

ASSOCIATIONS BETWEEN EMOTIONAL DYSREGULATION AND CHILDHOOD AND ADULT ADHD SYMPTOMS IN ADULTS WITH ADHD: A MULTIVARIABLE REGRESSION ANALYSIS

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BACKGROUND AND AIM: Emotional dysregulation (ED)—including emotional lability, low frustration tolerance, and heightened emotional reactivity—is common in adults with ADHD and contributes to greater clinical severity and comorbidity. Although ED has increasingly been conceptualized as a core dimension of ADHD, its associations with both childhood and adult ADHD symptom characteristics remain insufficiently examined. In light of these considerations, this study aimed to investigate how childhood and adult ADHD characteristics influence emotional dysregulation.

METHODS: (Ethics Committee Approval must be obtained and the number should be specified). This retrospective study included 242 adults (mean age = 23.72 ± 5.88, 145 female) diagnosed with ADHD who attended a psychiatry clinic between 2021 and 2024. The Wender Utah Rating Scale (WURS), the Self-Report Wender-Reimherr Adult Attention Deficit Disorder Scale (SR-WRAADDS), and the Hospital Anxiety and Depression Scale (HADS) were administered. Data were analyzed using hierarchical multiple linear regression models to examine factors associated with ED (as measured by the SR-WRAADDS ED subscale) while controlling for sex, HADS subscales, and psychotropic medication use. (Approval number: I01-06-26)

RESULTS: Female participants had significantly higher SR-WRAADDS ED scores than males (U=5857.5, p=0.028).

Individuals not receiving medication had significantly higher SR-WRAADDS ED scores than those receiving stimulant treatment (U=1580.50, p=0.004). Hierarchical regression analyses demonstrated that SR-WRAADDS ED subscale score was differentially predicted across models. In the model including WURS subscales, female sex ($\beta=-0.13$, p=0.035), HADS anxiety ($\beta=0.22$, p=0.001), HADS depression ($\beta=-0.28$, p<0.001), and combined treatment ($\beta=0.20$, p=0.002) emerged as significant predictors, whereas none of the WURS subscales independently predicted. In contrast, in the second model, the SR-WRAADDS attention deficit ($\beta=0.52$), impulsivity/hyperactivity ($\beta = 0.21$), and temperament traits ($\beta=0.20$) subscales were the strongest independent predictors (p<0.001), while sex, anxiety and depressive symptoms were no longer significant.

CONCLUSIONS: The present findings indicate that ED is more strongly associated with adult ADHD symptom domains than with childhood ADHD characteristics. Clinically, these results underscore the importance of focusing on current ADHD symptom profiles and treatment status when assessing and managing emotional dysregulation in adults.

Keywords: Attention-deficit/hyperactivity disorder, childhood ADHD symptoms, emotional dysregulation, multivariable regression analysis