

Self-Reported ADHD and Adult Health in the United States

Scott D. Landes, Andrew S. London

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Abstract

Objective:

Informed by a social determinants of health framework, we investigate the relationship between self-reported ADHD diagnosis status and adult health, and whether observed associations are attenuated by biomedical and socioeconomic factors.

Method:

Using 2007 National Health Interview Survey data (N = 19,104), we present multivariate logistic regression analyses of associations between self-reported ADHD diagnosis status and five adult health outcomes.

Results:

ADHD diagnosis was significantly associated with higher odds of injury, physical health conditions, functional limitations, fair/poor health, and psychological distress in fully specified models (adjusted odds ratios [AORs] = 1.62-2.36). Inclusion of controls for exogenous demographic characteristics, psychiatric comorbidities and health behaviors, and adult social and economic statuses attenuated but did not eliminate observed associations between ADHD and poorer adult health.

Conclusion:

Research on adult health outcomes for those with ADHD should include consideration of the mechanisms by which a diagnosis of ADHD leads to cumulative social disadvantages that independently contribute to poorer health outcomes.