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CASE STUDY ON COMPLEXITIES OF ADULT ADHD

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Abstract

This case study looks at the challenges faced by a 27-year-old woman diagnosed with adult ADHD after struggling for 13 years with dysthymia and generalized anxiety disorder. The patient showed symptoms such as inattention, restlessness, impulsivity, and emotional instability, which often blurred the lines with mood and anxiety disorder symptoms, making diagnosis tricky. Assessment tools like the Adult ADHD Self-Report Scale (ASRS), Hamilton Anxiety Scale (HAM-A), and Bender Gestalt Test (BGT) were used to clarify the diagnosis. After a structured six-month treatment plan that included medication and Mandala Art Therapy, the patient showed significant improvements in attention, emotional stability, and anxiety management. This case emphasizes the difficulties in diagnosing adult ADHD, the importance of thorough assessment, and the benefits of combined therapeutic methods. It also highlights the need for greater awareness and holistic treatment options for individuals with coexisting psychiatric issues.

Keywords: Adult-ADHD, Mandala Art therapy, integrated therapy, anxiety disorders

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1. Introduction

Attention-Deficit/Hyperactivity Disorder (ADHD) is one of the most common neurodevelopmental disorders. It is usually diagnosed in childhood, but it is increasingly recognized as a lifelong condition that can continue into adulthood. Studies estimate that about 2.5 to 4.4% of adults worldwide have ADHD. Many cases go undiagnosed or are misdiagnosed because their symptoms overlap with anxiety, depression, and other mental health conditions. Adult ADHD often gets overlooked in clinical settings. The symptoms show up differently than they do in children, with inattention, impulsivity, disorganization, and emotional regulation issues being more noticeable in adults. Diagnosing adult ADHD becomes even more difficult when patients have other mood and anxiety disorders. Misdiagnosis can lead to treatments that don't work, ongoing suffering, and difficulties in academic, work, and social settings. This case study sheds light on the challenges of diagnosing and treating adult

ADHD along with dysthymia and generalized anxiety disorder. It also looks at the benefits of using combined therapies, especially Mandala Art Therapy, as a supportive method alongside traditional medication.

2. Case Presentation

Patient with Complexities of Adult ADHD

A 27-year-old has a 13-year history of dysthymia and general anxiety disorder. She exhibits clinical symptoms such as lethargy, poor mood, sleeplessness, appetite loss, weeping episodes, apathy, anhedonia, avolition, feelings of worthlessness and powerlessness, suicidal thoughts, and self-harm. Over the past 13 years, she has used mood stabilizers, antidepressants, and anxiety drugs sporadically. She has been taking the same tablets for the previous two years: 50 mg of sertraline, 0.5 mg of clonazepam, and 5 mg of aripiprazole.

The client behaved in a cooperative, friendly, and suitably attired manner during the interview. She was a little uneasy at first, but as the session went on, she became more at ease. She had good eye contact, and her mood remained constant. Her speaking was clear and age-appropriate, and her voice was heard. She participated in serious and purposeful conversations and was impulsive. She denied having had any deluded or hallucinogenic experiences during MSE. She did, however, report suffering persistent anxiety, restlessness, and depression. She was able to understand the directions and react appropriately.

The client's current complaints include being easily and continuously distracted, physically restless, lacking concentration, finding it difficult to focus and pay attention in almost any situation, having preoccupations, having trouble reading, planning, and organizing, not getting enough sleep, becoming hyper fixed, experiencing emotional distress with prominent anxiety and depressive symptoms.

Table - 1

	WHAT WOULD YOU DO NEXT?
1.	Psychological Assessment with Hamilton Anxiety Scale (HAM-A)
2.	Psychological Assessment with Adult ADHD Self Report (ASRS)
3.	Psychological Assessment with The Bender Gestalt Test (BGT)

3. Intervention

Given the patient’s long-term use of psychotropic medications with limited improvement in executive functioning, a combined intervention strategy was used: 1. Pharmacological Treatment: Continued use of sertraline, clonazepam, and aripiprazole

under psychiatric supervision. 2. Mandala Art Therapy: Conducted twice a week for 45 to 60 minutes over six months. The therapy involved structured drawing and coloring of mandalas, aimed at improving focus, reducing anxiety, and promoting mindfulness. Mandala Art Therapy is increasingly recognized as a useful tool for helping with emotional regulation, lowering stress, and boosting concentration. Over the six-month period, the patient showed steady improvements, including less anxiety, a better ability to maintain attention, and improved sleep quality. She also reported feeling more self-aware and emotionally balanced

4. Diagnosis

The Bender Gestalt Test (BGT), the Adult ADHD Self Report Scale (ASRS), and the Hamilton Anxiety Scale (HAM-A)

These are used to give the test during the evaluation. The following are the findings from the assessment's evaluation: Cognitive and neurological integrity are revealed by the BG profile with total score of 4, moderate to severe anxiety is indicated by a high HAM-A score, and The following are the Adult ADHD Self Report Scale profile scores: Part A: 5 (scoring 0–6). This suggests that the person's symptom profile is quite compatible with an adult diagnosis of ADHD. Part B-10 (scoring 0–12) This score helps to further elucidate the severity of her symptoms and the effects that hyperactivity and/or inattention have on her day-to-day activities and functioning life.

Assessed with the methods indicated previously in combination with a clinical interview, the findings are diagnostic of Attention Deficit Hyperactive Disorder. Along with severe emotional and physical symptoms that coincide with and may worsen ADHD, the person also exhibits significant levels of anxiety.

As and Intervention patient can provide with Mandala Art Therapy for 6 months, for weekly 2 days of a duration of 45-60mins.

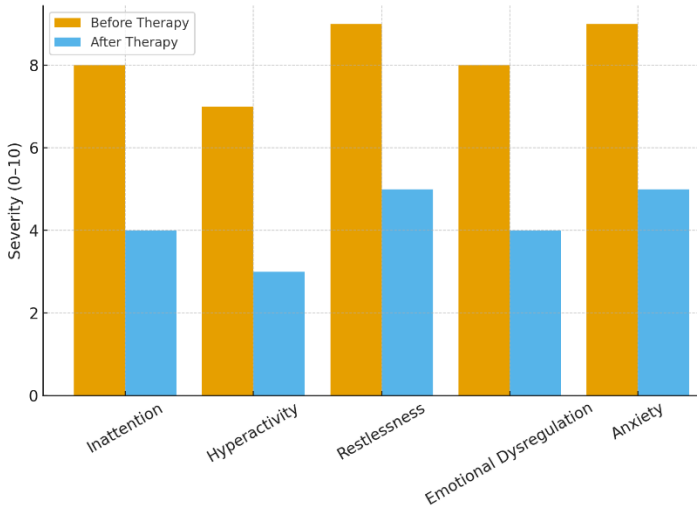

Figure 1 : Symptom Severity Before and After Therapy

5. Discussion

The complexity of diagnosing and treating adult attention-deficit/hyperactivity disorder (ADHD), especially when it manifests with symptoms that overlap with those of mood and anxiety disorders, is highlighted in this case. This supports the increasing amount of research indicating that adult ADHD is commonly misdiagnosed or underdiagnosed as a result of symptom overlap and a lack of clinical awareness.

Our patient presented with a 13-year history of dysthymia and generalized anxiety disorder (GAD), compounded by symptoms characteristic of ADHD such as distractibility, disorganization, restlessness, and emotional dysregulation. These symptoms were confirmed through validated tools including the Adult ADHD Self-Report Scale (ASRS), the Hamilton Anxiety Scale (HAM-A), and the Bender Gestalt Test (BGT)**.** The ASRS Part A score of 5 and Part B score of 10 strongly align with the diagnostic criteria for adult ADHD and highlight the functional impact of inattention and hyperactivity in the patient's daily life. Adult ADHD is characterized by comorbidity, with mood and anxiety disorders being two of the most commonly reported concomitant problems. According to Kessler et al. (2006), 38% of people with ADHD fit the criteria for mood disorders, and around 47% additionally suffer from anxiety disorders. The patient's extended use of antidepressants and anxiolytics without appreciable improvement in executive function or attentional ability may be explained by these overlapping symptoms. In these situations, a cycle of unsuccessful therapy may be sustained if the underlying ADHD is not identified and treated.

The patient's current psychotropic regimen and psychological profile made non-pharmacological therapies a consideration in this instance.

6. Conclusion

Adult ADHD is often missed and not treated enough, especially in people with long-term mood and anxiety disorders. This case study shows the importance of thorough assessment and combined treatments for better clinical results. Mandala Art Therapy, when paired with medication, can improve attention, emotional control, and overall quality of life. Future research should look at long-term studies to evaluate how effective creative therapies are as additional treatments. This can help broaden the options for adults dealing with ADHD.

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