THRIVE EMERGE

PSYCHIATRIC MEDICATION MANAGEMENT: TIPS AND RESOURCES FOR WORKING WITH NEURODIVERGENT PATIENTS

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Patients with ADHD and high-functioning autism often have patterns of thinking that can create challenges in the medication management process. Following are some tips for how to recognize and work with these issues.

Challenge 1: Different ways of experiencing the world

Quick Take: Neurodivergent brains might think, feel and act in ways that are not familiar to the practitioner

Approach: Begin with curiosity – get "inside" the head of your ND patients

1. Read about patterns of thought and emotional reaction associated with ADHD and autism – see Resources for Neurodivergence below
2. See The Neuroaffirming Relationship Checklist below

Challenge 2: Poor interoception/ self-awareness

Quick Take: Self-report is often difficult for people with ADHD and autism. "I don't know" might truly reflect their experience when asked "How are you doing?"

Approach:

1. Ask: is it difficult for you to know what's going on inside – emotionally and physically?
2. Discuss the value of being able to name one's inner experience for both emotional growth and physical health
3. Provide resources for basic mindfulness training – see Basic Mindfulness Training below
4. Encourage self-awareness: provide logs so patients can track symptoms on a daily basis

Challenge 3: Concrete vs Abstract Thinking

Quick Take: Even for many very intelligent patients with autism, abstracting or generalizing – seeing the big picture, understanding context – can be difficult.

Approach:

1. Ask very specific assessment questions: Not "How are you feeling?" but "Today and yesterday, when did you experience anxiety? What triggered it? How strong was it?"
2. Be concrete: help the patient identify the specific target symptoms – e.g., I have too many intrusive thoughts at night; my anxiety gets to 8/10; I struggle to get started on schoolwork; my mood is 3/10

3. On follow-up, reference these specific symptoms and how they are trending.

Challenge 4: Discomfort with Change, the Unknown, Unpredictability

Quick Take: Change can feel threatening to neurodivergent brains. New diagnoses and new treatment recommendations may take time to adapt to.

Approach:

1. Introduce your finding and recommendations slowly and with good explanations
2. Elicit reactions from your patient and their readiness to move ahead with what you have suggested.
3. Offer small changes: "Let's start with a really low dose for a few days and watch for any treatment effects or side effects."
4. Provide reassurance and accessibility: "You can get in touch with the office or with me anytime you have concerns and questions."
5. Make sure that the patient feels in control of the treatment process

Challenge 5: Rigid Thinking

Quick Take: Cognitive flexibility is necessary to adapt to changes, but often hard for patients with ADHD or autism to exhibit.

Approach:

1. Be aware that behind cognitive rigidity is a great deal of anxiety.
2. Ask the patient to explore what is making them anxious
3. Help them develop thoughts that might reassure them to move ahead with a recommended treatment.
4. Don't be surprised when patients get stuck. Be willing to let go of what you think is right and allow the patient to drive the treatment process.
5. A sense of control and autonomy can be very important in <u>gradually</u> moving towards the optimal treatment.
6. Above all, be compassionate and patient.

Challenge 6: Organization and Structure

Quick Take: Staying organized and planning can be tough for ADHD brains. Keeping appointments, remembering to fill and take meds, getting labs run may not run smoothly.

Approach:

1. Curb your frustration, don't blame the patient. They *want* to do it, but *can't* without external support and structure
2. Provide executive function support – e.g., reminders on the cell phone, staff calling with reminders, setting up med schedules
3. Identify friends and family who might serve as "EF coaches"