

SOMATIC COMORBIDITIES IN ADULTS WITH ADHD: PREVALENCE AND CLINICAL ASSOCIATIONS

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BACKGROUND AND AIM: Attention-Deficit/Hyperactivity Disorder (ADHD) is a common neuropsychiatric disorder that persists from childhood into adulthood. While psychiatric comorbidities in ADHD present major clinical and public health challenges, somatic comorbidities are also prevalent but less studied. These may stem from shared etiological mechanisms or ADHD-related lifestyle factors. The limited research on somatic conditions in ADHD creates a gap in diagnosis and treatment, despite evidence linking ADHD to early mortality and reduced life expectancy. This study aims to assess the prevalence of somatic comorbidities in adults with ADHD and their associations with clinical characteristics.

METHODS: We retrospectively reviewed medical records of 358 adults diagnosed with ADHD at the Adult Neurodevelopmental Disorders Clinic, Department of Psychiatry, Selçuk University. Demographic and clinical data were extracted and statistically analyzed. The study was approved by the Selçuk University Ethics Committee (Decision No: 2024/425).

RESULTS: Of the patients, 51.1% were female and 48.9% male, with a mean age of 23.7 ± 6.01 years (range: 16–49). ADHD

was diagnosed before age 18 in 29.7% and in adulthood in 70.3%, with a mean diagnosis age of 20.7 ± 8.07 years. Somatic comorbidities were present in 22.3%, most commonly obesity (10.3%) and asthma, followed by allergies, migraines, celiac disease, and thyroid disorders. Cardiac, metabolic, and allergic/autoimmune conditions were found in 3.4%, 5.3%, and 8.7% of cases, respectively. Somatic comorbidities were significantly more frequent in females and in those diagnosed at a younger age.

CONCLUSIONS: This study underscores the strong link between ADHD and somatic comorbidities, highlighting the need for an integrated clinical approach. Obesity and asthma were most common, likely influenced by shared etiology, ADHD-related lifestyle factors, or high comorbidity rates. Somatic conditions may affect treatment decisions, requiring careful monitoring of stimulant use. Routine screening in both directions could improve clinical outcomes.

Keywords: Asthma, Attention-Deficit/Hyperactivity Disorder (ADHD), obesity, somatic comorbidities