

Knowledge and Awareness about ADHD among Parents Visiting OPD of Saveetha Dental College

S. Aishwarya

Saveetha Dental College and Hospitals,

Abstract: Aim: The aim of the research is to find the knowledge and awareness of the parents about the ADHD deficiency. Objective: The study is to establish the awareness about the etiology, signs and symptoms, treatment and prevention of Attention Deficit Hyperactivity Disorder. Result: On analysing the above data, 59% of the parents were about the causes for ADHD and 41% were not aware. Conclusion: Based on the above results, comparatively many parents were aware about the ADHD and its causes and prevention. So awareness about ADHD is found to higher among the parents.

1. Introduction

Attention deficit hyperactivity disorder (ADHD) is characterized by pervasive and impairing symptoms of inattention, hyperactivity, and impulsivity according to DSM-IV [1]. Although ADHD have been repeatedly linked to deficits in executive functions for e.g. The central executive component of working memory, it is known to play a minimum or less role in dual tasks in children with ADHD[2].

The causes of ADHD involves genetic factors and dysfunction of the dopamine and no repinephrine neuro transmitter systems in the front ostriatal circuitry [3]. Children with ADHD are more likely to show poor performance in physical education classes and are more prone to injuries [4]. It is a chronic condition that begins in childhood and may continue upto adulthood. According to studies, ADHD is found 3-6 times more in boys than in girls [5]. The learning ability of these children's get altered, as children with ADHD are more likely than unaffected children to experience learning problems, miss school, become injured, experience troublesome relationships with family members and peers and exhibit mental and physical conditions [6,7,8]. Even though the origin of ADHD is not fully understood, emerging evidence suggests that both genetic and environmental factors play an important roles [9,10,11]. It is been found that maternal anxiety [12] and

changes from moderate to severe life events during pregnancy increase the risk of obstetric complications such as preeclampsia, fetal distress, preterm birth, and low birth weight and predict an increase in neonatal crying and also chances of ADHD [13,14].

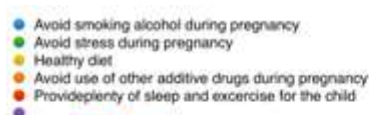
2. Methods and Materials

A cross sectional survey was conducted to evaluate the knowledge about ADHD among the parents visiting Saveetha Dental College. A questionnaire was distributed to parents in order to evaluate their knowledge and awareness regarding the ADHD. The responses were recorded verbatim by interviewers. The two variables were constructed to measure the knowledge of ADHD from these responses. The responses were analysed in descriptive manner.

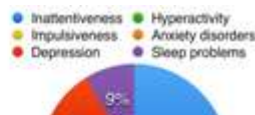
3. Result

Table 1

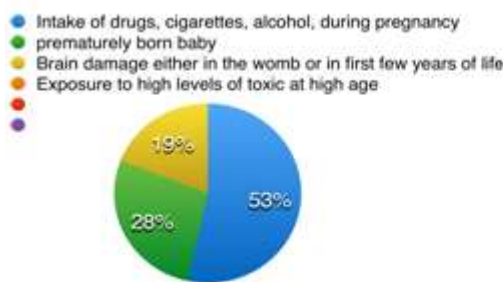
	Etiology	Signs and symptoms	Investigations	Treatment	Prevention
Aware	59	60	42	73	86
Not aware	41	40	58	27	14
Total	100	100	100	100	100



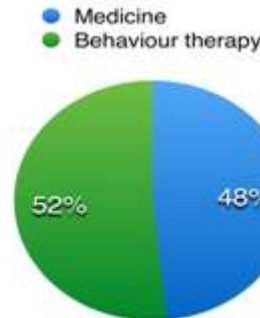
Graph 1



Graph 2



Graph 3



Graph 4

On analysing the above data, 59% of the parents were aware about the causes for ADHD, 60% of them were aware about signs about ADHD, 42% were aware about the investigations and 73% of the parents were aware about the treatment and 86% of them were aware about the preventive methods.

4. Discussion

According to McLeod, et al whose survey reported that awareness of ADHD and the content of respondents' knowledge. Not quite two-thirds of General Social Survey respondents (64%) indicated that they had heard of ADHD and were able to provide an answer when asked what they knew [14], from the table 1, 59% of the parents were aware about ADHD.

The most common response, given by almost one-third of respondents, described symptoms (such as impulsive or hyperactive) that are consistent with clinically established consensus. Other respondents mentioned medication or chemical or biological causes that reflect biomedical understandings of the disorder. Hyo Won Kim, et al in their study reported that maternal stress or alcohol consumption during pregnancy, parental marital discord, parental separation or divorce, changes in primary caregivers and not-breastfeeding contribute to the clinical manifestations and/or severity of symptoms of ADHD [15], from the graph 3 shown above about 53% of the parents report that ADHD is caused mainly due to alcohol, drinking, cigarette smoking and intake of addictive drugs during pregnancy.

5. Conclusion

Our findings point to a critical need to educate the public about the symptoms of ADHD, its causes, and the treatments that have proven effective, although media and educational efforts should make a special effort to reach populations. The questions analyzed here pertain to general awareness and beliefs about ADHD, rather than about the conditions under which respondents would recognize symptoms of ADHD or react to children who meet clinical criteria, whether as their caregivers or as community members. Future research should be oriented to answering more nuanced questions about public perceptions of ADHD.

References

[1] Guilherme Polanczyk, M.D., Maurício Silva de Lima, M.D., Ph.D. The Worldwide Prevalence of ADHD: A

Systematic Review and Metaregression Analysis, (Am J Psychiatry 2007; 164:942–948)

[2] Olivia Manicolo, Alexander Grob and Priska Hagmann-von Arx *, Gait in Children with Attention-Deficit Hyperactivity Disorder in a Dual-Task Paradigm Olivia Manicolo, Alexander Grob and Priska Hagmann-von Arx *. Psychol. 8:34. doi: 10.3389/fpsyg.2017.00034.

[3] Rahn K. Bailey, MD and Dion L. Owens, MD Birmingham, Alabama and Galveston, Texas. Overcoming Challenges in the Diagnosis and Treatment of Attention-Deficit/Hyperactivity Disorder in African Americans, VOL.97, NO.10, OCTOBER 2005 5S

[4] Pastor, P. N., and Reuben, C. A. (2006). Identified attention-deficit/hyperactivity disorder and medically attended, nonfatal injuries: US school-age children, 1997-2002. *Ambul. Pediatr.* 6, 38–44. doi: 10.1016/j.ambp.2005.07.002.

[5] Suhas Manoharan, Dr. Karpagam Krishnamoorthy. Dental Caries and Children with Attention Deficit Hyperactivity Disorder (ADHD) – A Review ; Suhas Manoharan et al /J. Pharm. Sci. & Res. Vol. 8(7), 2016, 613-615

[6] Getahun, MD, PhD; Steven J. Jacobsen, MD, PhD; Michael J. Fassett, MD; Wansu Chen, MS; Kitaw Demissie, MD, PhD; George G. Rhoads, MD, MPH. Recent Trends in Childhood Attention-Deficit/Hyperactivity Disorder Darios, *JAMA Pediatr.* 2013;167(3):282-288. doi:10.1001/2013.jamapediatrics.401

[7] Barkley RA, Anastopoulos AD, Guevremont DC, Fletcher KE. Adolescents with ADHD: patterns of behavioral adjustment, academic functioning, and treatment utilization. *J Am Acad Child Adolesc Psychiatry.* 1991;30(5):752-761.

[8] Bagwell CL, Molina BS, Pelham WE Jr, Hoza B. Attention-deficit hyperactivity disorder and problems in peer relations: predictions from childhood to adolescence. *J Am Acad Child Adolesc Psychiatry.* 2001;40(11):1285-1292.

[9] Nikolas MA, Burt SA. Genetic and environmental influences on ADHD symptom dimensions of inattention and hyperactivity: a meta-analysis. *J Abnorm Psychol.* 2010;119(1):1-17.

[10] Ilott N, Saudino KJ, Wood A, Asherson P. A genetic study of ADHD and activity level in infancy. *Genes Brain Behav.* 2010;9(3):296-304.

[11] Banerjee TD, Middleton F, Faraone SV. Environmental risks

- kfactorsforattention- deficit hyperactivity disorder.
Acta Paediatr. 2007;96(9):1269-1274.
- [12] Crandon AJ 1979 Maternal anxiety and obstetric complications. J Psychosom Res 23:109 –111
- [13] Lou HC, Hansen D, Nordentoft M, Pryds O, Jensen F, Nim J, Hemmingsen R 1994 Prenatal stressors of human life affect fetal brain development. Dev Med Child Neurol 36:826 – 832
- [14] Wadhwa PD, Sandman CA, Porto M, Dunkel-Schetter C, Garite TJ 1993 The association between prenatal stress and infant birth weight and gestational age at birth: a prospective investigation. Am J Obstet Gynecol 169:858 – 865.
- [15] Jane D. McLeod, Ph.D., M.P.H., Danielle L. Fettes, M.A., Peter S. Jensen, M.D., Bernice A. Pescosolido, Ph.D., and Jack K. Martin, Ph.D. Public Knowledge, Beliefs, and Treatment Preferences Concerning Attention-Deficit Hyperactivity Disorder; Psychiatr Serv. 2007 May ; 58(5): 626–631.