

# Is there *more* to your patients' ADHD?

## Your ADHD patients may still be struggling

ADHD diagnostic criteria focus on 3 symptoms: inattention, hyperactivity, and impulsivity.<sup>1</sup> Yet ADHD is a heterogeneous condition that may also present with a wide range of comorbidities and associated symptoms—including executive dysfunction—that contribute to patient burden.

As many as **58% of adults treated with ADHD medications may still experience impairments** in daily life.<sup>2</sup>

### Watch for these *associated symptoms* of ADHD<sup>1</sup>



#### Emotional dysregulation

- Mood swings
- Irritability or frustration intolerance
- Difficulty managing stress



#### Executive dysfunction

- Problems with planning, prioritizing, and time management
- Poor working memory



#### Social challenges

- Difficulty maintaining relationships
- Misinterpreting social cues
- Low self-esteem due to repeated academic, social, or occupational struggles



#### Sleep disturbances<sup>3,4</sup>

- Trouble falling or staying asleep
- Irregular sleep patterns

## The full burden of ADHD

It's important to consider all of your patient's ADHD, including associated symptoms. In addition, comorbidities with overlapping symptoms may further complicate diagnosis and treatment.<sup>5,6</sup> Even when treated, ADHD may lead to chronic social, occupational, interpersonal, and health challenges that can cause a ripple effect within families and communities.<sup>1</sup> **Patients may be left wondering: Is it me or my ADHD?**

→ Up to **45% of children\*** and **70% of adults\*\*** with ADHD struggle with emotional dysregulation<sup>7</sup>

→ Up to **80% of adults** with ADHD have at least 1 comorbid psychiatric disorder<sup>8</sup>

→ **64% of children** with ADHD have at least 1 comorbid condition<sup>9</sup>

\*Clinic-based studies in children ages 4-18 with ADHD have reported emotional dysregulation prevalence estimates of 25%-45%.

\*\*Clinic-based studies in adults with ADHD have reported emotional dysregulation prevalence estimates of 34%-70%.

**REFERENCES:** 1. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed., text rev. 2022. 2. Brown TE, et al. *Prim Care Companion CNS Disord*. 2019;21(3):18m02397. 3. Brevik EJ, et al. Prevalence and clinical correlates of insomnia in adults with attention-deficit hyperactivity disorder. *Acta Psychiatr Scand*. 2017;136(2):220-227. 4. Diaz-Román A, et al. *Neurosci Biobehav Rev*. 2018;89:61-71. 5. Centers for Disease Control and Prevention. Published November 19, 2024. Accessed April 24, 2025. 6. Jain R, et al. *Prim Care Companion CNS Disord*. 2017;19:17nr021535. 7. Shaw MB, et al. *Am J Psychiatry*. 2014;171(3):276-293. 8. Katzman M, et al. *BMC Psychiatry*. 2017;17(302). 9. Danielson ML, et al. *J Clin Child Adolesc Psychol*. 2018;47(2):199-212.

© 2025 Otsuka America Pharmaceutical, Inc. All rights reserved. September 2025 26US25EUP0006