

Anxiety disorders

Symptoms of anxiety disorders in children include being excessively frightened, distressed, and uneasy during situations in which most others would not experience these symptoms. Untreated, anxiety disorders can lead to poor school attendance, low self-esteem, deficient interpersonal skills, alcohol abuse, and adjustment difficulty. They are very common, affecting as many as one in 10 young people.

Attention-Deficit/Hyperactivity Disorder

Attention-deficit/hyperactivity disorder (ADHD) is an illness characterized by inattention, hyperactivity, and impulsivity. The most commonly diagnosed behavior disorder in young persons, ADHD affects an estimated three percent to five percent of school-age children. Although ADHD is usually diagnosed in childhood, it is not a disorder limited to children-ADHD often persists into adolescence and adulthood and is frequently not diagnosed until later years. There are three different types of ADHD, each with different symptoms: predominantly inattentive, predominantly hyperactive/impulsive, and combined.

Depression

About 2% of school-age children (i.e. children 6-12 years of age) appear to have major depression at any one time. Around puberty, the rate of depression increases to about 4%. Overall, approximately 20% of youth will have one or more episodes of major depression by the time they become adults. Signs that frequently help parents or others know that a child should be evaluated for depression include: the child feeling persistently sad or blue, the child who talks about suicide or being better off dead, the child who is suddenly much more irritable, has a marked deterioration in school or home functioning, or no longer engages in previously pleasurable social interactions with friends.

Bipolar Disorder

Bipolar disorder can occur in children and adolescents and has been identified by federally funded teams in children as young as age 6. Although once thought rare, some federally funded studies have shown that approximately 7% of children seen at psychiatric facilities fit bipolar disorder using research standards. One of the biggest challenges has been to differentiate children with mania from those with attention deficit hyperactivity disorder. Both groups of children present with irritability, hyperactivity and distractibility. Elated mood, grandiose behaviors, flight of ideas, decreased need for sleep and hypersexuality occur primarily in bipolar disorder and are uncommon in ADHD.

Asperger's Syndrome

Asperger's usually presents between ages 2 and 6 years, but is often not recognized until later. As far as doctors know, the disorder is present throughout the course of a person's life. It has often been diagnosed as late as young adulthood. The more general traits that may be observed include awkwardness in social situations, an intense preoccupation with certain specific (often unusual) topics, self-directed orientation, a lack of understanding of social cues, and clumsiness caused by lack of motor coordination.

Eating Disorders

Bulimia nervosa is a serious eating disorder marked by a destructive pattern of binge-eating and recurrent inappropriate behavior to control one's weight. It can occur together with other psychiatric disorders such as depression, obsessive-compulsive disorder, substance dependence, or self-injurious behavior. Anorexia nervosa is a serious, often chronic, and life-threatening eating disorder defined by a refusal to maintain minimal body weight within 15 percent of an individual's normal weight. Other essential features of this disorder include an intense fear of gaining weight, a distorted body image, and amenorrhea (absence of at least three consecutive menstrual cycles when they are otherwise expected to occur).

See more at:

<http://www.nami.org/Learn-More/Mental-Health-Conditions/MentalIllnessesinChildrenandAdolescents>

NAMI March 2016; Updated January 2017