Attention-Deficit/Hyperactivity Disorder and Nicotine Dependence in Adults.

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Abstract

INTRODUCTION:
The aim of this study is to assess clinical characteristics and smoking profiles of individuals diagnosed with attention-deficit/hyperactivity disorder (ADHD) and compare their nicotine dependence status with healthy controls for better understanding the mutual and complex relationship between ADHD and smoking.

METHODS:
We included the following participants in the study: 40 adult s with the diagnosis of ADHD, 40 participants who visited the smoking cessation polyclinic without any psychiatric disorders, and 40 healthy controls. A sociodemographic data form, Wender Utah Rating Scale (WURS), Adult ADD/ADHD Diagnosis and Evaluation Inventory, and Fagerstrom Nicotine Dependence Test (FNDT) were administered to the participants.

RESULTS:
Mean age of the ADHD, nicotine dependence, and control groups was 28.68±7.22, 34.17±8.60, 33.70±7.45 years, respectively. Percentages of females and males were 27.5% and 72.5% in the ADHD group, 50% and 50% in the nicotine dependence group, 47.5% and 52.5% in the control group. The attention-deficit scores in the ADHD, nicotine dependence, and control groups were 21.18±5.05, 7.23±3.96, 4.75±2.65, respectively (p=0.001), whereas the hyperactivity scores were 7.3±5.84, 6.43±4.2, and 3.58±2.27, respectively (p=0.001). The related features scores were 56.53±12.96, 24.30±13.93, and 13.13±6.11, respectively (p=0.001), whereas the WURS scores were 61.88±12.69, 23.03±16.07, 11.90±8.15, respectively (p=0.001). FNDT scores in ADHD and nicotine dependence groups were 5.83±2.11 and 6.20±2.74, respectively (p=0.495).

CONCLUSION:
Considering the argument of ADHD being an independent risk factor for nicotine dependence, we think the co-occurrence of the smoking addiction and ADHD symptoms in the context of dopamine dysregulation is important in the clinical setting. Treatment modalities and of preventive strategies should be considered while keeping this in mind.