

ADDENDUM TO THE FINAL PROGRAM OF THE 38TH ANNUAL MEETING

- **Poster Session 3-Page 70:** M. HOLCOMB & K.Z. DONNELLY. *How Is Sleep Disturbance Related to TBI Status, Cognitive Performance, and Affective Symptoms in OEF/OIF Veterans?*

Add GROHMAN, K as a second author on abstract

- **Poster Session 6-Page 144:** J. WASSERSTEIN, M.V. SOLANTO, D. MARKS & K. MITCHELL *Diagnosis of ADHD in Adults: What is the Appropriate DSM Symptom Threshold?*

Abstract should read:

Objective: Current DSM-IV symptom criteria for ADHD are based on field studies with children (ages 6-17 years) and may not be applicable for adults. Objective is to analyze dimensional data from a well-normed questionnaire to empirically identify appropriate symptom thresholds for adults with ADHD. **Participants and Methods:** Participants were 88 adults [mean (SD) age = 41 (12) years, 66% female] meeting formal DSM-IV criteria for ADHD Combined or Primarily Inattentive subtypes based on a structured diagnostic interview corresponding to DSM-IV (CAADID). All adults also completed the Conners Adult ADHD Rating Scale (CAARS), which provides T-scores to assess symptom levels relative to the normal adult population and includes subscales for DSM-IV Inattentive and Hyperactive-Impulsive symptoms. A T-score threshold of 65 (at least 1.5 SD above population mean) was used to identify participants with statistically elevated symptom severity. Given population parameters, only Hyperactive-Impulsive symptoms were analyzed. **Results:** Forty-eight of 88 (55%) adults participating in the study had a T-score of at least 65 (1.5 SD) on the CAARS DSM-IV Hyperactive-Impulsive scale. Of these, only 25 (52%) met the DSM-IV cutoff of 6 hyperactive-impulsive symptoms on the CAADID. Thus, roughly half reported significantly elevated hyperactive-impulsive complaints on the CAARS, but did not meet current 6 symptom DSM-IV cutoff on the CAADID. By contrast, an alternative cutoff of 4 hyperactive-impulsive symptoms on the CAADID captured 39 (81%) cases identified by the CAARS. **Conclusions:** Mandating at least 6 hyperactive-impulsive symptoms excludes a significant percentage (almost half) of adults who are at least 1.5 SD above the population mean on a dimensional measure of hyperactivity-impulsivity. These data provide a compelling basis for lowering the symptom threshold of hyperactivity-impulsivity for adults in the DSM-V, and for further study regarding the appropriateness of the current hyperactive-impulsive (hyp-imp) symptom threshold.

- **Poster Session 7-Page 170:** Borod, J.C. *The Effect of Demographic Variables on the Emotional Perception Tasks from the New York Emotion Battery.*

The order of Authors should be: J.C. Borod, E.B. Teague, T.E. Myers, & D. Krch