to ensure that fast and objective computerized continuous performance testing be used as a key component of the psycho-educational assessment process to accurately identify potential "attention-related" problems. As well, once a positive identification has been made, a secondary but equally useful function of this instrument is in the evaluation of medication and treatments effects. So "Is it really AD/HD?" Now you can find out.

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