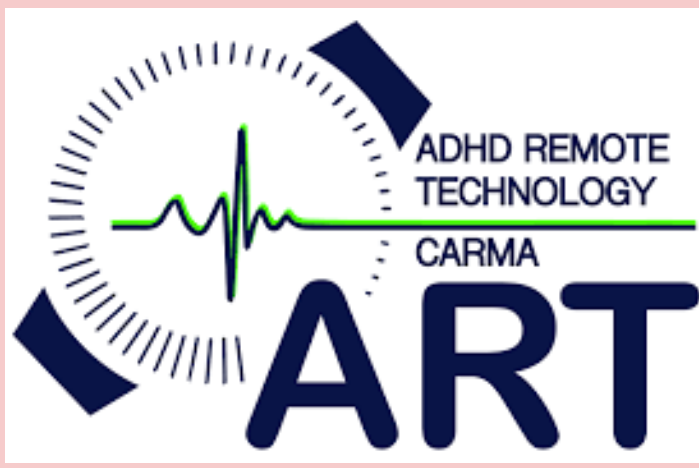


# Perceptions of adults with ADHD on pharmacological treatment initiation and titration for ADHD: A thematic analysis

Alice Barnes, Hayley Denyer, Sara Simblett, Emilie Nordby, Andrea Bilbow, Wakaho Hayashi, Nina Hoven, Hannah Marriott, Ulrich Müller-Sedgwick, Phoebe Rocks, Susannah Whitwell, Amos Folarin, Henrik Larsson, J. Antoni Ramos-Quiroga, Richard Dobson & Jonna Kuntsi



## Background

- Many individuals with ADHD engage with pharmacological treatments to manage symptoms.
- Despite efficacy in short-term ADHD symptom improvements (Cortese et al., 2018), many discontinue pharmacological treatment within the first year (Brikell et al., 2024).
- This study aimed to investigate the experiences of adults with ADHD in the first year of pharmacological treatment, and how this informed the ultimate decision of (dis)continuation.

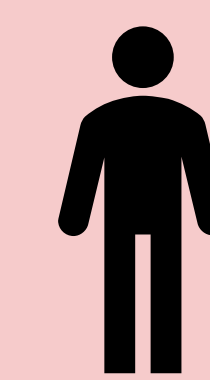
## Method

**Twenty five adults with ADHD** participated in semi-structured interviews. All 25 individuals had participated in the ART-CARMA study (Denyer et al. 2022), a 12-month remote monitoring study to which they were recruited from clinic waiting lists.

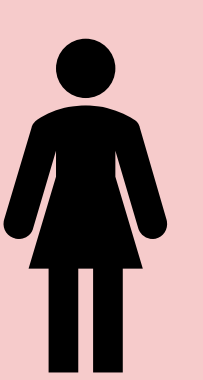
Interviews investigated perspectives of pharmacological treatment including response to medication, experiences of titration and subsequent medication use, adherence to treatment and ultimate decisions for (dis)continuation.

Inductive thematic analysis was conducted to identify themes - **four themes were generated**.

## Participants



11



14

Age:

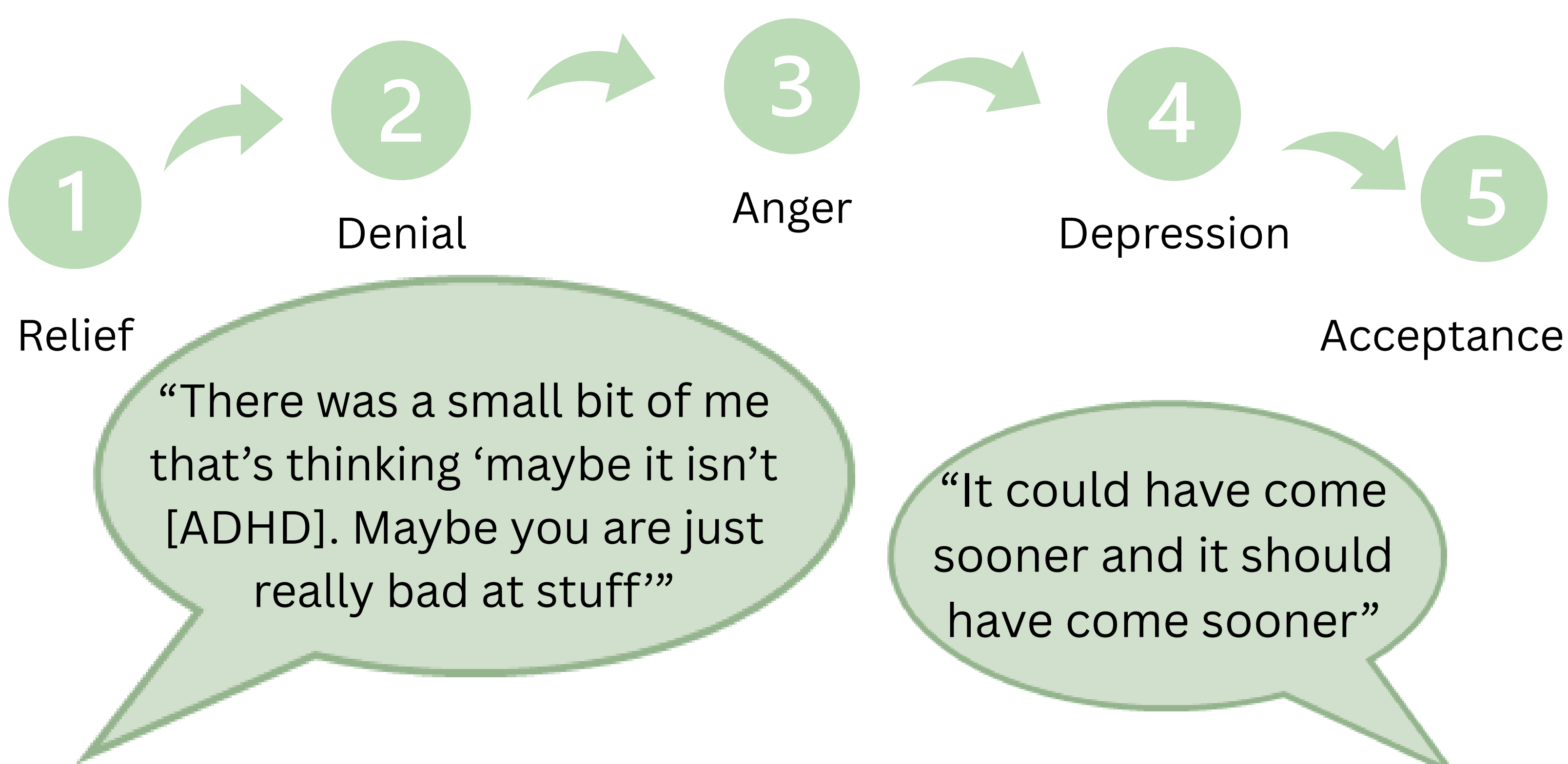
Range: 23 to 57

Mean: 39

## Results

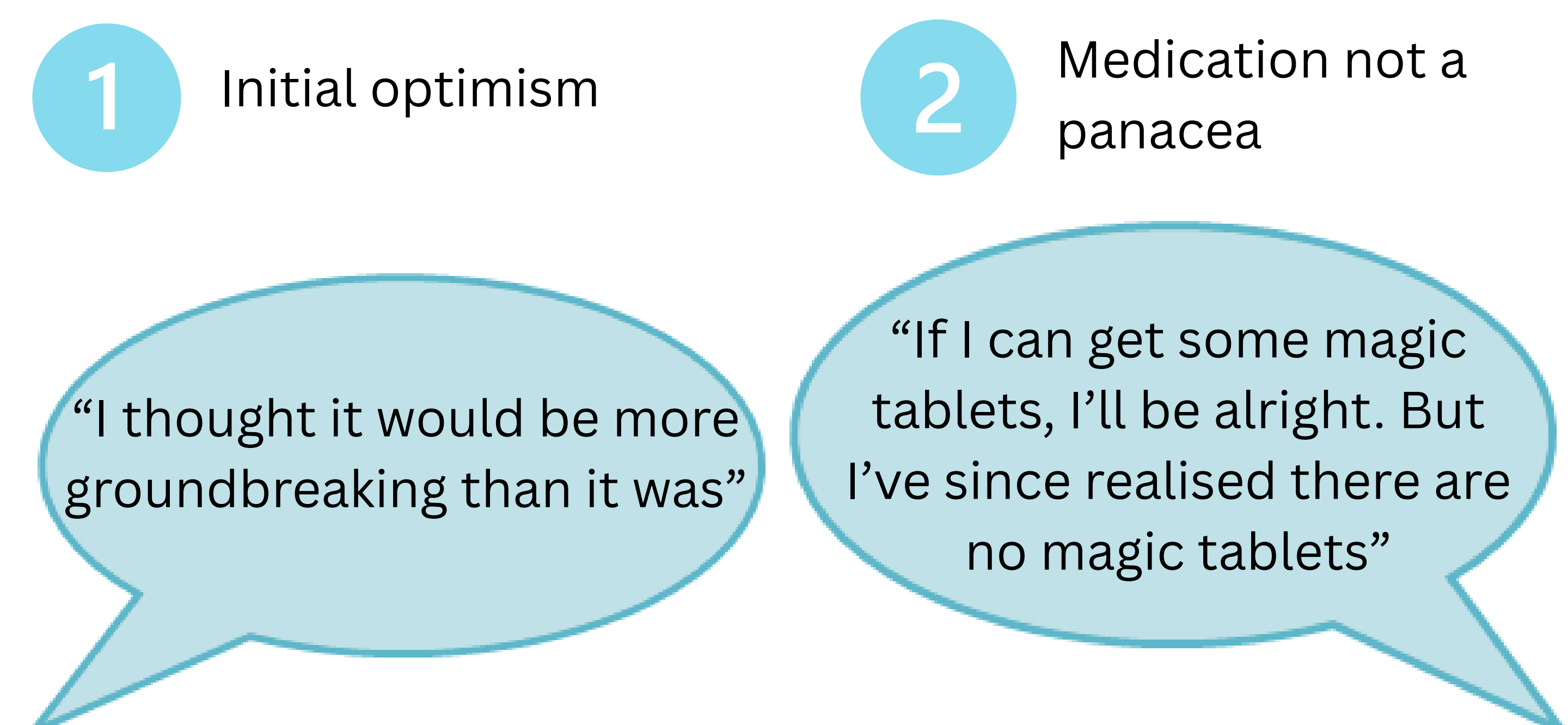
### Processing diagnosis

Reflections on the processing of their diagnosis throughout treatment



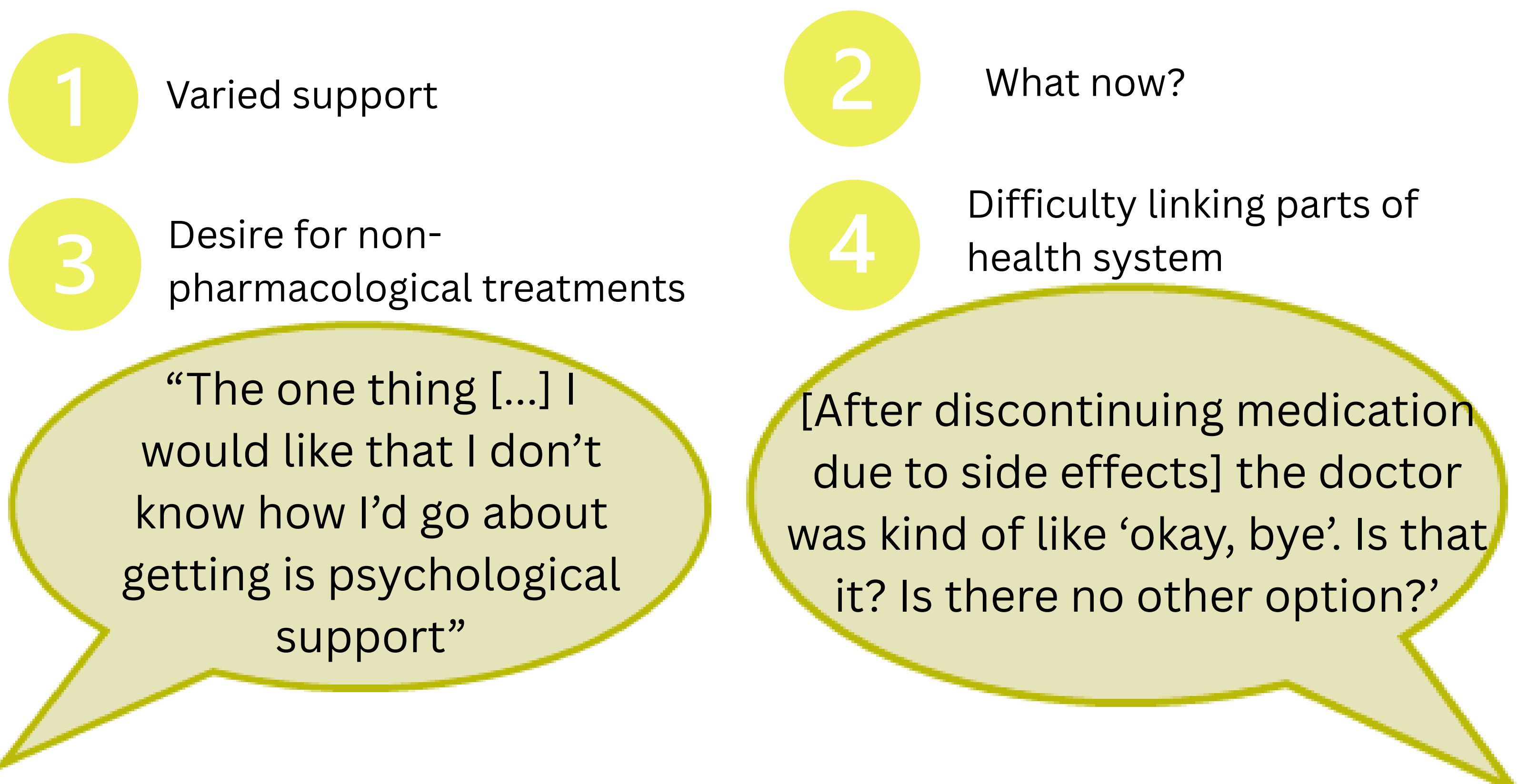
### Managing expectations

How expectations at the outset of treatment can impact perceptions of treatment efficacy



### Accessing support

The areas of pharmacological treatment in which many felt support was lacking and how this impacted experiences



### Balancing costs and benefits

The process that individuals undertake when balancing whether medication was worth continuing



## Conclusions

This study contextualised the high rates of pharmacological treatment non-adherence and discontinuation for adults with ADHD, highlighting how the **ongoing processing of the diagnosis, high expectations of the medications impact, available guidance from health services and the ultimate balance of positives against negatives** contribute to an individual’s treatment continuation and compliance.

## References

Brikell et al., (2024): [https://doi.org/10.1016/S2215-0366\(23\)00332-2](https://doi.org/10.1016/S2215-0366(23)00332-2)  
Cortese et al.,(2018): [https://doi.org/10.1016/S2215-0366\(18\)30269-4](https://doi.org/10.1016/S2215-0366(18)30269-4)  
Denyer et al., (2022): <https://doi.org/10.1186/s12888-022-04429-6>

## Conflicts of Interest

JK has given talks at educational events sponsored by Medice; all funds are received by King’s College London and used for studies of ADHD.  
HL reported receiving grants from Shire/Takeda, personal fees from Shire/Takeda, Evolan, and Medici  
JARQ was on the speakers’ bureau and/or acted as consultant for Biogen, Idorsia, Casen-Recordati, Janssen-Cilag, Novartis, Takeda, Bial, Sinrolab, Neuraxpharm, Novartis, BMS, Medice, Rubió, Uriach, Technofarma and Raffo in the last 3 years. He also received travel awards (air tickets + hotel) for taking part in psychiatric meetings from Idorsia, Janssen-Cilag, Rubió, Takeda, Bial and Medice. The Department of Psychiatry chaired by him received unrestricted educational and research support from the following companies in the last 3 years: Exeltis, Idorsia, Janssen- Cilag, Neuraxpharm, Oryzon, Roche, Probitas and Rubió

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