

e-Poster Walk: Others - part 2

EW0716

Audit of patients with intellectual disabilities accessing a specialist neuropsychiatry service for epilepsy management

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Introduction Epilepsy is a frequent co-morbidity in patients with intellectual disabilities, some of whom require specialist services. The National Institute for Health and Care Excellence (NICE) has recommended that there should be equity of access to high quality of care regardless of the existence of a diagnosis of intellectual disability.

Objectives To observe current practice with regards to NICE guidelines for epilepsy care in patients with intellectual disability.

Aims To identify the level of compliance with NICE guidelines and provide evidence which may inform care planning processes.

Methods A retrospective review of the electronic and paper-based records of a total sample of intellectually disabled patients who accessed a specialist neuropsychiatry service for the management of epilepsy during a six-month period was carried out.

Results The records of 21 patients whose ages ranged from 20 to 58 years were audited. The waiting period ranged from 4 weeks to 46 weeks. There was evidence of Carer involvement in the management of 100% of the patients and seizure improvement since referral was documented in 66%. Non-medication treatment was offered in 67% of cases. Evidence of special considerations in view of patient's intellectual disability was recorded in 24%, best interest considerations in 24% and capacity assessment in 19%.

Conclusions There is a significant improvement in the symptoms of 66% of patients in this audit. However there is room for improvement and a more specific plan for patients with intellectual disabilities should facilitate this.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

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EW0717

Prevalence of ADHD symptoms among adults in the general population in Finland

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Introduction Earlier considered a disorder affecting only children, today worldwide adult ADHD prevalence is estimated at 2.5%. The core symptoms; inattention, hyperactivity and impulsivity, often persevere impacting many fields of life.

Objectives To estimate the prevalence of ADHD symptoms in the general Finnish adult population.

Methods We started with a population based and randomly drawn sample of 3000 adults, aged 18–44 years. When contacted, participants were provided three alternative ways to participate (online, letter, telephone interview). Using the adult ADHD rating scale (ASRS) screener all participants ($n=748$) were categorized into groups: possibly symptomatic (≥ 4 points), controls (≤ 2 points) and undefined (3 points). Fifty-seven possibly symptomatic consented to further evaluation by a telephone interview, together with two age- and gender matched controls each.

Results Using the results from the ASRS screener, we calculated a 10.96% prevalence. Analysis of the complete ASRS resulted in a 5.08% and the recommended two-step evaluation in a 3.34% prevalence, out of whom two thirds considered being moderately or severely impaired by the symptoms.

Conclusions This study suggests that a large number of adults in the general population are negatively affected by ADHD symptoms, almost all unrecognized by health care professionals. As ADHD is a burden for the patient, his family and the society, adult ADHD deserves greater attention in the future.

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EW0718

Health-related quality of life and work productivity of adults with ADHD: A UK web-based survey

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Introduction European data on health-related quality of life (HRQoL) in adults with attention deficit/hyperactivity disorder (ADHD) in the general population is sparse.

Aims and objectives To report HRQoL in UK adults with ADHD.

Methods UK residents aged 18–55 years with a diagnosis of adult ADHD completed an online, cross-sectional survey including questions on disease history, the EuroQoL Five Dimensions questionnaire with five-levels (EQ-5D-5L) and the Work productivity and activity impairment questionnaire: general health (WPAI:GH). ADHD symptom severity was assessed by telephone using ADHD rating scale version IV with adult prompts (ADHD-RS-IV).

Results The survey was completed by 233 participants (65.2% women; 77.3% white British), mean age 32.6 years (standard deviation [SD] 9.5), mean ADHD-RS-IV total score 43.46 (SD 7.88). Their mean EQ-5D-5L utility score of 0.74 (SD 0.21) was lower than the UK population norm of 0.86 (SD 0.23).[1] WPAI:GH scores indicated that health problems resulted in impairments of 32.04% in work productivity and 45.79% in regular daily activities. Regression analyses adjusting for gender, age and co-morbidities demonstrated associations between EQ-5D-5L utility scores and gender (men had lower scores, $P < 0.001$), work impairment due to health problems (increasing impairment was associated with lower scores, $P = 0.005$) and age (for each additional year of age, scores decreased by 0.007, $P = 0.010$).

Conclusions These results highlight the impact on health utility, work productivity and regular daily activities, and add to the description of the disease burden of adult ADHD in the UK.

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Reference

[1] Kind. <http://www.york.ac.uk/che/pdf/DP172.pdf>. 1999.

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