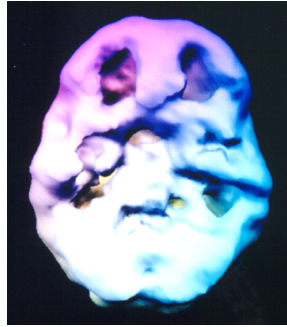


COREPSYCH RADIO #6 APRIL 2, '09

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



DR CHARLES PARKER

757.473.3770 EXT 203

www.corepsychblog.com/cpradio @ www.myexpertsolution.com

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

Program 6: Today – ADHD and Depression

1. Advancing Technology: The laboratory findings have changed so dramatically that the new information seems unreal. I was at a meeting recently with molecular and cellular physiologists arguing “old news” about how the intergenomic cross talk occurs between a nucleus of a cell in communication with that cell’s mitochondria. These systems can significantly effect neurotransmission.
2. SPECT and other brain imaging systems can actually see where specific neurotransmitters, such as dopamine, become active in the brain.
3. Antidepressant medications have become increasingly more effective and more widely used for treating more than depression.
4. We know much more about the CYP 450 metabolic pathways, and how they can, and do, interfere with certain medications causing drug-drug interactions.
5. The world of stimulant medications has changed even more profoundly in moving from first and second generation stimulants to now a third generation stimulant. [First Generation: immediate release such as Ritalin or Dexedrine; Second Generation: extended release such as Concerta, Adderall XR; Third Generation: prodrug – Vyvanse with a different time release process unaffected by acid-base balance or transit time] Many do not appreciate these differences.
6. The trend to using antipsychotics and mood stabilizers [e.g. Risperdal and Lithium] for 'impulsivity' that doesn't appear to fall under the label of 'hyperactivity' appears in increasing frequency with diminished awareness of the complexity of ADHD comorbidity. These are seen on the rise with multiple second opinions in my office - resistance and confusion about ADHD diagnosis.
7. We can be much more confident regarding side effects and medication predictability than we were even 5 years ago, leading to a false sense of security with partial ADHD diagnosis - if a little ADHD then they must be all ADHD. In psychoanalysis, we called that the incomplete interpretation.