INTRODUCTION

In DSM-5, both attention-deficit/hyperactivity disorder (ADHD) and learning disorder (LD) are clustered within “Neurodevelopmental Disorders.”

The juxtaposition of ADHD and LD in DSM-5 might serve to promote further research into the deleterious impact of the frequently co-occurring inattention on academic outcome and intervention response in individuals with LD.

DSM-5 changes might lead to an understanding that the impairments of ADHD extend “beyond behavior” and that those of LD extend “beyond books.”

Rates of LD in students with ADHD ranged from 8% to 76% (45%).

OBJECTIVES

1) To determine prevalence-characteristics of low academic performance in students with ADHD from 6 to 14 year-old children in Andalusia (Spain).

2) Determine vulnerability among subtypes.

METHODS

Target population: primary and secondary school students 6-14 year-old= 66332 children; centres= 2493. Multistage cluster sampling centres= 74. 2547 children were included.

— Questionnaires DSM-IV-TR-ADHD.

— Vanderbilt Academic Performance Rating Scales (VARS) — Clinical diagnostic interview.

CONCLUSIONS

The VARS performance items in combination with interviews about school functioning and examination of school records can be used reliably by pediatricians to determine which children need to be referred for evaluation of a comorbid LD.

Given the relatively high comorbidity rate between ADHD and LD, students who are evaluated for one of these disorders should always be screened for symptoms of the other disorder.

Comprehensive intervention services for students with comorbid ADHD and LD will require empirically supported treatment strategies that address both disorders and that are implemented across school and home settings.

BIBLIOGRAPHY

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