

ATTENTION-DEFICIT HYPERACTIVITY DISORDER

(ADHD)



BASIC INFORMATION

DESCRIPTION

A pattern of behavior in children characterized by short attention spans and impulsivity, with or without hyperactivity. It is implicated in learning disorders and estimated to affect 5 to 10% of school-aged children.

FREQUENT SIGNS AND SYMPTOMS

- Squirms in seat; fidgets with hands or feet.
- Unable to stay seated when required to do so.
- Easily distracted.
- Blurts out answers before a question is finished.
- Difficulty waiting turn in games and lines.
- Difficulty following instructions.
- Unable to sustain attention in work or play activities.
- Shifts from one uncompleted project to another.
- Difficulty playing quietly.
- Talks excessively.
- Interrupts or intrudes on others.
- Doesn't appear to listen.
- Loses items necessary for tasks.
- Often engages in dangerous activities without considering consequences.

CAUSES

Unknown. Many theories proposed, but none proven or disproven. It is thought to be of biological origin.

RISK INCREASES WITH

Family history of the disorder.

PREVENTIVE MEASURES

No specific preventive measures known.

EXPECTED OUTCOME

In some cases, the behavior disappears completely at puberty. In others, hyperactivity diminishes with age. However, a number of these children grow into troubled teenagers and adults.

POSSIBLE COMPLICATIONS

- Child may not grow out of difficulties. Later problems may occur, such as academic failure, antisocial behavior and sometimes criminal behavior.
- Problems may carry on to adulthood, with a high incidence of personality disorders.



TREATMENT

GENERAL MEASURES

- Doctors treatment and counseling for parents and child.
- Behavior and cognitive therapies. These therapies involve the child with self-monitoring, role playing and self-recording. They focus on strategies that alter the undesired behavior. A combination of these techniques and psycho-stimulant medications seem to have the greatest affect in controlling the symptoms.
- Help your child at home by providing a structured environment, well-defined behavior limits and consistent use of parenting techniques. Get professional assistance if help is needed.
- Stay in close contact with the child's teacher. Arrange for extra lessons or tutoring if the child needs help with school subjects.
- For additional information, contact the Attention Deficit Disorder Association, 8091 S. Ireland Way, Aurora, CO 90016; (800) 487-2282

MEDICATION

Your doctor may prescribe stimulant drugs, such as methylphenidate (Ritalin), which appear to have a calming affect on children with the disorder. These drugs have unpleasant side effects, such as sleep disturbances, depression, headache, stomach ache, loss of appetite and stunted growth.

ACTIVITY

Structure your child's activity to the extent possible.

DIET

Diets that remove all food additives, special elimination diets or megavitamin therapy have been suggested. Most medical research indicates that these diets benefit very few children. Many parents, however, report dramatic changes in behavior after this treatment. This change may result from the extra attention the child receives with preparation of special meals. Discuss any special diets with the doctor.



NOTIFY OUR OFFICE IF

- You believe your child has symptoms of attention-deficit hyperactivity disorder.
- Symptoms continue to worsen after treatment is started.
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.