Abstract

Objective:
A substantial number of children and adolescents with ADHD show severe affective and behavioural dysregulation. A dysregulation profile (DP) distinguishes those participants at a higher risk of comorbidity, dysfunction, and a poorer response to treatment. It was identified as high scoring in certain subscales of the Strengths and Difficulties Questionnaire (SDQ-DP). We developed a cross-sectional study to assess the clinical utility of the SDQ-DP in ADHD.

Method:
Two hundred fifty clinic-referred children and adolescents with ADHD were assessed. Univariate and linear regression analyses were performed to compare those participants with high levels of SDQ-DP with those with low levels, as well as to examine the association between the SDQ-DP and clinical variables.

Results:
In all, 28% of ADHD participants had high levels of SDQ-DP. These participants showed higher functional impairment and clinical severity.

Conclusion:
The use of the SDQ-DP will enable identification of those ADHD patients at greater risk.