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CHILDHOOD RISK FACTORS FOR SUBSTANCE USE DISORDERS IN ATTENTION DEFICIT HYPERACTIVITY DISORDER SUBJECTS

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Introduction: Co-morbidity between Attention Deficit Hyperactivity Disorder (ADHD) and Substance Use Disorders (SUD) is considered to be about 25-50% in adults. Several studies show vulnerability factors to later SUD to be associated with childhood ADHD features, such as conduct problems, untreated ADHD and maltreatment.

Objectives: To define childhood ADHD associated factors that predispose to SUD.

Specifically, comorbidity with oppositional defiant disorder (ODD) and conduct disorder (CD), temperamental traits, academic failure, familial SUD history, childhood maltreatment and subtype, severity and age of treatment of ADHD symptoms.

Methods: A comparative study was carried out in a sample of ADHD adults from the Department of Psychiatry H.U. Vall d'Hebron. Both groups, ADHD and ADHD+SUD subjects underwent the following assessment protocol: Conners Adult ADHD Diagnostic Interview for DSM-IV (CAADID-I & II), Wender Utah Rating Scale (WURS), SCID-I, SCID-II and K-SDAS.

Results: The total sample (n=305) consisted of 201 men (66%) with age between 18-61 years. Two groups were compared: 162 ADHD subjects and 143 ADHD+SUD subjects. The ADHD+SUD group had significantly higher rates of comorbidity with ODD and CD, temperamental traits (obstinacy, bad temper, impulsive behavior), maladaptive behaviors at school, familial SUD history, childhood maltreatment, and major severity of the childhood ADHD symptoms. Neither ADHD subtype nor the non-treatment of ADHD during childhood were associated with later SUD.

Conclusions: An important percentage of ADHD children develop a SUD during their lifespan. This study shows that there are childhood factors that are strongly associated with SUD in ADHD subjects.