

A review of current status of the assessment and treatment of Attention Deficit Hyperactivity Disorder (ADHD) / Autism Spectrum Disorder (ASD) within the perinatal mental health services (PMHS) across

Wales UK

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Background

There is a dearth of research on the prevalence of attention deficit hyperactivity disorder (ADHD) and autism spectrum disorder (ASD) diagnosis in women during the perinatal period. However, research consistently shows that neurodivergent individuals, particularly those with ASD/ADHD are at a heightened risk of encountering mental health challenges during the perinatal period.¹

The National Institute for Health and Care Excellence (NICE) provide general guidance for ADHD, covering diagnosis and management in adults, which applies in part to perinatal care, but there is a gap in resources specifically addressing perinatal ADHD.²

The current pathway for diagnosis and treatment of ADHD and ASD within the perinatal mental health services in Wales includes a referral to the appropriate neurodivergent team or the Community mental health team (CMHT)

Considering the rising number of individuals awaiting diagnosis and treatment for ADHD and ASD in UK and consequent delays of more than two and a half years average wait time for a first appointment following a referral³, it is pertinent to explore possible gap in the current pathway.

Aim

To explore the assessment and treatment gap for ADHD and ASD within the PMHS across Wales.

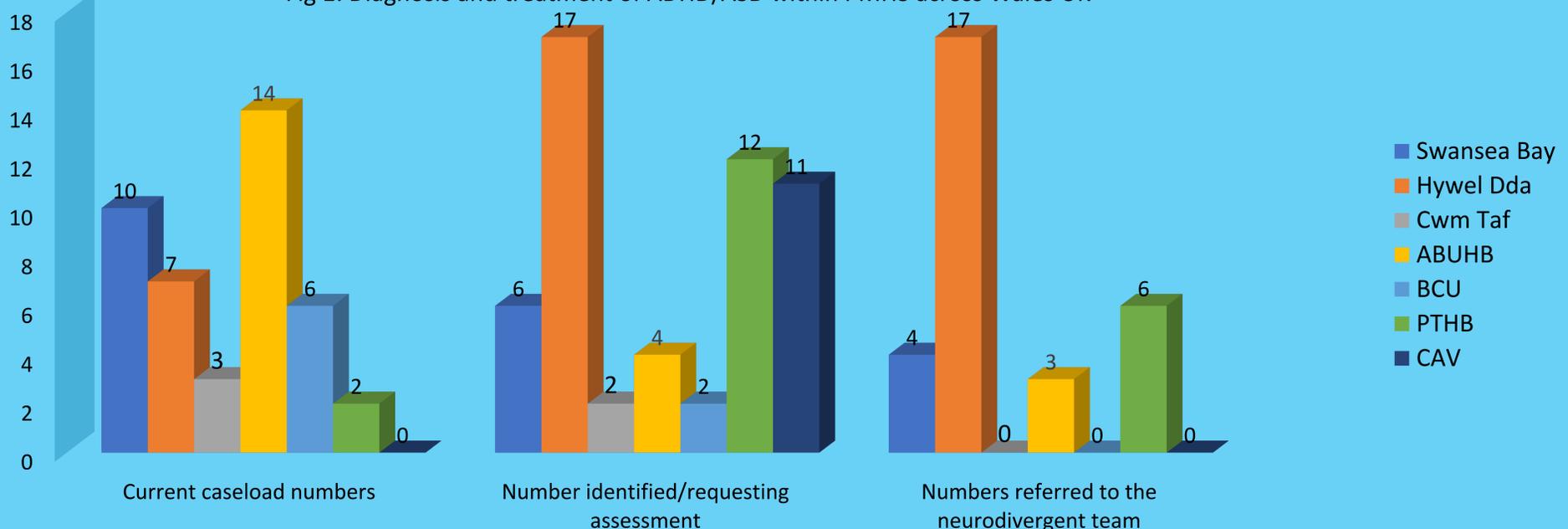
Method

The study using a cross-sectional was carried out within the PMHS across all 7 university health boards in Wales and covers the period between November 2023 and April 2024.

Data captured:

- All patients with formal diagnosis of ADHD and ASD.
- Patient identified as possible neurodivergent/requesting assessment.
- Number of referrals made
- Number on waiting list for neurodiversity services and duration of wait time

Fig 1: Diagnosis and treatment of ADHD/ASD within PMHS across Wales UK



Results

Fig 1

➤ Diagram 1 shows the number of people with a formal diagnosis of ADHD/ASD within each PMHS, with 6 of the 7 health board having between 2 to 14 patients in the 6 months period. This accounts for <5% of the total caseload of each PMHS.

➤ Diagram 2 shows the number of people identified by practitioners and those requesting for an assessment. This ranges between 2 and 17 patients within the 6 months period.

➤ Diagram 3 shows that most people needing assessment are still being referred to the neurodivergent team.

Fig 2 shows the number on a waiting list and the wait time between 3 months to 2 years depending on when they were referred. Wait time data was not available for 4 of the health boards.

Fig 2: Number of waiting list and duration in months



Conclusion

The study highlights that among women accessing perinatal mental health support are those with ASD/ADHD accounting for <5% of the total caseload for each PMHS.

Majority of these women are left undiagnosed and untreated during the perinatal period due to the challenges of the current pathway because of long wait time.

This highlights the need to deliver inclusive perinatal mental health services, particularly by integrating ADHD and ASD-specific care and providing resources that address both diagnostic and management needs within this critical period to improve mental health outcomes for both mother and baby. This findings will guide systemic changes within the PMHS in addressing this service gap.

References

1. Jata K, Elliott, Kate Buchanan, Sara Bayes. The neurodivergent perinatal experience — A systematic literature review on autism and attention deficit hyperactivity disorder. Women and Birth, Volume 37, Issue 6, 2024,
2. NICE. (2018). The Perinatal Mental Health Care Pathways NHS England and NHS Improvement. <https://www.nice.org.uk/guidance>
3. Lang, K. (2024). Autism and ADHD place “unprecedented” demand on NHS. BMJ, 385, q802. <https://doi.org/10.1136/bmj.q802>

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