

A global surge in ADHD diagnosis has more to do with marketing than medicine

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You can't catch attention deficit hyperactivity disorder (ADHD). Yet the diagnosis and treatment of this behavioral condition is spreading like a contagion—surging as much as tenfold in some countries.

Call it an economic and cultural plague, but not necessarily a medical one, says Brandeis professor Peter Conrad. In a recent paper in the journal *Social Science and Medicine*, Conrad and coauthor Meredith Bergey examined the growth of ADHD in the United Kingdom, Germany, France, Italy and Brazil.

Until recently, North America tallied by far the most ADHD diagnoses, and the United States consumed 90 percent of all Ritalin, one of the most common ADHD drugs. ADHD diagnoses continue to grow in the U.S., but Americans account for only 75 percent of Ritalin users today.

Conrad and Bergey attribute ADHD's growth to five trends. Drug companies are effective lobbyists, and have spurred some countries to relax marketing restrictions on stimulants. Psychoanalytic treatment with talk therapy is giving way to biological psychiatry—treating psychological problems with drugs. More European and South American psychologists and psychiatrists are adopting the American-based Diagnostic and Statistical Manual (DSM) standards, which are broader and have a lower threshold for diagnosing ADHD. Vocal ADHD advocacy groups work closely with [drug companies](#) to promote pharmaceutical treatment. Lastly, the easy availability of ADHD information and self-diagnosis via the Internet empowers consumers to

ask for prescription treatment.

Many websites promoting ADHD drugs offer checklists with questions like these:

- Do you fidget a lot?
- Is it hard for you to concentrate?
- Are you disorganized at work and home?
- Do you start projects and then abandon them?

"These checklists turn all kinds of different behaviors into medical problems," Conrad says. "The checklists don't distinguish what is part of the human condition and what is a disease."

According to the study, in the U.K., diagnosis of the disorder in school-age children grew from less than one percent in the 1990s to about five percent today. In Germany, prescription ADHD drugs rose from 10 million daily doses in 1998 to 53 million in 2008.

Growth in Italy and France has been slower, in part due to those countries' more restrictive pharmaceutical drug laws. However, even those nations are becoming more lax, says Conrad. In Brazil, a rising number of ADHD advocacy groups, many with close ties to the pharmaceutical industry, are raising awareness of the disorder.

"There is no pharmacological magic bullet," says Conrad. No drug can account for nonmedical factors that may contribute to behavior. A fidgety student may be responding to the one-size-fits-all compulsory education system, Conrad says, not a flaw in his brain chemistry.

ADHD continues a long history of medicalizing behaviors, especially in the U.S., Conrad says. A century ago, masturbation was considered a disease. Men and women diagnosed with masturbatory insanity were

institutionalized or subjected to surgical treatment.

"I think we may look back on this time in 50 years and ask, what did we do to these kids?" Conrad says.

Provided by Brandeis University

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