

Asperger's Disorder, Depression & Anxiety

- **Research conducted in Sweden recently indicates that 70% of those with Asperger's Disorder have experienced at least one Major Depressive Episode, and 50% have experienced recurring episodes. Fifty percent had Anxiety Disorders. None of the subjects had psychosis, but almost 50% meeting criterion for personality disorders.**

Lugnegård, T., Unenge Hallerbäck, M., Gillberg, C. (2011). Psychiatric comorbidity in young adults with a clinical diagnosis of Asperger syndrome. Research in Developmental Disabilities, 32, 1910-1917.

ASD Vs AD/HD

On Response Inhibition

- **A study comparing adults with AD/HD and adults with ASD found ASD adults had a slow but accurate response style, but AD/HD adults had an inaccurate and rapid response style.**

Johnston, K., Madden, A. K., Bramham, J. and Russell, A.J. (2011). Response Inhibition in Adults with Autism Spectrum Disorder Compared to Attention Deficit/Hyperactivity Disorder. Journal of Autism and Developmental Disorders, 41 (7), pp. 903-912.

ASD & Comorbid AD/HD With Social Skills Training

“Children with ASD and children with an ASD and comorbid anxiety disorder improved in their parent reported social skills. Children with ASD and comorbid attention deficit/hyperactivity disorder failed to improve” (p. 439).

Antshel, K.M., Polacek, C., McMahon, M., Dygert, K., Spencely, L., Dygert, L., Miller, L., and Faisal. F. (July-August, 2011). Comorbid ADHD and anxiety affect social skills group intervention treatment efficacy in children with autism spectrum disorders. Journal of Developmental and Behavioral Pediatrics, **32(6), 439-446.**

AD/HD & Coaching

“Students reported that ADHD coaching helped them become more self-regulated, which led to positive academic experiences and outcomes. Students described ADHD coaching as a unique service that helped them develop more productive beliefs, experience more positive feelings, and engage in more self-regulated behaviors. Conclusion: ADHD coaching helped participants enhance their self-control as they responded to the multifaceted demands of undergraduate life”.

Parker, D.R., Hoffman, S.F., Sawilowsky, S., Rolands (December 15, 2011). Self-Control in Postsecondary Settings: Students’ Perceptions of ADHD College Coaching. Journal of Attention Disorders, doi: 10.1177/1087054711427561

New Practice Guidelines for Pediatricians Working With AD/HD

**SUBCOMMITTEE ON ATTENTION-
DEFICIT/HYPERACTIVITY DISORDER, STEERING
COMMITTEE ON QUALITY IMPROVEMENT AND
MANAGEMENT (October 16, 2011). ADHD:
Clinical Practice Guideline for the Diagnosis,
Evaluation, and Treatment of Attention-
Deficit/Hyperactivity Disorder in Children and
Adolescents. Pediatrics, DOI:
10.1542/peds.2011-2654. From website:
<http://pediatrics.aappublications.org/content/early/2011/10/14/peds.2011-2654.full.pdf+html>.**

Changes in AD/HD Subtypes Over Time

“We found two hyperactivity-impulsivity trajectories (low, high/decreasing) and two inattention trajectories (low, high/increasing). Twin modeling revealed a substantial genetic component underlying both the hyperactivity-impulsivity and the inattention trajectory. Joint trajectory analyses identified four groups of adolescents with distinct developmental patterns of hyperactivity-impulsivity and inattention: a low/low group, a primarily hyperactive, a primarily inattentive and a combined (high/high) trajectory type...”

Changes in AD/HD Subtypes Over Time (Continued)

“... These trajectory combinations showed discriminant relations to adjustment problems in early adulthood. The hyperactive, inattentive and combined trajectory subtypes were associated with higher rates of family risk environments compared to the low/low group” (p. 254).

Larsson, H., Dilshad, R., Lichtenstein, P., and Barker, E.D. (September 2011). Developmental trajectories of DSM-IV symptoms of attention-deficit/hyperactivity disorder: genetic effects, family risk and associated psychopathology. Journal of Child Psychology and Psychiatry, 52(9), 954-963.

Motor Cortex Inhibition and AD/HD

Gilbert and colleagues found that children with AD/HD have reduced Short Interval Cortical Inhibition in their in their dominate motor cortex, thus demonstrating weakness with cortical inhibition. This may allow scientists to assess ADHD children longitudinally with regard to their motor development.

Gilbert, D.L., Isaacs, K.M., Augusta, M., Macneil, L.K., and Mostofsky (February, 2011). Motor cortex inhibition: a marker of ADHD behavior and motor development in children. Neurology, 76(7),615-21.

AD/HD and Ventral Attention

Helenius and colleagues found that adults with AD/HD have problems switching to stimulus-based reactions during tasks due to reduced activation of the ventral attention system in the temporal lobes.

Helenius, P., Laasonen, M., Hokanen, L., Paetau, R., and Niemivirta, M. (March 1, 2011). Impaired engagement of the ventral attentional pathway in ADHD. Neuropsychologia,49(7), 1889-1896.