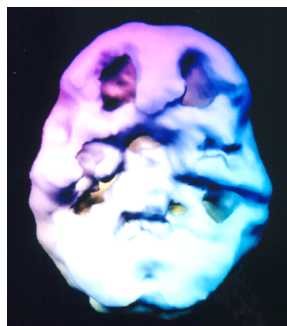


## COREPSYCH RADIO #4 MARCH , '09

THURSDAYS 4 EST, 3 CST, 2MST, 1PST



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**Review Last week:** Russell Jaffe MD PhD was recorded and will be posted on my blog site.

### Program 5: Today – Multiple Diagnoses with ADHD

#### 1. Start by looking for multiples

- a. One must always look at comorbidity, the idea that multiple diagnoses can co-exist in one person with one diagnosis on the front end
- b. ADHD is very complicated, not a simple description as we discussed in the first program. Labels don't work when we are interested in function over time and context. Context, changing reality, is a big problem, and can change the picture of the cognitive dysfunction associated with ADHD.
- c. If we don't appreciate the multiplicity of diagnoses we wind up treating only one and aggravating the others, often with catastrophic results... more in the book.

#### 2. The Three Most Common Comorbid Diagnosis All Require Different Meds.

- a. **ADHD** is the easy diagnosis to make for children,
- b. **Depression** is the easy one for adults.
- c. **Bipolar** is the most common catchall
- d. Medications given incorrectly can significantly aggravate the problem for anyone.
- e. Meds must be given with a strategy for all the diagnoses
- f. The closing point, the essential point, use this strategy
  - i. With Bipolar use mood stabilizers first
  - ii. With associated Depression it will be next, low dose
  - iii. ADHD is always last in this group, unless
  - iv. Unless it is the primary illness.