

CAADID

Conners' Adult ADHD Diagnostic Interview for DSM-IV™



An empirically-based interview that aids in the diagnostic process of ADHD

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Part I: Self-report or clinician-completed questionnaire; Part II: Clinician-completed structured interview


Ages 18 and older

60–90 minutes administration time for Part I; 60 minutes for Part II

B Level User Qualification

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Aim

The CAADID addresses the demand for an empirically-based diagnostic interview necessary in the assessment of adults. It was developed primarily to help clinicians and researchers produce the categorical diagnosis of ADHD they require. The CAADID employs a language and format that is conducive to self-report and it produces a comprehensive demographic and developmental history of the adult patient. In addition, it provides information to support a categorical diagnosis based upon DSM-IV™ criteria for ADHD, during both adulthood and childhood. This is important because ADHD is a persistent developmental disorder that begins in early childhood. Recent evidence suggests that 50 to 65 percent of children diagnosed with ADHD continue to demonstrate symptoms as they reach adulthood. To meet DSM-IV™ criteria, it is necessary to determine that the adult patient had problems with ADHD when he or she was a child, specifically during the early elementary school years. The CAADID measures a cross-section of ADHD-related symptoms and behaviors in adults. Meeting all these requirements, the CAADID is ideal for screening adults for ADHD.

When assessing ADHD, a clinical interview is a primary method of assessment and dimensional measures, such as rating scales, are used to supplement these assessments. This categorical interview, which is a part of the CAADID, can be used as part of a routine screening in a number of settings, such as outpatient clinics, residential treatment centers, prisons, psychiatric hospitals, and private practice offices. The CAADID may also be used to monitor ADHD symptoms over the course of treatment. It is also useful in research settings because it is scorable, provides categorical information helpful for defining research groups, and offers a variety of content that can be used for qualitative analyses.

User Qualifications

Administrators of the CAADID should have an understanding of the basic principles and limitations of psychological testing, especially the interpretation of results. B-level qualification requires, as a minimum, that the user has completed courses in tests and measurement at a university. A professional with advanced training in psychological assessment and professionals from related disciplines that adhere to relevant professional standards must assume responsibility for the use, interpretation, and communication of results. This person should possess an advanced degree in the social, medical, or behavioral sciences such as a Ph.D., Ed.D., M.D., or M.A.

Instrument

Part I of the CAADID is designed to collect information related to four patient-related areas: Demographic History, Developmental Course, ADHD Risk Factors, and Comorbidity Screening Questions. The questions in Part I of the interview are presented primarily in a Yes/No answer format.

Part II of the interview examines if the patient meets the first four DSM-IV™ criteria in the diagnosis of ADHD (Criteria A–D). Criterion E is addressed in Part I of the interview. Part II is divided into three sections. The first section assesses the presence of the DSM-IV™ Inattention symptoms followed by questions about onset of the Inattention symptoms, and pervasiveness of the Inattention symptoms. The second section assesses Hyperactive-Impulsive symptoms. This is followed by a section that assesses impairment for the amalgam of Inattention and Hyperactive-Impulsive symptoms. A checklist is provided for recording behavioral observations of the patient, whether the patient exhibits behaviors that are either consistent or inconsistent with ADHD behavioral patterns during the interview. A section at the end of the interview provides space for the clinician to note these behavioral characteristics, which can be useful information for report writing. Lastly, scoring algorithms are provided on a summary sheet that enables the summarizing and scoring of Part II.

The summary sheets with scoring algorithms of the CAADID Part II form serve several purposes. First, they allow for the scoring of Part II of the interview, which will help determine the presence or absence of a DSM-IV™ diagnosis of ADHD. Second, they provide a synopsis of the data acquired from the interview. This aspect is extremely helpful for summarizing the patient's ADHD characteristics, whether for a verbal summary or for report writing. Third, they ensure that, when making an ADHD diagnosis, all five ADHD DSM-IV™ criteria are used.

The CAADID Manual presents a discussion of the current issues in the assessment of ADHD in adults and offers the ways in which the CAADID deals with these issues. These include:

Overdiagnosis and misclassification when assessing adults for ADHD

- the interview has been designed to capture frequency and severity of behaviors

Symptoms associated with other conditions, such as psychiatric and/or medical conditions that may include attention or organizational deficits

- embedded into the developmental history of the interview is a brief comorbidity screen that briefly determines if disorders other than ADHD, in particular depression,

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anxiety, and substance-related disorders, may be present; the medication history aids in identifying somatization diagnoses and medical conditions

Symptoms resulting from an adverse environment (e.g., chaotic families, ineffectual classrooms, or psychosocial stressors)

- the demographic and developmental history part of the CAADID (Part I) has sections that assess psychosocial stressors and their impact on the adult's life; additional questions in Part II are designed to assess symptom presence throughout the patient's life in order to ensure that ADHD-like behavioral manifestations are not temporary, situational, or reactive, but rather are stable behavioral patterns that have occurred throughout the patient's entire life

Reduced numbers of symptoms in adults

- since no provision for different adult criteria is made in DSM-IV™ currently, the CAADID manual offers suggestions to reduce the potential underdiagnosis of Adult ADHD

Definition of symptoms through childhood behaviors

- the CAADID uses DSM-IV™ language that effectively translates into adult behavioral manifestations, symptom criteria that are currently defined, for the most part, in terms of childhood behaviors; in addition the CAADID contains lists of child and adult behaviors that would qualify as behavioral manifestations of each symptom, thereby helping clinicians to judge whether reported behaviors are consistent with each symptom

Diagnostic prerequisite of childhood ADHD

- the CAADID has been developed so that there is a simultaneous assessment of ADHD in adulthood and childhood

The ability to track treatment progress has been built into the CAADID. It can be used as a repeated measure to follow patients' progress. An Impairment section in the interview includes very specific impairment ratings. These impairment ratings can be used in a manner similar to typical Clinical Global Impressions (CGI) commonly used in clinical and research settings, but with the CAADID's precision and specificity. Completion of these impairment ratings at regular intervals will inform clinicians about patients' treatment responses and can help guide treatment decisions.

Format

The CAADID is administered using the CAADID interview forms. The forms include all the necessary information for administering and scoring.

All of the items in Part I of the CAADID have been numbered to facilitate the cross-referencing of information. In Part II, instead of numbers, an alphabetical coding system has been used which serves a similar purpose. Each part is designed to gather the information required for making a clinical determination of the presence or absence of ADHD. Two options for completing Parts I and II are suggested:

Option 1: Both parts of the CAADID are administered as a clinical interview, but the interview is divided into two sessions. Part I is administered during the first session and Part II is administered during the second session.

Option 2: Alternatively, the patient can be asked to complete Part I as a questionnaire on his or her own, prior to meeting with the clinician. This greatly reduces the time required to administer the entire interview and allows the clinician to focus on those questions that were answered affirmatively in Part I. (Based on a readability analysis, a North American sixth-grade reading level has been determined for Part I of the CAADID). Part I of the interview should be reviewed with the patient in order to clarify and expand on affirmative or unusual responses; then, Part II can be administered to the patient.

The CAADID manual offers an introduction to ADHD in adults and detailed information on administration, scoring procedures, and the interpretation and use of the CAADID results. The background and development of the instrument are also provided. In addition, the manual presents three case studies that may exemplify the interpretation of the CAADID and concludes with comments about using the CAADID as part of a comprehensive, multimodal assessment of Adult ADHD.

Development

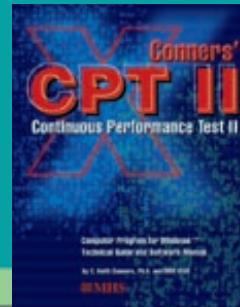
Interest in the assessment of Adult ADHD has increased dramatically in recent years; however, there are current difficulties in diagnosing Adult ADHD and limited data are available. Consequently, there has been a pressing need for empirically-based structured interviews that aid the process of diagnosis. The CAADID will help to fill this void. It was piloted in the Duke University ADHD clinic with adult patients.

It is hoped that users of the CAADID will provide useful feedback that will help in the further evolution and refinement of this new tool to the authors via MHS or to the MHS Research and Development department. Such feedback will greatly assist the further development of the CAADID, aimed at providing clinicians with a diagnostic tool of maximum reliability, validity, and relevance.

Complements for the CAADID



BarOn Emotional Quotient-Inventory™ (BarOn EQ-i®)
Carroll Depression Scales-Revised (CDS-R)
Computer-Assisted SCID-Clinician Version (CAS-CV) for Windows™
Conners' Adult ADHD History Form
Conners' Adult ADHD Rating Scales (CAARS)
Conners' Continuous Performance Test II (CPT II) for Windows™
Holden Psychological Screening Inventory (HPSI)
SCID Screen Patient Questionnaire (SSPQ) for Windows™
Social Adjustment Scale-Self-Report (SAS-SR)
State-Trait Anxiety Inventory (STAI) for Windows™
Symptom Assessment-45 Questionnaire (SA-45)



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