

The Relationship Between ADHD and Addictive Behaviours, a Review

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Received: November 17, 2025; Accepted: November 21, 2025; Published: November 26, 2025

Although attention-deficit hyperactivity disorder (ADHD) has long been thought to be a disabling and common disorder that occurs only in childhood, more recent research, including prospective longitudinal follow-up studies, suggests that ADHD persists into adulthood in a high proportion of cases [1]. Attention-deficit hyperactivity disorder is a serious risk factor for comorbid psychiatric disorders including substance misuse, antisocial personality disorder, and affective disorders [1]. The presence of ADHD complicates the treatment of the addiction [2]. Moreover, the correlation between ADHD, impulsivity symptoms, and behavioural addictions such as internet and shopping addiction highlights the necessity of managing ADHD symptoms in adults, particularly when coupled with substance use disorders [3]. Research also suggests a bidirectional relationship between ADHD and addictive behaviours, with ADHD symptoms potentially contributing to the development of substance dependence and behavioural addictions [4]. Chronic use of addictive substances has been observed to exacerbate ADHD symptoms like poor impulse control [5]. In adults, the use of stimulants in comorbid ADHD and SUD has always been challenging because of their addictive properties, which carry a greater risk of misuse, especially in individuals with a history of stimulant/cocaine abuse. Concerning treatment management, in clinical practice, an important distinction is between ADHD subjects with and without stimulant/cocaine addiction [6]. The complexity of the relationship between ADHD and addiction is underscored by studies emphasizing the role of ADHD in both the development and severity of addictive behaviours, often leading to a faster progression from mild to severe substance use disorders [6-9]. In terms of a management plan, routine screening is recommended for ADHD in adolescent patients in substance abuse treatment and for SUD in adolescent patients with ADHD in mental healthcare settings [10]. Long-acting stimulants are

recommended as the first line treatment of ADHD in adolescents with concurrent ADHD and SUD, and pharmacotherapy should preferably be embedded in psychosocial treatment [10].

Conclusion

In conclusion, the current literature supports the association between ADHD and addictive behaviours, emphasizing the need for conducting a comprehensive assessment and tailored interventions to address ADHD symptoms as well as addictive behaviours for enhancing outcomes and effectively managing both conditions.

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Citation: Hamidreza Rahamanian, Amirhosein Banki. The Relationship Between ADHD and Addictive Behaviours, a Review. *Open Access J Clin Path Res*. 2025. 1(2): 1-2. DOI: doi.org/10.61440/OAJCPR.2025.v1.25

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