

## Attention Deficit Disorder (ADD) or Hyperactivity Disorder (HD)

ADD/HD is a neurobiological disorder characterized by persistent problems in three areas: inattention, hyperactivity, and impulsivity. It is estimated to affect 6–9% of school age children. Although it seems more frequent in boys, girls are affected too. Boys are recognized as having ADHD more often because they tend to be overtly overactive and impulsive while girls tend towards the less obvious inattentive sub-type.

Although there is often improvement as the child matures, many persons with ADD/HD continue to have symptoms into adulthood. Some persons with ADD/HD also have other (co-morbid) psychiatric disorders such as mood (depression) and anxiety disorders, conduct disorder, oppositional defiant disorder, Tourette's syndrome, and learning difficulties. Low self-esteem is common and early intervention is important to minimize its impact on the child's life.

Treatment of ADD/HD is usually with a stimulant, such as Ritalin, which is effective in most cases. Often, behavioral intervention is added to boost therapeutic success.

< 18 years old		
In regular school/class with no co-morbid psychiatric disorder, treated only with Ritalin (or similar drug)	Non-rated	
Other cases such as aggressive behavior, drug experimentation, multiple medications needed, etc.	Usually declined	
≥ 18 years old		
Adult ADD, no disability, treated only with Ritalin (or similar drug)	Non-rated	
Adult ADD plus history of depression	Rating per depression history (see <i>Rx for Success</i> on Depression and Anxiety Disorders)	
Adult ADD plus any other psychiatric disorder	Individual consideration	

To get an idea of how a client with Attention Deficit Disorder (ADD) or Hyperactivity Disorder (HD) would be viewed in the underwriting process, feel free to use the Ask "Rx" pert Underwriter on the next page for an informal quote.

This material is designed to provide general information about the subject matter covered. It should be used with the understanding that we are not rendering legal, accounting, or tax advice. Such services should be provided by the client's own advisors. Accordingly, any information in this document cannot be used by any taxpayer for purposes of avoiding penalties under the Internal Revenue Code.

This material is intended for insurance informational purposes only and is not personal medical advice for clients. Rates and availability will vary based on the satisfaction of our underwriting criteria. Underwriting rules are subject to change at our discretion. This marketing material is subject to an expiration date, and use of this material must be discontinued as of the expiration date.

Insurance issued by The Prudential Insurance Company of America and its affiliates, Newark, NJ.

NOT FOR CONSUMER USE.

© 2012 Prudential Financial, Inc. and its related entities. 0191086-00002-00 Ed. 11/2012 Exp. 11/08/2014 Rx 075

## Securities and Insurance Products:

Not Insured by FDIC or Any Federal Government Agency. May Lose Value.

Not a Deposit of or Guaranteed by Any Bank or Bank Affiliate.



Ask "Rx"pert Underwriter (A	sk Our Expert)		
After reading the <i>Rx for Success</i> for an informal quote.	on Attention Deficit Disorder/Hyperactivity Disc	order (ADD/HD), use this Ask "Rx"pert Underwriter	
Producer	Phone	Fax	
		Sex	
If your client has a history of (AD	D/HD), please answer the following:		
1. Please list date of diagnosis.			
2. Is your client on any medicat	ions?		
_			
□No			
3. Does your client have a histo	ry of any of the following psychiatric disorders?	(Check all that apply.)	
■ Mood or anxiety disorder			
☐ Personality disorder			
☐ Conduct disorder or oppositional defiant disorder			
☐ Suicidal thought/attempt			
☐ Substance abuse (alcohol or drugs)			
☐ Other (specify)			
4. Has your client ever been hos	pitalized or on disability for psychiatric treatme	ent?	
☐ Yes. Please give details:			
□No			
5. If school-age, is your client in	regular class for age?		
☐ Yes. Please give details: _			
□No			
6. Has your client smoked cigar	ettes in the last 12 months?		
☐ Yes. Please give details: _			
□No			
7. Does your client have any oth	er major health problems (e.g., cancer)?		
☐ Yes. Please give details: _			
□No			