Abstract

BASIC POSTULATES: It is common the people affected by ADHD consume addictive substances, seeking relief from their sensations of motorical unease and to disturb their rationalising and thinking. Using these substances subjectively improves their abilities, reducing the undesired and unpleasant sensations emanating from the ADHD, possibly even creating enjoyable and desirable moods. The resulting problem is, this self-medication causes troubles in many aspects, detectable only gradually after longer periods of consumption. What starts as an effort to paliate the undesirable symptoms of ADHD and other effects thereof, progressively becomes seeking a solution to harmful consumption of marihuana and, in extreme cases, additiction to cannabinoids.

OBJECTIVES: The main objective of this thesis is to find out what is the purpose of the people with ADHD diagnosis in taking cannabis. The focus as put on whether cannabis is used to treat the symptoms of ADHD or not (regardless of the diagnosis). It was also important to map what other addictive substances use if self-medication using cannabis.

METHODS: Semi-structured was chosen for the purposes of research. The questionnaires were used from L. Adler ASRS –V1 Adler.1 - Report (Adult ADHD Self Scale). Cannabis Use Disorders Identification Test (CUDIT) from Adamson. This last method is direct observation, which is inseparable from the talks. Research was carried out in five respondents (n = 4 mens, n = 1 woman) was diagnosed with ADHD in childhood and expressions persist into adulthood. All respondents are cannabis users. Data from respondents was then coded by the coding, and open the meaning unit composed of terms which indicate events such as events, feelings, etc. The category, since these units compared and sorted according to similarities.

RESULTS: The result of this research is that everyone involved that the symptoms of ADHD as adults have the same cannbis use patterns. The reason for this is that they can be, but also of their self-medication. If not, patients in this research on sebemedikaci, their use can be classified as risk behavior associated with the use of drugs for ADHD, not self-medication.

CONCLUSION: This work does not bring new knowledge, but also is not in contradiction with similar thesises. May serve as a stimulus for the creation of some innovative method of work with clients that have survived have ADHD in childhood and in adulthood. It is desirable to treat, or monitor and prevent risk factors behaviour in relation to the substance.

Key words: ADHD, use cannabinoids self-medication, marijuana, field theory, young adult