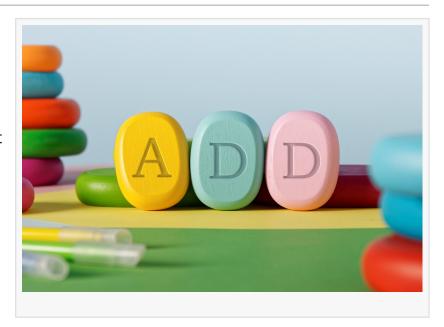


# Hormonal Fluctuations May Influence ADD Symptoms Differently in Women and Men, Says Gulfport Physician

GULFPORT, LA, UNITED STATES, April 10, 2025 /EINPresswire.com/ -- Attention Deficit Disorder (ADD) presents differently across individuals, but growing evidence suggests that hormonal fluctuations play a significant role in how symptoms manifest—especially when comparing women and men. While the core neurological mechanisms of ADD are consistent, the interaction between brain chemistry and hormone levels may account for variations in symptom severity, diagnosis timelines, and treatment response.



<u>Dr. Stanford Owen</u>, founder of <u>ADD Clinics</u> in Gulfport, Mississippi, addresses this emerging area of concern. "Hormonal shifts can amplify or mask core ADD symptoms," said Dr. Owen. "This is



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particularly evident in women during key reproductive milestones, such as menstruation, pregnancy, and menopause, where estrogen and progesterone interact with neurotransmitters tied to attention and impulse control."

ADD Clinics, under the direction of Dr. Owen, provides

evaluation and treatment for patients across all age groups, with an emphasis on identifying gender-specific presentations that may be overlooked using traditional assessment models.

Estrogen, Dopamine, and Attention Regulation

Estrogen is known to influence dopamine activity—a neurotransmitter central to focus, motivation, and executive function. In women, fluctuating estrogen levels can modulate dopamine transmission, which may impact attention span, working memory, and emotional

regulation. During the luteal phase of the menstrual cycle, when estrogen drops and progesterone rises, many female patients report worsening of inattentive symptoms and decreased tolerance for distraction.

In contrast, men experience more stable hormonal patterns throughout their lifetime. Testosterone levels decline gradually over time, which may lead to subtle changes in mood or concentration, but do not typically



produce the cyclical symptom changes reported in females.

# Menstrual Cycle and Symptom Variability

For women with ADD, symptom tracking often reveals noticeable changes across the menstrual cycle. Many report a spike in distractibility, restlessness, and mood swings in the days leading up to menstruation. These symptoms may mirror premenstrual syndrome (PMS), but for those with ADD, they are typically more severe and disruptive.

Research suggests that lower estrogen levels can reduce the efficacy of stimulant medications commonly prescribed for ADD. This may require personalized dosage adjustments or supplemental non-stimulant strategies during certain phases of the cycle.

## Pregnancy and Postpartum Impacts

Pregnancy introduces another layer of complexity. While some women report improved focus during the second trimester due to elevated estrogen levels, others struggle with concentration and mental fog. The postpartum period, marked by a steep drop in estrogen and progesterone, is associated with both mood disorders and ADD symptom exacerbation.

For individuals with pre-existing ADD, this period may include increased disorganization, emotional reactivity, and memory lapses. For others, undiagnosed ADD may only become apparent after childbirth, when hormonal instability and new caregiving demands reveal attention regulation challenges for the first time.

## Menopause and Midlife ADD in Women

Menopause marks a significant hormonal transition, with sustained declines in estrogen and progesterone. For women with ADD, this can be a turning point—symptoms that were once manageable may become more prominent. Difficulty with multitasking, increased forgetfulness, and emotional sensitivity are often reported.

In some cases, ADD symptoms during perimenopause are misattributed to cognitive aging or

mood disorders, delaying accurate diagnosis. These shifts often call for reevaluation of treatment plans, particularly if stimulant medications that once provided symptom control are no longer effective.

### Symptom Presentation in Men

While hormonal fluctuations are less pronounced in men, ADD can present differently due to social and neurological factors. Hyperactivity and impulsivity are more commonly reported in male patients, often resulting in earlier diagnosis during childhood. In adulthood, men may experience chronic restlessness, irritability, or difficulty maintaining focus in structured environments.

Gradual changes in testosterone may influence mood regulation, sleep quality, and motivation over time. While not as dynamic as female hormonal shifts, these changes can still compound executive dysfunction and warrant clinical attention.

### Clinical Considerations for Treatment

Understanding the role of hormones in ADD presentation has implications for diagnosis and treatment. Traditional assessment tools may not fully capture cyclical or gender-specific symptom patterns. Incorporating hormonal history, cycle tracking, and age-related hormonal shifts into the diagnostic process allows for more accurate treatment planning.

"Many female patients are either misdiagnosed or underdiagnosed because their symptoms don't match the hyperactive male stereotype," said Dr. Owen. "Awareness of hormonal influences allows clinicians to better tailor both medication and behavioral interventions."

### **Future Directions**

Ongoing research continues to explore how hormonal regulation affects neurodevelopmental conditions like ADD. Collaborative efforts between endocrinologists, psychiatrists, and primary care physicians are essential to refining treatment approaches that consider gender differences, hormonal health, and long-term outcomes.

At ADD Clinics, efforts are made to bridge these gaps by offering comprehensive assessments that reflect both neurological and physiological influences on attention-related conditions.

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