

Managing AD/HD?

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Now-a-days, very often we hear the term "Attention Deficit/Hyperactivity Disorder" (AD/HD). It has been very commonly used by the teachers, when they come across to an inattentive and impatient child at the classroom. In no time, without exploring the reasons behind the child's behaviors and offering him/her the help she needs, teachers recommend the child's parents to see a psychiatrist. In Bangladesh, this has become a common practice among the many English medium school teachers. On the other hand, some parents might have noticed that their children are bit restless and talkative than other children, which is more alike and confirmed the teacher's comment. Moreover, the thought of the most parent is- "our children must do better in school and get higher score in exam." This fuels the urge to go for an appointment with a psychiatrist.

Your child may display some behaviors such as impatience, talkativeness, restlessness, or fidgeting. Do not misunderstand these actions with any disorders. These can be caused by medical or psychological (behavioral or emotional) problems. On the contrary, if your child were clam, quiet, under active, less responsive, that would not feel good to you and which would not be expected, too. These behaviors also indicate some sort of problems as well, which need professional attention. Now, the question arises how much activities of a child will be considered as normal and when it will cross the boundary of normality. There is no standard to indicate a child's behavior. If as a parent, you feel the child is getting out of control, consult a professional, e.g., medical doctors, or psychiatrists or clinical psychologists, who can surely confirm you the problem through several in-depth inquiries.

Labeling with any disorder needs to be confirmed through complete medical history, physical exam, lab work, allergy testing, heavy metal testing and educational testing, along with considering other possible psychological and emotional causes. If your child is labeled with ADHD without the benefit of such tests, chances are high that your child is misdiagnosed. Doctors doing the prescribing medicines usually skip a physical exam and/ or thorough history taking (what clinical psychologists call "Assessment", and strongly emphasize on it for exploring the hidden causes of the targeted behavior) for scarcity of time. Furthermore, rarely there is any lab work or allergy testing performed. The doctors just accept the teacher's opinion and parent's concern, and prescribe a psychiatric drug. According to the National Institute of Health (USA), there is no valid test of ADHD, therefore, labeling children as ADHD and prescribing psychiatric drugs may be quick, easy and cheap, but it is not a good practice. Managing a young child's behavior with least expensive and quick approach (i.e., medicine) may end up being the most costly and having adverse long-term effects. According to the National Institute of Health (USA), there is no data indicating that ADHD is a brain disorder, and children display little academic & social skills improvement when treated with drugs.

An article in the Journal of the American Medical Association (JAMA) reporting that the number of two to four years old children on stimulant and anti-depressant drugs, such as Ritalin, Prozac, etc. increased dramatically between 1991 to 1995 (Zito et al., 2000) The number of American children and adolescents taking psychiatrist drugs tripled in the past 10 years. In our country, it's becoming a practice for higher socio-economic class to visit a psychiatrist even for a trivial cause and receive a lot of medicine, without

considering the side effects. The doctors are also not open to discuss the information with their patients. A study in the Archives of Pediatrics and Adolescent Medicine (APAM) reports pediatrics and child psychiatrists are turning more and more to prescription drugs to treat their young patients (Rappley et al., 1999). The question arises, whether or not the psychiatric drugs are prescribed responsibly (or overly prescribed). The study of APAM went on to say "few psychiatric drugs are approved for use in children" and "the early and long term effects of using psychiatric drugs on the developing brain are unknown", though "animal studies have hinted that some of these drugs may have a lasting impact on the brain when given prior to puberty." Similarly, another APAM report notes that, there is insufficient follow-up of young children while on medication (DeBar et al., 2003).

Psychiatric drug Ritalin, the most commonly prescribed drug for ADHD, is similar to cocaine. It goes to same brain receptor site, causes the same high when taken in the same manner, and is used interchangeably with cocaine in medical research. A recent study in the JAMA indicates Ritalin is more potent than cocaine (Zito et al., 1999). Therefore, as a parent a careful consideration needs to arise here. Is it worthy for us to push our children to become illegal drug addicts?

As a parent, you have options to save your child from too much drug intaking or misdiagnosed with ADHD. In the following steps might be able to help improve your child's attention and behavior without drugs.

- **Lessen sugar from your child's diet.** Sugar, may affect even healthy children's behavior. Low blood sugar, which results from eating sugar or from not eating enough protein, can cause behavioral problems and inattention. Instead of sugary dishes, serve your child proteins such as, meats, fishes, eggs, milk, cheese and so on.
- **Give your child vitamins and minerals.** Most children's diets are lacking in fruits and vegetables, and hence, in important vitamins and minerals. Nutrients are needed for all biochemical process and if unavailable, the body and mind cannot work properly. Certain minerals directly affect behavior, attention, and leaning. For instance, studies find magnesium deficiency in children caused fidgeting and learning difficulties, zinc deficiencies triggered hyperactivity, and essential fatty acid deficiency plagued boys with tantrums and sleep problems. Research also suggested vitamin B6 worked better than Ritalin in treating hyperactivity, poor school performance, and social relationships. Moreover, vitamin B12 is commonly used to improve memory loss and moodiness.
- **Treat allergies.** According to the Annals of Allergy (19), children with allergies are less successful in all areas of school than children who do not have allergies. The study concluded allergies cause learning impairment so serve, that the writer recommended students to be excused from test taking during allergy season.
- **Consider food sensitivities.** Food sensitivities reactions affect how we think, feel, and act. Therefore, test your child's sensitivities to what food and eliminate those from the child's diet.
- **Don't allow school personnel to label your child ADHD.** Educators are not qualified to conduct medical evaluations and cannot perform the medical evaluation needed to diagnose. So, do not take an assumption of a teacher as a decision about your child.
- **Have your child evaluated for learning disabilities or learning differences.** Before all medical tests prove the child's ADHD, do not label the child with psychiatric disorder. It may be a learning problem of the child. When a specific learning problem is not detected for long, the child may unfortunately receive an ADHD level. Smart children are often able to compensate for their learning difficulties, and if not evaluated for learning style, their true troubles may be missed. In reality, many children labeled with ADHD have different learning act out.

- **Consider medical conditions.** Request medical doctors to consider medical conditions, such as thyroid problems and anemia. Both can interfere with a child's ability to learn and focus. Heavy metal toxicity can also cause learning problems. Lead poisoning, mercury and aluminum toxicity are also associated neurological problems.
- **Look for a qualified professional.** Above all, seek a professional support, who can assess thoroughly and with patience the history of the child's behaviors, investigate related fields, what are causing it, maintaining it, and who can integrate all other supports and if necessary who can refer to test all possible medical causes beneath your child's different behaviors, and then go for suitable intervention, which is called 'Psycho-therapy.' This psychological intervention has long term benefits compared to psychiatric drugs (Willis D. J. 2003).

For your information :

In Bangladesh Clinical Psychologists from the Dhaka University are theoretically and practically trained to serve Psychological managements of psychiatric problems, i.e. Psycho-therapy there are very famous and renowned anti-drug treatment for psychological (behavioral and emotional) problems. It's a new and rising profession to our country. But it has been very popular profession in the developed country for approximately hundred years. They are able to work along with the psychiatrists as well as individually to different types of psychological problems of children & adolescents.

About writer

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নিয়ে বেঁচে আছে।’

‘জিম্বাবুয়েতে ৫৬ হাজার শিশু এইচ.আই.ভি.
তে আক্রান্ত’

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