

# Myths About ADHD Can Cause Our Early Deaths

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**T**HERE ARE TWO MEANINGS TO MYTHS. One is warm and fuzzy—traditional stories. The other is deadly—widely held but false beliefs. Certain myths about ADHD contribute to our early deaths.

Famed ADHD researcher Russell Barkley, PhD, recently shocked the ADHD world by telling us that people with **undiagnosed** ADHD die, on average, twelve years earlier than people without ADHD. You may quickly think, “I can’t believe that,” until you stop and really think about it.

Our impulsive, inattentive, or distractible behaviors cause car accidents and injuries that require emergency room visits. Our risk-taking traits cause us to love adrenaline-producing but dangerous sports, such as bungee jumping, motorcycle racing, white water rafting, heli-skiing, and free solo rock climbing. Because we don’t understand why we act in foolish and unacceptable ways, we may be depressed, which leads us to smoke, drink, take illicit drugs, and overeat. Our bad habits create health problems which contribute to our early deaths.

Did you notice that **undiagnosed** is bolded in the paragraph above? When we are diagnosed and treated before age eighteen, our life expectancies are longer. Getting diagnosed and treated is key. Medication and other treatments reduce our engagement in life-threatening behaviors. To improve our longevity, we need to be diagnosed during childhood.

There are more than fifteen myths regarding ADHD, but seven are the most harmful. These are the myths that prevent teachers from recognizing ADHD in children in their classrooms, that prevent parents from seeking a diagnosis for their child, and that prevent doctors from making the diagnosis or making the correct diagnosis.

**1. If you believe ADHD means hyperactive boys, you are mistaken.** There continues to be the misconception that ADHD only occurs in boys with hyperactivity, although we know that girls have ADHD as well. Girls usually have the inattentive presentation, with no hyperactivity, although some girls have hyperactivity, and some boys have the inattentive presentation. If teachers, parents and physicians look only for boys with hyperactivity, that is all they find. The children of another sex or with another ADHD presentation

are overlooked and fail to be diagnosed during childhood.

**2. If you believe you can’t be smart if you have ADHD, you are misinformed.** It is hard to understand why this myth started. Maybe, some people believed that to get good grades in school you need to pay rapt attention. If you didn’t pay rapt attention, but got good grades, then you couldn’t have ADHD. Well, that illogical thinking has been disproved again and again. Many children with ADHD do well in school, in spite of not paying attention, and they often are smart. But the myth continues to circulate, and a physician might say, “Your child is smart and doing well in school so he can’t have ADHD.”

**3. If you think ADHD means you can’t focus, you need to think again.** Parents have absorbed this myth. They argue, “What do you mean she can’t focus? She sits for hours playing video games.” They delay a diagnosis for their child while they hang onto their mistaken belief that if she can focus on video games, she can’t have ADHD. The truth is, people with ADHD can focus, often hyperfocus, when something truly interests them. In fact, they can focus so well that it is, sometimes, hard for them to switch to another activity when asked to do so.

**4. If you maintain that ADHD results from bad parenting, it’s time to update your thinking.** This myth minimizes the broad impacts of ADHD and misrepresents its cause; i.e., ADHD can be readily fixed if the parents discipline their child more. Why do they seek help from helping professionals when better parenting is the answer? Parents can spend years, becoming the better parents they falsely believe their child needs, only to realize it makes little difference to their child’s challenges. Time is lost and a diagnosis of ADHD isn’t sought.

**5. If you imagine ADHD isn’t a real medical condition, scientific research proves otherwise.** This widely held myth leads to stigma. There is judgment by uninformed school personnel, friends, and family members. Because they know there is nothing wrong with the child, they believe the parents shouldn’t seek medical help. Parents, too, get caught up in this myth. They think, “I need to discipline, nag, and coerce my child more.” Later, after they have a true understanding of

ADHD and its cause, they are filled with remorse. They, unwittingly, belittled and shamed their child for behaviors he couldn't help.

**6. If you believe medication for ADHD is harmful, you are causing harm with that belief.** There is no backlash for parents who give their child medication for depression, anxiety, or bipolar disorder. Yet, parents who give their child medication for ADHD, which is as much of a brain chemistry problem as depression anxiety and bipolar disorder, are criticized when they provide this proven, most effective treatment for ADHD. Some parents are inappropriately proud of themselves, even after their child's diagnosis. They "help" their child without "resorting" (their words) to medication. Usually, when they finally "resort," they are dismayed they denied medication to their child. Getting a diagnosis of ADHD is helpful, but getting your child on the right medication at the right dose is the second most helpful thing parents can do.

**7. If you assume ADHD is overdiagnosed, it's time to correct your misconception.** Some statistics show that ADHD is overdiagnosed in certain states and economic classes, while other statistics demonstrate that we underdiagnose ADHD, particularly in those with inattentive ADHD. It is estimated that ninety percent of those with ADHD are still undiagnosed. However, the widespread belief that ADHD is overdiagnosed could make teachers, parents, and physicians reluctant to believe a particular child has ADHD, asking themselves, "Am I seeing ADHD everywhere I look? Am I contributing to the problem of overdiagnosis?" But, even clinicians who acknowledge the over-diagnosis of ADHD, warn that overdiagnosis is less worrisome than underdiagnosing children with this condition.

**The takeaways from this article:** (1) Get your myth-free knowledge about ADHD from reliable sources, such as CHADD and WebMD. (2) When you hear anyone cite one of these myths, ask "Where did you hear this?" "Why do you believe it?" Then provide them with the facts. (3) Don't delay or let anyone cause you to delay in seeking a diagnosis for your loved one or yourself when you suspect ADHD. **A**

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