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Advice for health and social care professionals on the support and management of people with ADHD during the COVID-19 crisis: guidance from the Australian ADHD Professionals Association (AADPA)

While we are all having to make very significant adjustments to follow the everchanging rules and restrictions necessary to reduce the spread of the COVID-19 virus, those with ADHD - particularly those with severe symptoms - are going to find this particularly challenging.

We believe that the following guidance applies when treating and supporting people with ADHD during this difficult period:

- Clinicians should keep up to date with and follow all national and local guidance.
- Assessments for ADHD should continue to be conducted using online video technology. During this period, it may be helpful to consider using a more structured approach to history taking. This can be helpful when adjusting to the new environment and context both for the clinician and the patient. It is helpful to structure the assessment around existing clinical practice guidelines such as those from NICE NG87 (2018)¹ or the AAP (2019)². It is essential to check that both the patient/family and the clinician feel that they have a private space to take the video call (for more details see Medical Board of Australia³ and RANZCP⁴ guidelines on telehealth).
- People with ADHD should continue to take their medications as usual. A failure to continue with an effective medication regime is likely to increase the health risks to the patient, their families and the general public. If ADHD symptoms and associated behaviours become less well controlled, it will be more difficult to comply with the requirements for physical distancing. Increased impulsivity and overactivity are also likely to increase tensions within households who are already managing a complex and often challenging situation.
- Parents of children with ADHD and adults with ADHD should avoid increasing doses or adding additional doses (beyond those prescribed) to manage crisis/stress related to confinement. Parents should continue implementing behavioural strategies recommended for disruptive/challenging behaviours in children with ADHD⁵.
- Routine clinical assessments should continue using appropriate video or telephone technologies and following appropriate local and national guidance and best practice advice. As with assessments, many clinicians find the use of structured approaches to monitoring helpful when conducting telehealth. An example of a structured approach to monitoring ADHD has been described by Coghill and Seth⁶ with sample protocols also available online (<http://bit.ly/1Jme79g>).
- Routine face-to-face height and weight and cardiovascular (CV) assessments and monitoring for people with ADHD without any pre-existing difficulties or cardiovascular risk factors should be postponed until face-to-face clinical appointments are resumed. Currently, the risks of measuring face-to-face C/V assessments with these patients outweigh the benefits. We do however recommend home monitoring of blood pressure, pulse and weight whenever possible using home Blood Pressure machines (see box 1).
- People with ADHD may find working from home particularly challenging and anxiety provoking. There are now several helpful web pages giving advice (e.g. <https://www.additudemag.com/working-from-home-adhd>) and ADHD coaching and ADHD support organizations and user groups and communities will be particularly important in this respect.
- If a person with ADHD does test positive for the COVID-19 virus or develops COVID-19 they do not need to stop taking their ADHD medication and there are likely to be advantages associated with the continued reduction in impulsivity and hyperactivity. However, they may need to consider reducing or stopping ADHD medications if they experience severe symptoms such as increased blood pressure, pulse or breathing difficulties. Clinicians should be prepared to discuss the risk benefit balance with treating physicians.

- The advice about how best to manage our lives during this difficult times is evolving rapidly and this is reflected in the changes in the rules and restrictions placed on our movement and behaviour. The Raising Children Network has prepared helpful advice for parents about how we can support the children of Australia through the crisis and it may be helpful to refer parents to their website which also contains helpful more general information about managing ADHD in children and teens.

<https://raisingchildren.net.au/guides/a-z-health-reference/coronavirus-and-children-in-australia>

If you have and comments or additions please contact admin@aadpa.com.au

Box 1: Advice on home monitoring

Patients could be encouraged to purchase a home Blood Pressure machine and be guided through using it including:

- Taking the BP a few days after starting a new drug / dose
- Taking the BP at least 2 hours after taking a dose
- Sitting down for 10-15 minutes before taking the reading
- Taking the reading on the left arm
- Taking the lowest of 3 readings
- At the same time capturing the pulse

Readings can then be communicated to the clinic, and advice on next steps can then be provided by the clinician.

References

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