



CALIFORNIA CENTER
for Infant-Family and Early Childhood Mental Health
at WestEd Center for Prevention & Early Intervention



Foundations of Infant-
Family and Early Childhood
Mental Health Training
Course: Differential
Diagnosis of ADHD, Typical
Development, Relationship
Disorder, PTSD or other Axis
I Disorder? Why Diagnosis
Matters

Date: January 20, 2018

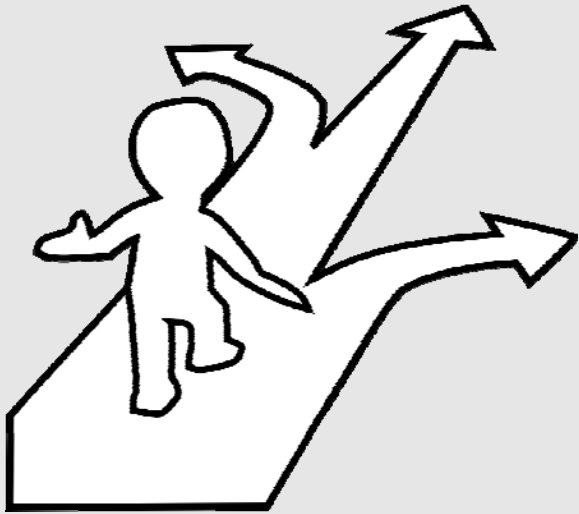
Presenter: Mary Claire Heffron, Ph.D.

Early Childhood Mental Health Program, Early
Intervention Services

Mental Health Specialist (MHS) Series

Knowledge Areas

- Knowledge Area E: Observation, Screening and Assessment. 3 hours.
- Knowledge Area F: Multidisciplinary Collaboration. 2 hours.
- <https://www.youtube.com/watch?v=muj5d8JMzRw>



- Axis I-V DC 0-5 Observation and Assessment
Builds Understanding and Helps Make Distinctions USEFUL for Treatment Plans
- **ADHD/Overactivity Disorder of Toddlerhood**
 - **POST TRAUMATIC STRESS DISORDER**
 - **Relationship Specific Disorder of Infancy/Early Childhood**

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ADHD Treatments For Preschoolers (ages 4-5)

Be sure they get what's best!

Where we have been:
(Treatment practices, 2009-2010)

Almost **1 in 2** preschool children with ADHD got **no behavioral therapy**. About **1 in 4** were treated **only with medication**.

Where we need to go:
(Treatment guidance, 2010)

Provide **behavioral therapy first**, before medication.

What can you do?

Parents: Talk to your doctor about behavioral therapy for your preschool child's treatment.

Healthcare professionals: Be aware of the psychological resources in your community and be prepared to refer children, particularly preschoolers, for behavioral therapy as recommended by the American Academy of Pediatrics (AAP).

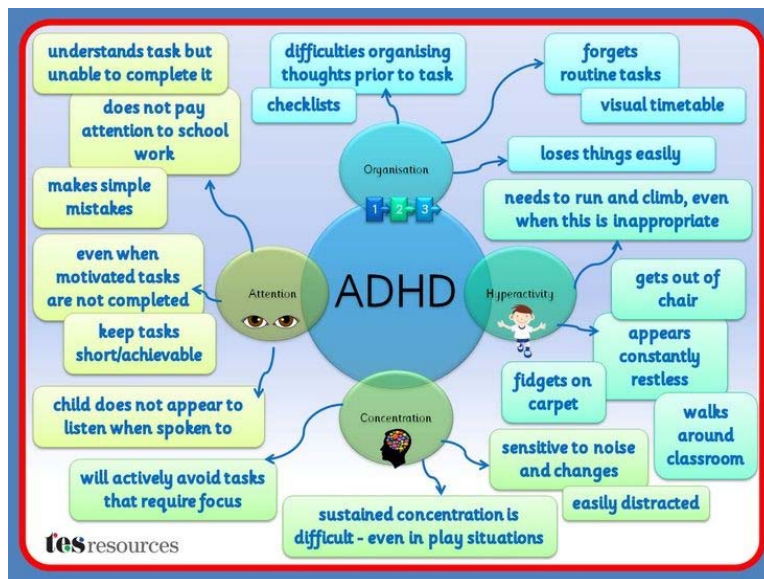
FOR MORE INFORMATION:
www.cdc.gov/adhd
 Twitter: @CDC_NCBDDD

Centers for Disease Control and Prevention
 National Center on Birth Defects and Developmental Disabilities

DESCRIBE THAT DIAGNOSIS

- Opening exercise: Finding language from the DC-0-5 axes to describe observations to help begin a healing process.
- Form in teams of 5 making sure that your team has a mix of experienced and less experienced participants.
- Recall a child that you know or have treated that you or others felt had ADHD type symptoms. What was your experience of being with this child and family.

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Over Activity Disorder of Toddlerhood 24-36 months

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Over Activity Disorder of Childhood

Must meet six of the criteria:

- Frequently squirms or fidgets when expected to be still
- Gets up or attempts to get up from seat, car seat etc.
- Climbs on inappropriate objects
- Seems to make more noise than other kids
- What seems to be excessive motor activity and talking
- Hard time taking turns or waiting
- Often intrusive in play

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Symptoms

- Symptoms must be present in two settings
- Child's behaviors must be excessive when compared with developmental and cultural norms
- Symptoms or caregivers accommodations must cause distress, interfere with relationships, limit child and family participation in regular activities
- Impact child's developmental progress or ability to learn

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Diagnostic Algorithm-ADHD (at least 36 months old) Inattention cluster

- Not careful and attentive to details
- Hard time maintaining focus
- Often fails to attend to verbal requests
- Avoids/rejects activities that require prolonged attention
- Frequently gets distracted by sounds or sights
- Appears to forget what he or she is doing in routines or activities

Diagnostic Algorithm-ADHD (at least 36 months old) Impulsivity cluster

- Squirms or fidgets when expected to sit still even for short periods
- Gets up from seat when sitting is expected, e.g. meals, circle time, church
- Often climbs on furniture or other inappropriate objects
- Makes more noise than other children has difficulty playing quietly
- Often seems “driven by a motor”
- Usually talks too much
- Has a hard time taking turns in conversations or interrupts
- Has a hard time taking turns or waiting for needs
- Intrusive in play or other activities

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Additional Considerations and Important Differentials to Consider before making an ADHD DX

- **Lead Exposure**
- **Sleep Deprivation**
- **Exposure to trauma**
- **Absence Seizures**
- **Inappropriate expectations about development or educational/care environments**

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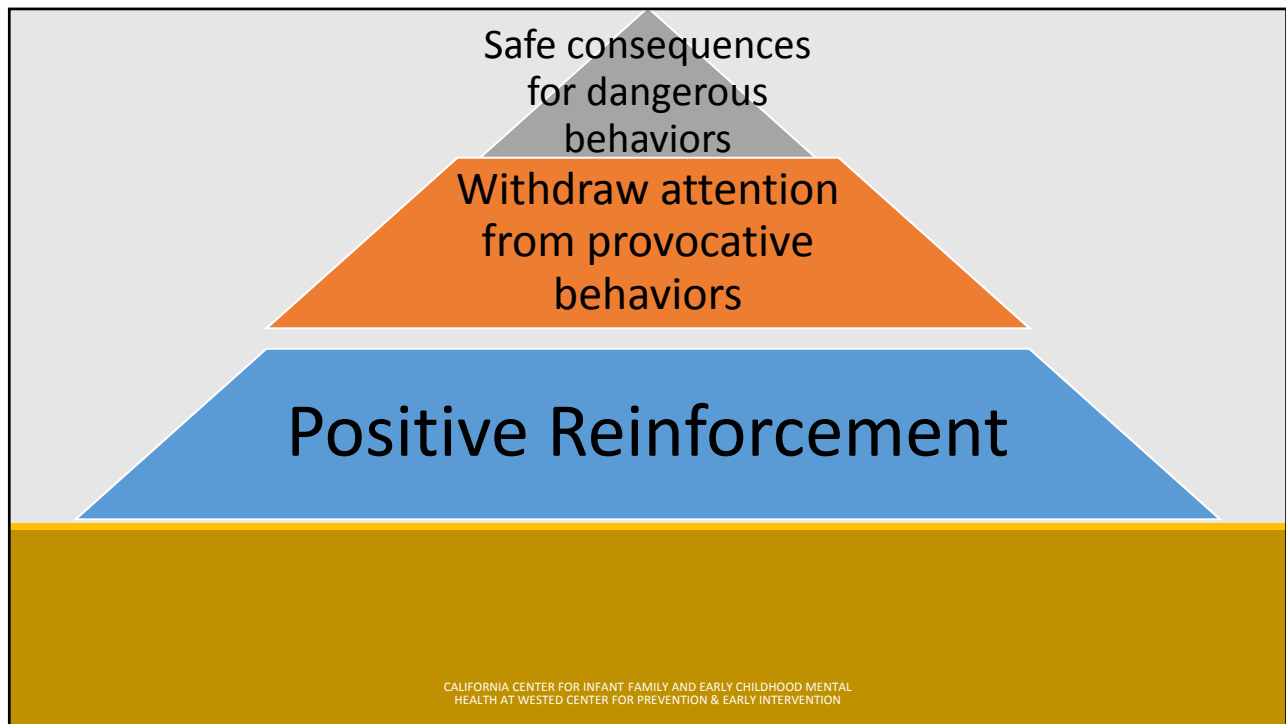
ADHD can be associated with.....

- Oppositional Defiant Disorder
- Separation Anxiety Disorder
- Major Depressive Disorder
- Generalized Anxiety Disorder

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Guided activity helps preschoolers
with high activity levels

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PTST and ADHD Thinking about the Differential

With a partner, think about the kinds of differences that might be present and the kind of information you would seek for these two diagnoses under discussion.

PSTD Symptoms and Diagnostic Details

- Direct experience, hearing, seeing in person or learning about the traumatic event happening to a significant person
- Evidence of Re-experiencing the event
- Dampening of positive emotional experience
- Avoidance of trauma related stimuli
- Hypervigilance /startle/ irritability
- Interferes with relationship, or limits participation in age appropriate activities.

PTSD and ADHD Thinking about the Differential

What would you add to your discussion about the differences in these cases. What can we learn from our own responses to children with these difficulties and to their parents.