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2010 : May 2010 - Fast Moving Fronts : Ron Kessler on Adult ADHD

May 2010



Ron Kessler talks with *ScienceWatch.com* and answers a few questions about this month's Fast Moving Fronts paper in the field of Neuroscience & Behavior.



Article: The prevalence and correlates of adult ADHD in the United States: Results from the National Comorbidity Survey Replication
Authors: **Kessler, RC**;Adler, L;Barkley, R;Biederman, J;Conners, CK; Demler, O;Faraone, SV;Greenhill, LL;Howes, MJ;Secnik, K;Spencer, T; Ustun, TB;Walters, EE;Zaslavsky, AM
Journal: AMER J PSYCHIAT, 163 (4): 716-723 APR 2006
Addresses: Harvard Univ, Sch Med, Dept Hlth Care Policy, 180 Longwood Ave, Boston, MA 02115 USA.
Harvard Univ, Sch Med, Dept Hlth Care Policy, Boston, MA 02115 USA.
NYU, Med Ctr, Dept Neurol, New York, NY 10016 USA.
(addresses have been truncated.)

SW: Why do you think your paper is highly cited?

Although it was traditionally believed that attention-deficit/hyperactivity disorder (ADHD) spontaneously remits in adolescence, evidence has been accumulating to suggest that a substantial proportion of children with ADHD continue to be symptomatic as adults and that adult ADHD causes substantial problems (e.g., high rates of auto accidents) that might be prevented with treatment.

Prior to our study, though, most epidemiological evidence on this issue came from follow-up studies into adulthood of people who had been in ADHD treatment studies when they were children. Our national general household survey data provided much more compelling evidence than these earlier studies of the high prevalence of adult ADHD.

SW: Does it describe a new discovery, methodology, or synthesis of knowledge?

The value of the paper lies in the use of an improved methodology to address a basic descriptive question.

SW: Would you summarize the significance of your paper in layman's terms?

The paper shows that more than 4% of adults in our national sample met criteria for ADHD, that many of these people also had other co-occurring emotional problems that started subsequent to the ADHD, that treatment of the co-occurring problems was comparatively high, but that few of these people were receiving treatment for

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their ADHD.

The high prevalence estimate in the sample suggests that ADHD is one of the most commonly occurring adult mental disorders. The high rate of co-occurrence suggests that persistent ADHD might be a causal of secondary emotional disorders. The low rate of treatment tells us that there is a problem of recognition of adult ADHD.

SW: How did you become involved in this research and were any particular problems encountered along the way?

We originally included ADHD in our survey only as a way for our adult respondents to give us retrospective information about their experiences in childhood. It was really no more than an afterthought to add a few questions about persistence of the symptoms into adulthood.

When the survey was completed, though, we were struck by the high proportion of respondents who reported adult persistence. It was only at this late date in the research process that I became familiar with the literature on adult ADHD.

Based on consultation with a number of experts in the field, who subsequently became coauthors of the paper, I came to realize that a follow-up of the sample to obtain more detailed information about their current ADHD symptoms would be valuable. I consequently obtained funding for the follow-up survey that is reported in this paper.

SW: Where do you see your research leading in the future?

We subsequently developed a screening scale to detect adult ADHD efficiently and we have administered this scale in a number of large community surveys as well as workplace surveys that studied the prevalence and societal burden of adult ADHD.

We documented substantial burden in the workplace in terms of increased workplace accidents and injuries along with decreased work performance.

A model workplace screening, outreach, and best-practices treatment program was developed in response to this evidence and we are now in the process of evaluating the cost-effectiveness of that intervention.

SW: Do you foresee any social or political implications for your research?

There are always social implications of health research, but probably more so for this line of work than many others because of the high prevalence of the condition, the availability of interventions (which include not only medication but also social-skills training of people who have lived for many years with untreated ADHD), and the current low rate of treatment.

The potential exists to improve the lives of many people by making them aware of their ADHD and encouraging them to get treatment. There are also political implications, though, in that the integrity of the field of psychiatric treatment research has been shaken in recent years by accusations that researchers have made false claims about the effectiveness of treatments.

I believe that it is very important to carry out effectiveness studies in real-world settings with community collaborators—in my own case, experimental treatment studies implemented in large corporations with

"...the integrity of the field of psychiatric treatment research has been shaken in recent years by accusations that researchers have made false claims about the effectiveness of treatments."

the active collaboration of corporate medical directors—to provide accurate information about the true effectiveness of treatments as they are provided in practice in real-world settings. That, in my view, is the only way to address political concerns about bias in industry-sponsored treatment studies.

Ronald C. Kessler, Ph.D.

Professor

Department of Health Care Policy

Harvard Medical School

Boston MA, USA

[Web](#)

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