

UVM Project ECHO Mental Health Advanced Series: ADHD In Primary Care

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ECHO Director: Patti Smith Urie

Series Faculty:

Clara Keegan, MD

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Didactic presentation is recorded. Registered participants will receive the link.

Session Agenda

- Welcome
- Objectives
- Didactic Presentation (30-35 min)
 - Q&A
- Case presentation(s)
 - Clarifying questions
 - Discussion
- Closing Announcements
 - Topic and cases for next session
 - Feedback and evaluation



ECHO Model: All Teach, All Learn



Cohort-based learning on ZOOM

- Have your camera on as much as possible, especially when joining the meeting and during discussions
- Questions and comments are welcome – use the “raise hand” feature or put them in the chat
- This is not a webinar! Participation is key

Case-based learning

- 1-2 participant cases each session using provided template
- Contact Mark Pasanen to present a case

Series Objectives

Learning objectives for this ECHO series include the ability to:

1. Develop enhanced diagnostic and assessment skills to rule in or rule out ADHD in your practice
2. Design standard of care pharmacologic and therapeutic treatment plans for patients with ADHD
3. Discuss the complexity of ADHD and intersecting conditions (i.e., ASD, depression and anxiety)

CMIE Disclosures

The Robert Larner College of Medicine at The University of Vermont is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing medical education for the healthcare team.

The University of Vermont has approved your application and designates each session a maximum of **1.5 AMA PRA Category 1 credit(s)**TM.

This program has been reviewed and is acceptable for up to **1.5 Nursing Contact Hours**.

The Robert Larner College of Medicine University of Vermont has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for **1.5 AAPA Category 1 CME credits**.

As a Jointly Accredited Organization, The Robert Larner College of Medicine at the University of Vermont is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. The University of Vermont maintains responsibility for this course. Social workers completing this course receive 1.5 continuing education credits.

Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to **1.5 MOC points** in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program; It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM or ABP MOC credit.

This activity was planned by and for the healthcare team, and learners will receive 1.5 Interprofessional Continuing Education (IPCE) credit for learning and change.

Participants should claim only the credit commensurate with the extent of their participation in the activity.

CMIE Disclosures

Interest Disclosures: As an organization accredited by the ACCME to sponsor continuing medical education activities, UVMCMIE is required to disclose any real or apparent conflicts of interest (COI) that any speakers may have related to the content of their presentations.

Meeting Disclaimer: Regarding materials and information received during this educational event, the views, statements, and recommendations expressed during this activity represent those of the authors and speakers and do not necessarily represent the views of the University of Vermont.

ADHD and Neurodiversity

Abby Ryan, PhD, ABPP-CN

Board Certified Clinical Neuropsychologist

November 20, 2024

Session Objectives

Learning objectives for this ECHO session include the ability to:

1. Discuss the diagnostic features of ASD
2. Identify how frequently ADHD and ASD co-occur
3. Distinguish overlapping features of ADHD and ASD in adults
4. Think through when both diagnoses would be appropriate

Autism Spectrum Disorder (ASD) Diagnostic Criteria

A) Persistent deficits in social communication and social interaction across multiple contexts (current or by history)

- 1. Deficits in social-emotional reciprocity**
- 2. Deficits in nonverbal communicative behaviors**
- 3. Deficits in developing, maintaining, and understanding relationships**

B) Restricted, repetitive patterns of behavior, interests, or activities

- 1. Stereotyped or repetitive motor movements, use of objects, or speech**
- 2. Insistence on sameness, inflexible adherence to routines, ritualized patterns of behavior**
- 3. Highly restricted, fixated interests that are abnormal in intensity or focus**
- 4. Hyper- or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment**

(DSM-5-TR, APA 2022)

Co-occurrence of ASD and ADHD

- **Prior to DSM-V, ASD was an exclusion criterion for ADHD diagnosis**
- **20-70% of children with ASD have ADHD**
- **ADHD is one of the most common co-morbidities in ASD**
- **Very little symptom overlap in the diagnostic criteria**
- **Some research exploring if they are part of a continuum**
 - **Shared environmental risk factors and genetic loading**
- **A new term online, AuDHD, is an informal way of saying a person has both**

(Rong et al., 2021; Davis et al., 2022)

DSM-V-TR's take on differential diagnosis

- Shared symptoms
 - Abnormalities in attention
 - Social dysfunction
 - Behavioral management difficulties
- Divergent symptoms
 - Restricted, repetitive behaviors
 - Hyperactivity
 - Lack of response to nonverbal cues

(DSM-5-TR, APA 2022)

Overlapping Features – Social/Communication

- Social and Communication Difficulties
 - Core feature of ASD; present in ADHD but not in dx criteria
 - The nature and source of difficulties helps with diagnosis
 - ASD: **lack of ability** to read social cues, know what is expected, take others' perspective, communicate reciprocally, and low social motivation can impact social/communication abilities
 - ADHD: the **presence of ADHD symptoms (e.g., inattention, poor self-regulation)** **impacts social abilities**, not a lack of prosocial behaviors or social motivation

(Davis et al., 2022)

Overlapping Features - RRBs

- Restricted, Repetitive Behaviors (RRBs) and Interest
 - Core feature of ASD
 - Suggested to be a good way to differentiate from ADHD
 - Some research showing more RRBs in ADHD than in non-ADHD samples
 - Higher levels of insistence on sameness, circumscribed interests, sensory processing concerns, and stereotyped motor behaviors in ADHD samples
 - The intensity, quality, and reason for the RRBs can help differentiate

(Davis et al., 2022)

Overlapping Features - RRBs

- Motor movements
 - ASD: fixed, rigid, stereotyped
 - ADHD: secondary to poor self-regulation, less stereotyped
- Rigidity around transitions and interests
 - ASD: interests more likely to be highly restricted, can be unusual in both content and level of interest; transition problems reflect insistence on sameness, dysregulation triggered by changes
 - ADHD: interests may be restricted, but likely age appropriate; difficulty shifting attention can contribute to inflexible behavioral presentation
- Sensory processing difficulties
 - Sensory over-responsivity seen in both
 - Downstream consequences greater in ASD

(Davis et al., 2022)

Overlapping Features – Attention Difficulties

- Attention difficulties are a core feature of ADHD
- Not in the dx criteria for ASD, yet a common feature

- Sustained attention difficulties
 - ADHD – hallmark feature, more pronounced with boring/tedious tasks
 - ASD – may be more specific to social interactions, lack of understanding, overfocus on circumscribed interest

- Difficulty managing external distractions
 - ADHD – core feature, commonly associated with general distractions
 - ASD – in the context of specific sensory interests, or sensory aversion

(Davis et al., 2022)

Overlapping Features – Hyperactivity/Impulsivity

- Age-inconsistent levels of hyperactivity/impulsivity can be a core feature of ADHD
- Not part of ASD dx criteria, but can be present
- Excessive talking
 - ADHD – often socially motivated, associated with reduced impulse control
 - ASD – can related to circumscribed interest, not focused on social goal of having a shared experience
- Difficulty remaining seated
 - ADHD – due to high levels of hyperactivity, low impulse control
 - ASD – may reflect lack of understanding of social rules, sense of physical restlessness

(Davis et al., 2022)

Case Presentation

Bringing Knowledge to Action through interactive, case-based discussions

Participant presents the case and poses the question(s) for the group



Clarifying questions about the case from group to case presenter



Ideas, suggestions, recommendations from participants



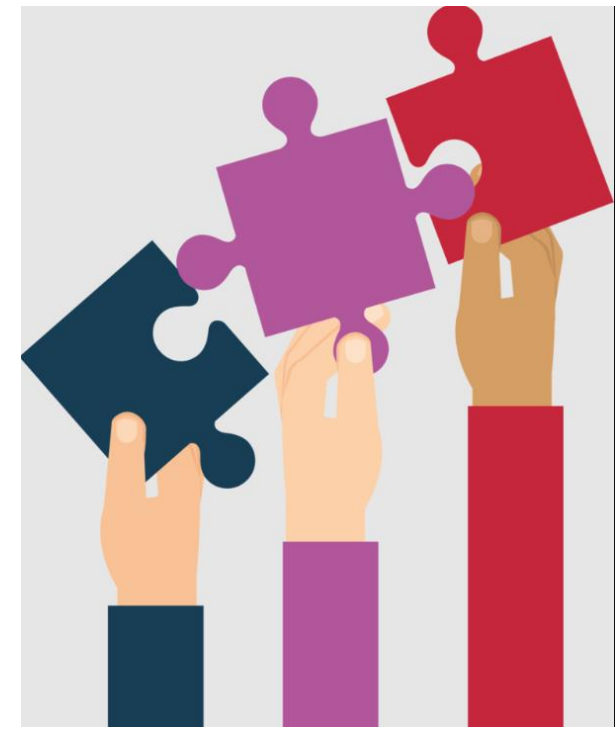
Ideas, suggestions, recommendations from ECHO faculty team



Full group discussion



Summary and wrap-up by facilitator



Case Presentation



DO NOT INCLUDE:

Names, Address, DOB, Phone/Fax #, Email address, Social Security #, Medical Record #

Consider the level of detail necessary. Go with less when possible.

The discussion and materials included in this conference are confidential and privileged pursuant to 26VSA Section 1441-1443. This material is intended for use in improving patient care. It is privileged and strictly confidential and is to be used only for the evaluation and improvement of patient care.

Case

(For registered participants)

UVM Office of Primary Care and AHEC Program

University of Vermont Project ECHO Mental Health Advanced Series: ADHD in Primary Care

2024 FALL SERIES – Wednesdays from 12:00 to 1:30PM

WHO SHOULD ATTEND?

Individuals or practice teams throughout Vermont providing adult primary care, including Family Medicine and Internal Medicine, Gynecology, as well as pediatricians serving young adults in transition from pediatric to adult mental health care.

SCHEDULE

Sept 11	Diagnosis and Screening of ADHD in Primary Care, <i>Clara Keegan, MD</i>
Sept 25	ADHD self-management at school, work and home, <i>Krista Buckley, MD</i>
Oct 9	Treatment basics, <i>Michael Hernandez, MD</i>
Oct 23	Special Topics in ADHD, <i>Evan Eyler, MD</i>
Nov 6	New Treatments, <i>Sara Pawlowski, MD</i>
Nov 20	ADHD and Neurodiversity, <i>Abigail Ryan, PhD</i>
Dec 4	Wrap-Up and Review/Participant identified topics, <i>Mark Pasanen, MD</i>

Closing Announcements

- Slides are posted at www.vtahec.org
- Recording of didactic portion will be sent by email to the full cohort
 - **All recordings are for the use of registered participants only**
- Please complete the evaluation survey
- CMIE information and session QR code auto-send after evaluation
- Please contact us with any questions, concerns, or suggestions:
 - Mark.Pasanen@uvm.edu
 - Patti.Smith-Urie@uvm.edu