Earlier this year, Ebba Du Rietz and colleagues reported their findings from a large-scale, register-based study of the impact of childhood ADHD on healthcare use and costs in early adulthood. The researchers prospectively followed a large cohort of >400,000 young adults from 18 to 26 years-of-age. They obtained data on healthcare use from Swedish national patient and medication registers and then compared the annual costs per capita from multi-morbidity in those with and without a childhood diagnosis of ADHD. They found that a childhood diagnosis of ADHD was associated with greater long-term healthcare use for psychiatric and somatic disorders. This greater healthcare use conferred larger financial costs, with an average annual cost per capita of €890 for those with versus €304 for those without childhood ADHD. Interestingly, even those who no longer used healthcare services for ADHD in early adulthood (remitters) exhibited greater healthcare use and costs due to multi-morbidity than those without childhood ADHD. However, those who continued to have ADHD contact with healthcare services (persisters) had the greatest healthcare use and costs. Du Rietz et al. explain that prevention of multi-morbidity in people with childhood ADHD is needed both to benefit affected individuals and to alleviate the financial burden on society.

The costs of childhood ADHD extend into early adulthood

By Dr. Jessica Edwards

Referring to: