

ADHD: An Excuse Or Mental Disorder?

By Zoe Holtz



Calling ADHD an excuse is as ridiculous as saying arthritis is an excuse for writing poorly. The brain is a physical organ just like every other part of the body. We are so accepting of helping those that have physical impairments because it's so easily visible. People who can't walk need wheelchairs and ramps to function to the same degree of mobility as those who are physically able. People with ADHD have slight differences in brain development but can thrive in society when given the proper tools, resources and medication.

Telling someone with ADHD to 'just focus' or 'just buckle down and get it done' won't instantly solve their situation. Just like telling someone to 'just walk' won't get them out of their wheelchair.

How Bad Can ADHD Be? Is It Even That Common?

An estimated [9.4% of children](#) in the USA have ADHD. Although some will lose all symptoms of ADHD in adulthood, the vast majority will continue to be impacted by it.

ADHD is a greatly impactful mental disorder. People with ADHD will face greater challenges with [employment, education](#), relationships and daily responsibilities. People with ADHD tend to earn less than those without ADHD, are more likely to be unemployed than those without ADHD and are more likely to attain lower education levels than those without ADHD. The divorce rate for adults with ADHD is roughly [twice as high](#) as those without ADHD.

Once you understand the symptoms of ADHD, it is clear how they would play a role in the many hardships that are commonly experienced by those with ADHD.

So What Are The Symptoms Of ADHD?

ADHD is defined as a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development, according to the [CDC](#).

The three symptom categories for ADHD are inattention, hyperactivity and impulsivity. For diagnosis during childhood, the patient must exhibit at least 6 symptoms from each category. In adulthood, only 5 symptoms in each category are required for diagnosis. A diagnosis in the USA often follows the [DSM-5 criteria](#) and is administered by a trained professional capable of diagnosing ADHD.

Additionally, those that are diagnosed with ADHD can be further categorized. Some patients will lean more towards inattention symptoms or more towards hyperactivity/impulsivity symptoms. Those who don't particularly lean in any direction are called "combined presenting".

The ICD-11 is a different, international set of criteria for diagnosing ADHD.

Does this sound like you or someone you know? People with ADHD might often space out of conversations, hyperfocus on a hobby or interest, procrastinate until the last minute, be generally forgetful, experience time blindness, feel emotional outbursts, get easily frustrated, be disorganized and [many other symptoms](#).

Why The Distinction Between Adult/Child ADHD?

The original diagnostic symptoms list was created to identify ADHD in children, which is why it includes items like ‘the patient acts as if driven by a motor’ or ‘climbs in inappropriate settings.’

Many adults will develop some coping mechanisms to limit the visible signs of ADHD. For example, climbing trees at the wrong times while in childhood can turn into constant fidgeting as an adult. The patient has the same impulse for activity but has adapted to channel it differently.

Additionally, since ADHD is a *mental* disorder and the brain changes over time (usually completing its development around the [mid or late twenties](#)), we should expect the presentation of ADHD to change over the course of brain development.

What’s Happening In The ADHD Brain?

Those with ADHD brains experience a combination of development delay and development deviation. Delay is [usually around 1-3 years](#) and ADHD children can ‘catch up’ in some respects to their peers. However, other development deviations in the brain can cause a persistence of symptoms that can not simply be grown out of. In particular, [inhibitory control](#) was persistent and not grown out of.

To get into the neuroscience of it all, those with ADHD were shown to [not deal with dopamine and norepinephrine in the same way](#) as other people. Dopamine is really important for sending messages between neurons, it’s a neurotransmitter and vital to our thinking, planning and pleasure-feeling abilities. Norepinephrine is also a neurotransmitter and a stress hormone, so it helps our neurons communicate with each other and helps us experience stress when released into the bloodstream.

These neurotransmitters are released to send signals throughout the brain and then ‘recycled’ through transporters back into the neuron. These neurotransmitters can’t just keep piling up between neurons so they have to get recycled to make way for future signals.

In an ADHD brain there can be an overabundance ([up to 70% higher dopamine transporter density](#)) of reuptake transporters so dopamine and norepinephrine is recycled too quickly. This means the neurons aren’t getting the right signal strength.

Many medications for ADHD such as Adderall, Ritalin and Concerta seek to address this issue by [acting as dopamine transporter blockers](#). When the medication is properly prescribed, the right amount of dopamine recycling occurs for a more focused brain. (Of course too much dopamine can also impair focus! You want the *right* among of recycling)

Many people face apprehension around taking ADHD medication, but there are plenty of scientific studies into the brain structures of those with ADHD that have made it incredibly clear why medication can target and fix the shortcomings of the ADHD brain’s design. Always talk to your physician to see what medication and care plan would be best for you or your child.

What Does It Feel Like To Have ADHD?

A lot of those with ADHD may not think they could have the disorder simply from going off of the acronym. ‘Attention Deficit and Hyperactivity Disorder’ won’t relate to a lot of people who actually have ADHD, because many will feel that they actually have *a lot* of attention but directing it towards the *right* things at the *right* time is their actual problem. A person with ADHD will have no problem hyperfocusing on a special interest for hours and hours, but trying to focus on laundry or homework might feel physically painful.

Inattentive subtypes of ADHD will not relate to the H in ADHD at all, which could prevent them from seeking treatment. Additionally, [girls with ADHD are underdiagnosed](#) and many factors could be at play here, such as their lower likelihood of being aggressive or disruptive and their higher likelihood of being inattentive subtype. Also, girls are historically underrepresented in ADHD research as patients, but [that is changing!](#)

One important point to make about these symptoms lists and a lot of the material that discusses ADHD is that it focuses on how ADHD behaviors and tendencies appear *outwardly*. It focuses on the problems you have that affect others and your productivity.

It's important to understand from written or verbal accounts how other people with ADHD experience it and not *just* focus on the clinical, outsider perspective. There are communities out there to lean on who have ADHD and they can offer vital perspectives into living with ADHD, like [this list of tips](#).

Of course, always get diagnosed by a professional! That is the first step to living your best life with ADHD.

Bibliography Links

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1781280/#:~:text=of%20survey%20population.-,Employment.controls%20across%20most%20demographic%20variables.>

People with adhd earn less than those without adhd, are more likely to be unemployed and attained lower levels of education

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4009719/>

40-60% will still have adhd disorder as adults

Heritability is as high as 76% for adhd, as shown by twin studies

ADHD is defined as 'a persistent pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development'

<https://adhd-institute.com/assessment-diagnosis/diagnosis/>

ICD-11 vs DSM-5

<https://www.psychologytoday.com/us/blog/may-i-have-your-attention/201309/adhd-doesnt-cause-divorce-denial-does>

Relationships, higher divorce rates 60% for older respondents vs similar rates for younger respondents.

70% respond well to medication

<https://health.usnews.com/health-news/family-health/brain-and-behavior/articles/2010/09/28/can-your-relationship-survive-adhd>

Higher divorce rate

DSM-5 criteria

<https://www.cdc.gov/ncbddd/adhd/diagnosis.html>

Brain development mid twenties

<https://www.nimh.nih.gov/health/publications/the-teen-brain-7-things-to-know#:~:text=Though%20the%20brain%20may%20be.%2C%20prioritizing%2C%20and%20controlling%20impulses.>

Delay and deviation

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3829464/#:~:text=While%20data%20from%20behavioral%2C%20neuropsychological,represents%20a%20deviant%20brain%20function.>

<https://www.healthline.com/health/adhd/adhd-dopamine#research>

Adhd dopamine

Many other symptoms

<https://www.mayoclinic.org/diseases-conditions/adult-adhd/symptoms-causes/syc-20350878>