## **ABSTRACTS**

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YS-2-003 Antisocial outcomes and psychiatric, social and familial risk factors - a nationwide controlled Danish registry study

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Objectives: To identify the risk of antisocial involvement and associated risk factors in a large, validated cohort of individuals with ADHD. Secondary outcomes included age at onset of antisocial activities, the types of antisocial acts committed, and risk of recidivism. Methods: The subjects included all children and adolescents aged 4-15 with a first-time diagnosis of ICD-10 defined ADHD (F90.0 and F90.1) in the Danish Psychiatric Central Research Registry during the years 1995–2005 and a random sample taken from the Danish population matched on year of birth and sex. Data was linked to the Danish Central Crime Registry and to social and health-related registries. Data was analysed descriptively and with Cox proportional hazards models. Results: A total of 4333 cases and 15,319 controls were included in the follow-up study. The majority were male (84.7 %) and the mean age at follow-up was 21.1 (SD = 4.0). A total of 35 % of ADHD cases and 21 % of controls had been convicted at least once. The crude risk of conviction associated with ADHD was HR = 1.9 (95 % CI 1.8–2.1), p\.001. The most frequent criminal acts leading to conviction among ADHD cases were property offenses (e.g. theft) (18.5 %), traffic violations (13.9 %), violence (10.6 %), and drug related crimes (8.7 %). The median age of first conviction was lower for ADHD versus controls (Median: 17.7 vs. 18.4; Z = -8.3, p\.001). The risk and protective effects of comorbidity, medication, perinatal factors, familial psychiatric illness, antisocial histories, and socioeconomic factors on antisocial outcomes were evaluated. Conclusions: ADHD was associated with a crude twofold risk of conviction. Antisocial developmental trajectories were associated with individual, social and familial risk factors. Results will assist clinicians in identifying children and adolescents in special need of intense prevention interventions.