

**DEVELOPMENTAL AND BEHAVIOURAL PEDIATRICS**
**ATTENTION DEFICIT HYPERACTIVITY DISORDER - FOR PRIMARY CARE PEDIATRICIANS**

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**Abstract:** Attention deficit hyperactivity disorder is a common behavioral disorder in children, persisting into adulthood. The core symptoms are inattention, hyperactivity impulsivity with educational, social and emotional impairments. They have a higher frequency of coexisting learning, language, motor, sensory, cognitive and conduct disorders. The definitive diagnosis is a challenge and is determined through careful history, assessments, looking for co-existing disorders and regular follow up for prognosis. Management involves behavioral therapies in early childhood and medications in adolescence and both in mid childhood. The goals of intervention should focus on enabling an individual for appropriate community, social and civic life. This comprehensive review aims to provide primary care pediatricians a detailed resume for understanding the pathogenesis, diagnosis and management of attention deficit hyperactivity disorder

**Keywords:** Hyperactivity, Inattention, Diagnosis, Management.

**Points to Remember**

- *ADHD is a common neurobehavioral disorder which can be easily identified and managed by primary care pediatricians, if there are no coexisting psycho behavioral concerns.*
- *The two core components of this disorder are developmentally inappropriate levels of inattention and hyperactivity/impulsivity, which result in functional impairment in one or more areas of academic, social, and emotional function.*
- *Onset of symptoms must be prior to 12 years of age and must have persisted for 6 months or more in 2 or more settings (e.g., school, home, church)*
- *All hyperactivity and inattention are not ADHD. Diagnosis is based on DSM-V Edition.*
- *If a child is exhibiting symptoms only at school, that may be due to a primary language, learning or intellectual disability. Alternatively, if child is having ADHD symptoms only at home, a parent child interaction problem might be the issue.*
- *Genetic, epigenetic and environmental factors contribute to the ADHD phenotypes.*
- *Management constitutes behavioral interventions and pharmacological modalities.*
- *Stimulant (Methylphenidate) and nonstimulant (Atomoxetine) medications are used and are preferred after 6 years of age.*

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