



# My Child Has ADHD, What Now?

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## ADD or ADHD?

- Attention Deficit Hyperactivity Disorder
  - Predominantly inattentive presentation
  - Predominantly hyperactive/impulsive presentation
  - Combined presentation



# Key Features

- Impulsivity
  - Disturbance in executive functions of controlling arousal and level of activation for the situation
- Inattention
  - Inability to deploy, sustain, and shift attention as task demands require
- Hyperactivity
  - Inability to determine when actions should be emitted, control the force and sequencing of actions

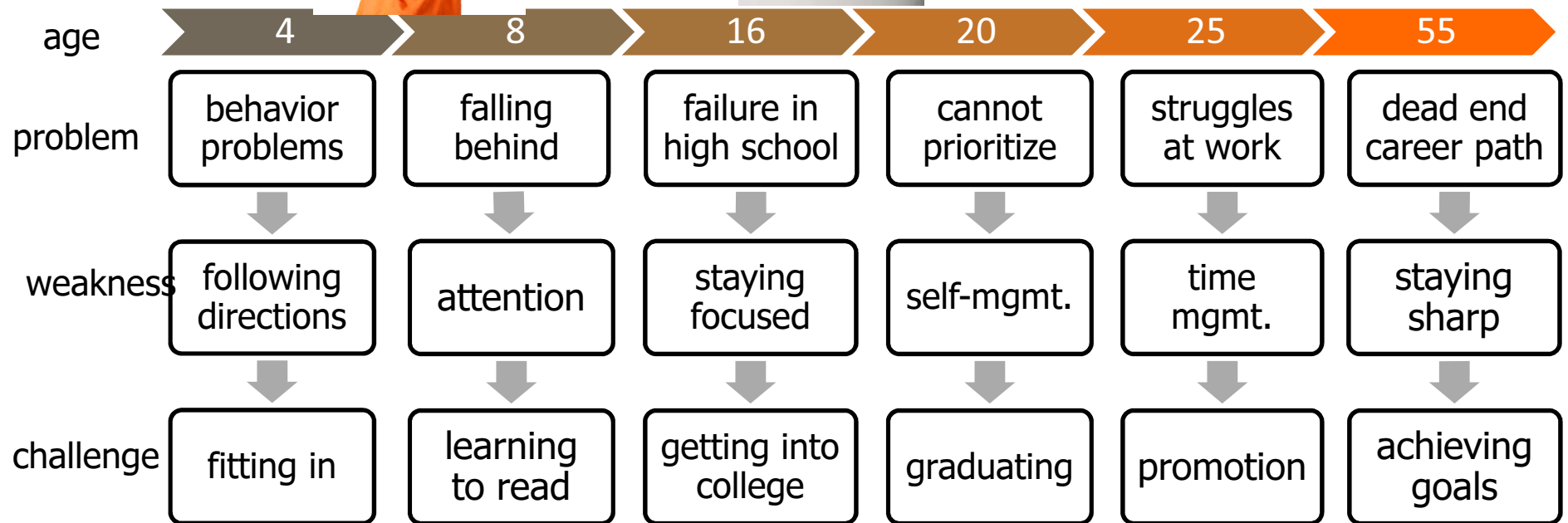
Gallager and Blader (2001).



# Attention Deficit Hyperactivity Disorder

- Present in 2 or more settings
- Significantly interfere
- Prior to 12 years of age
- Severity = Mild, Moderate, Severe
- 5% of children
- 2.5% of adults
- Overlaps (comorbid) with other disorders







# What Causes ADHD?

- Diet
- Parenting
- Prenatal toxins
- Postnatal toxins
- Very low birth weight
- Family History



# What Goes With ADHD?

- Learning Disabilities (25 – 40%)
  - Written Expression
  - Verbal
  - Nonverbal
- Behavioral Disorders
  - Oppositional Defiant Disorder (50%)
  - Conduct Disorder (25 – 45%)
- Mood Disorders (25%)
  - Anxiety
  - Bipolar Disorder
  - Depression
- Substance Use Disorders (10 – 25%)
- Tic disorders and Tourette Syndrome
- Social skill deficits



# Core Features in Preschool

- Highly active
- “mood swings”
- Little need for sleep, naps
- High need for supervision





# Core Features in Elementary School

- Inability to sit still
- Problems with personal space, intrusive
- May appear or be called “lazy” or “spaced out”
- Sloppy
- Social rejection



## Core Features in Middle, High School, Adulthood

- Continued lags in academic output
- Problems with organization
- Need to repeat tasks



# What are the Options?

- Medication
  - Stimulant
  - Non-stimulant
- Intervention
  - Treatment approaches
- Accommodations
  - Long-term supports



# Medication

## Pros

- Effective for preschoolers, children, adolescents and adults
- Negative side effects

## Cons

- Does not teach skills
- Can increase probability of tics





# Medications

## Stimulant

- Methylphenidate
  - Ritalin, Metadate, Concerta, Daytrana, Focalin
- Amphetamines
  - Adderral, Dexedrine, Vyvanse
- Short-Acting
- Long-Acting
- Patch (Daytrana)

## Non-Stimulant

- Strattera (NE, 5-HT)
- Intuniv, Tenex (Guanfacine)



# Risks and Side Effects

- Cardiac
- Appetite suppression
- Anxiety
- Sleep difficulty
- Mood
- Tics
- Little indication of addiction
- Can be misused for profit/performance enhancement
- Sedation



# Intervention

- Behavior Modification
- Cognitive-Behavioral Therapy
- Brain Training
  - Interactive Metronome
  - Neurofeedback
  - Cogmed
- Camps
- Educational
- Complementary and Alternative Approaches



# Behavior Modification

- Modify the Setting
- Modify Timing
- Modify Responses
- Parent Training
- Most Effective Approach with preschoolers





# Cognitive-Behavioral Therapy

- Effective alone or with medication
- Teaches skills
- Requires verbal skills, problem solving
- Summer camps
- Self-control
- Relaxation
- Positive self-talk



# Brain Training

- Interactive Metronome
- Neurofeedback
- Cogmed
- Brain Gym



# Educational

- Behavioral and environmental modification
- Associated learning problems
- Organization
- Peer assistance
- Problem-solving
- Social skills



# Accommodations

- Home
- School
  - Individuals with Disabilities Education Act
  - Americans with Disabilities Act
  - Entrance exams (ACT, SAT)
  - Throughout college !
- Work
  - ADA

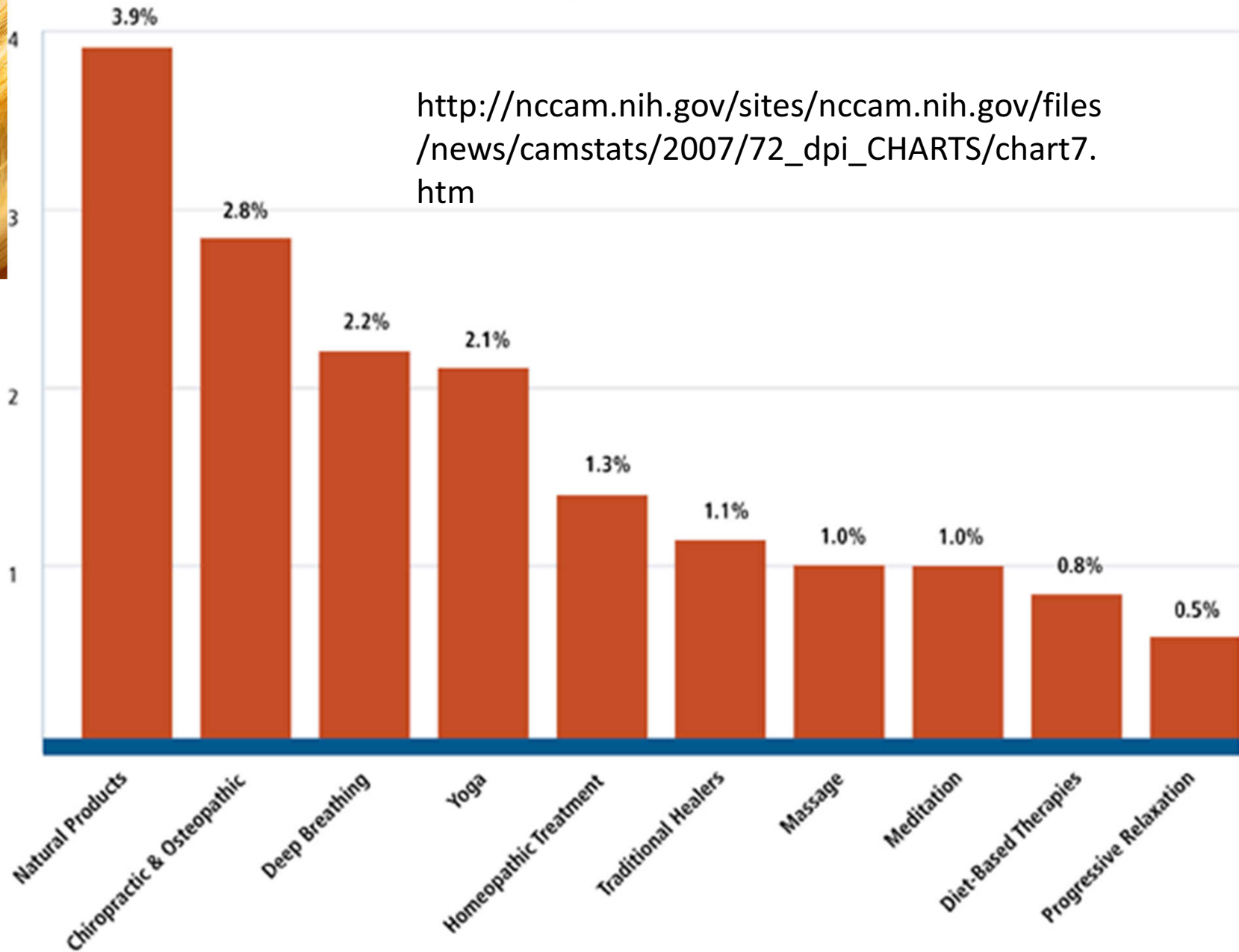




# Complementary/Alternative

- Dietary
- Nutritional Supplements
- Sensory Integration
- Interactive Metronome
- Visual retraining
- Chelation therapy
- Craniosacral manipulation

## 10 Most Common Therapies Among Children - 2007



Source: Barnes PM, Bloom B, Nahin R. *CDC National Health Statistics Report #12. Complementary and Alternative Medicine Use Among Adults and Children: United States, 2007.* December 2008.



# Important Considerations

- Examine and rule out other medical conditions to be targeted for treatment
  - Neurologic
  - Behavioral
  - Developmental/Learning
  - Emotional, trauma, stress



# Individualized

- Severity and type of ADHD
  - Predominantly Inattentive v. hyperactive-impulsive
- Age of child and other developmental, medical factors
- Parent/family beliefs, preferences
- Cognitive and behavioral profile





# Comprehensive Neuropsychological Evaluation

- Cognitive, emotional, behavioral, family, medical, educational factors
- Complete history
- Evaluation of multiple domains of cognitive functioning



# Evaluation

- .... Is a PROCESS, NOT a Test
  - Few measures differentiate ADHD from outpatient controls with the exception of DS back and TMT
  - Specific tasks of vigilance and sustained attention and simple tasks of mental effort can differentiate some with ADHD, but are not very specific to ADHD; and are not always sensitive
- Children
  - Poorer working memory, processing speed, motor speed
- Adults
  - Slower motor and mental processing speed
  - Poorer verbal learning and recall




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### Medication Guide for treating ADHD

Click [HERE](#) to download the Adobe Acrobat PDF version of the Guide. 

Click [HERE](#) to download the Adobe Acrobat PDF version of the Guide. (Español) 

Click [HERE](#) for the AACAP *Practice Parameters for the Assessment and Treatment of Children and Adolescents With Attention-Deficit/ Hyperactivity Disorder*

Please help us better serve your needs and the needs of others by completing a brief opinion survey after reviewing the "Medication Guide for Treating ADHD." Your feedback on the guide is essential for us to provide accurate and helpful information about ADHD. Click [HERE](#) to begin the survey. Thank you!

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## NCCAM clinical digest

### Children and Dietary Supplements

SEPTEMBER 2012

Research has shown that many children use herbs and other dietary supplements. However, there are little data available on their safety and effectiveness in children. The 2007 National Health Interview Survey (NHIS) gathered information on use of complementary health practices among more than 9,000 children younger than 18. Nearly 12 percent of the children had used some form of a complementary health practice during the past 12 months. In addition to herbs and dietary supplements, children use a wide range of complementary health approaches, including spinal manipulation and yoga.

Further, a 2001 survey of 745 members of the American Academy of Pediatrics found that 87 percent of pediatricians had been asked about complementary health practices by a patient or a parent in the 3 months prior to the survey. The pediatricians in the survey were asked most often about herbs and dietary supplements.

This issue provides information about scope of [use of complementary](#)



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 Effective Health Care Program

**Treatment Options for ADHD in Children and Teens**  
A Review of Research for Parents and Caregivers



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CHADD has moved! Although our address has changed our phone numbers have remained the same. For more information, please visit [www.chadd.org/UnderstandingADHD/ParentsCaregiversofChildrenwithADHD.aspx](http://www.chadd.org/UnderstandingADHD/ParentsCaregiversofChildrenwithADHD.aspx)


### CHADD Resource Directory

Search by State to find ADHD professionals, local support groups, and Parent to Parent Certified Teachers






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1 My child is struggling in school with learning. What should I do?

2 Now that my child has been identified with LD, what's next?

3 How do I ensure my child's success and plan for the future?

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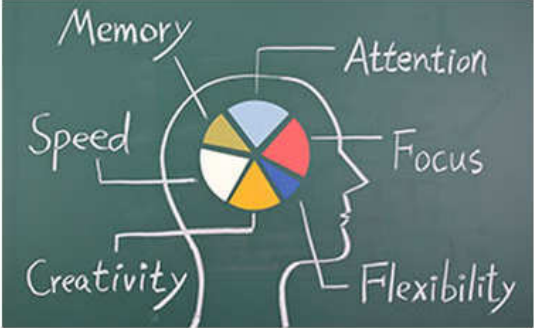
Home > Types of LD > ADHD & Other Related Issues > ADHD


## ADHD

What is Attention-Deficit/Hyperactivity Disorder (ADHD), and what does it have to do with learning disabilities (LD)? ADHD and LD are not the same thing, but ADHD certainly can interfere with learning and behavior. About one-third of people with LD have ADHD. Clear up your confusion about the two often co-occurring disorders by accessing the information below.

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**What's the Relationship Between ADHD and Executive Function?**  
Attention-Deficit/Hyperactivity Disorder (ADHD) is one of the most frequently occurring brain-based



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## Books and Games

Great Minds recommends these:

### Topics

Attention Deficit Hyperactivity ▼

Image	Title	Publisher	Publication date
	<i>Understanding Girls with AD/HD</i>	Advantage Books	1999-05-31
	<i>Taking Charge of ADHD: The Complete, Authoritative Guide for Parents (Revised Edition)</i>	The Guilford Press	2000-08-31
	<i>The A.D.D. Book: New Understandings, New Approaches to Parenting Your Child</i>	Little, Brown and Company	1998-03-30
	<i>Delivered from Distraction: Getting the Most out of Life with Attention Deficit Disorder</i>	Ballantine Books	2005-12-27
	<i>Taking Charge of Adult ADHD</i>	The Guilford Press	2010-07-21








[www.greatmindsmi.com/books-fames?topics=1](http://www.greatmindsmi.com/books-fames?topics=1)

Books and Games

Great Minds recommends these:

Topics

Attention and Working Memory ▾

Image	Title	Publisher	Publication date
	<i>Improving Working Memory: Supporting Students' Learning</i>	SAGE Publications Ltd	2010-12-08
	<i>Working Memory and Learning: A Practical Guide for Teachers</i>	SAGE Publications Ltd	2008-01-30
	<i>Smart but Scattered: The Revolutionary "Executive Skills" Approach to Helping Kids Reach Their Potential</i>	Guilford Press	2009-01-02
	<i>Promoting Executive Function in the Classroom (What Works for Special-Needs Learners)</i>	The Guilford Press	2010-03-22
	<i>LeapFrog Fix the Mix!</i>	LeapFrog	