



# Overcoming **ADHD** and Coming into Your Own

**Attention-deficit/hyperactivity disorder (ADHD) is a chronic condition that is lifelong** and can be frustrating to live with for children who have it, their parents, and other adults who try to help. Yet many children have adapted to life with ADHD. How do they do it? And how can parents help diagnosed children find success in school and in every other part of their lives? Here's what we know.



**By Sam Gaines**

**A**s more children are diagnosed with ADHD and no cure has yet emerged, many parents of children with ADHD may be wondering what their prospects for a happy, healthy life are. Will the medications make a difference? Will they keep working? Will therapy help? Will my child find a way to succeed?

These are common concerns. An estimated 8 to 10 percent of American children live with ADHD, according to the Nemours Foundation. More children have been diagnosed with ADHD than ever before, and no one is sure exactly whether it's because more children have it, or it's diagnosed more frequently. Research and experience have both shown that ADHD can be treated successfully, and children with ADHD can and do grow into productive, successful, happy adults.

### **Defining the Condition**

To understand what ADHD is, it's helpful to define what it isn't. All children will have times when they behave in ways that seem out of control. Whether they're constantly in motion, have trouble sticking to one task, making nonstop noise, or bumping into every item in a room, children have a lot of energy and find all sorts of ways to expend it. That's to be expected, and it is not necessarily ADHD.

But when that behavior occurs more often or is more severe (or both), especially in situations where it is more of a problem (such as school), it may be ADHD. The only way to know for sure is to take your child to see your pediatrician. It's important that you do so, too, because ADHD is not something children simply outgrow. It can be controlled, however, with effective treatment.

There are three basic types of ADHD:

- **Inattentive type.** Children with this type of the condition often have trouble:
  - Paying attention and concentrating on a task
  - Listening and following instructions
  - Organizing
  - Ignoring distractions
  - Doing things that require sustained mental effort
- **Hyperactive-impulsive type.** These children often experience difficulty with:
  - Sitting still and calming down when appropriate
  - The normal flow of conversation — they often interrupt, blurt out suddenly, or talk at great length frequently
  - Being patient and waiting, as when they're in a line
- **Combined type.** These children show symptoms of both types at different times. This is the most common type of ADHD.

No one knows what exactly causes ADHD. We know it is a disorder of the brain, rather than just a behavior problem, and that it is not caused by excess sugar in the diet, or poor parenting. Research has repeatedly ruled out these possibilities. Studies into ADHD's cause are ongoing, and experts suspect that the condition has a biological source. The bulk of research shows there is a genetic link, as ADHD tends to run in families, and other issues (low-birth weight, prenatal smoking, and other prenatal problems) can contribute to the cause or severity of ADHD.

Recent studies have shown a link with smoking during pregnancy, low-birth weight, and premature delivery. There is even some research showing a link between early TV viewing and attention problems later in life. While this link is unconfirmed, it is wise to follow the AAP's guidelines for screen time (including TV, DVDs, video games, and computer activity). Children under 2 years old should avoid any screen time, and children older than two should be limited to no more than 2 hours per day.

## Diagnosing ADHD

There's no single test to determine the presence of the condition, but your child's pediatrician is well equipped to diagnose ADHD. The doctor will give your child a complete examination before making any diagnosis, beginning with a family medical history. ADHD is known to run in families because research has shown a strong genetic link but there currently is no genetic test for the condition.

In addition to examining your child for symptoms of ADHD, the doctor will be looking for signs of other conditions that can sometimes accompany ADHD symptoms, such as depression, anxiety, other mood and behavioral disorders, and learning disabilities. "It's really important that a parent engages the pediatrician right from the start," says Heidi Feldman, M.D., FAAP, Ballinger-Swindells Professor of Developmental and Behavioral Pediatrics at Stanford University School of Medicine.

Getting the news that your child has been diagnosed with ADHD can bring a swirl of emotions with it. What do you do when you learn the news? "First, take a deep breath, and take comfort that you now have answers to some of the questions that you surely have," says Beth Kaplanek, R.N. Kaplanek is currently working with AAP on revising guidelines for the diagnosis and management of ADHD, and is past president of Children and Adults with Attention-Deficit/Hyperactivity

Disorder (CHADD), a national nonprofit organization. "We now have a sense of understanding about this that we didn't have before. Next, get on board with each other as a couple and begin educating yourselves about ADHD and all its aspects."

James M. Perrin, M.D., FAAP, head of general pediatrics at Massachusetts General Hospital for Children, routinely counsels parents who have learned of their child's diagnosis. "I explain to them that ADHD is along a spectrum. All children need support to improve their behavior and get the tasks done that are appropriate for their age," says Dr. Perrin, who is also professor of pediatrics at Harvard Medical School. "All children need good structure and good parenting so they can learn to make good choices."

## The Treatment Plan

Once the pediatrician has diagnosed ADHD, a treatment plan will be the next step. This is a critical piece of the puzzle, but it's just one piece — and it involves more than you, your child, and your pediatrician.

The treatment plan will usually consist of behavioral therapy and medication, both of which have proved to help children manage the condition effectively. Every treatment plan is different, however, just as every child with ADHD has different needs. And with medication and therapy, strong teamwork among school staff, parents, and health care professionals, including the pediatrician, is absolutely vital to a good outcome for your child.

Kaplanek, who is also the mother of a child with ADHD, identifies six key points to understand in treating the condition effectively.

1. **Accept that ADHD is a long-term condition.** "Come to terms with the fact that ADHD is a chronic disorder, not an acute one," she says, "and that treatment will take more than one mode."
2. **Learn all you can about ADHD.** "Educate yourself about the disorder," she says. That means learning what the condition is like for your child, how others have dealt with it successfully, and what health care experts recommend. "You want to learn what sorts of interventions will work best for your child."
3. **Get to know the people on your child's team.** That includes the health care professionals, including your pediatrician, who will treat your child, as well as the school personnel who will be involved with helping your child.
4. **Turn to your school system for support.** Your child will spend a significant part of the day in a classroom or other school facility; the more the school staff, including teachers and administrators, understands about your child's condition and specific needs, the better they can help him succeed in the classroom. "It's an ongoing process of navigating the education system to get the support you need," Kaplanek explains. "The school must know of any child who has ADHD and needs to know who's on the child's team."
5. **Understand the importance of medication as part of the treatment plan.**
6. **Find out what education programs your state offers for children with ADHD.**

## ADHD Medications

The prescription medications used to treat ADHD fall into three categories:

- **Stimulants:** The oldest and most widely used medicines for treating ADHD are stimulants. This may seem surprising at first, but stimulants actually help children with ADHD focus their concentration and block out distractions. Stimulants can be short-acting (around 4 hours per dose) or longer-acting (up to 12 hours per dose), and they may cause

# Working with David

“Even when he was a toddler, he climbed on everything in sight, moved constantly, was prone to emotional outbursts, and had great difficulty following even simple instructions,” Anna says, recalling her son, David, as an infant.

Anna is a teacher with four children of her own. It’s her oldest son, David, who lives with ADHD. David was officially diagnosed when he was 6 years old. “It was helpful to have a label so I could begin to put this in context,” Anna says, “even though it was also painful to come to terms with reality.”

David is on medication and has received counseling “to help him with some of the emotional aspects of living with ADHD,” Anna explains.

Anna had to learn how to adjust to being the parent of a child with ADHD. “For example, I may want my children’s rooms to be spotless, but that is not a moral code — simply Mom’s preference. And I had to learn how to give short directions with clear, measurable expectations. So instead of saying, ‘Go clean your room,’ I learned to say, ‘Go get all of your dirty clothes up off the floor and bring them to me here in the laundry room right now.’”

Another piece of Anna’s education has been learning to see the positives in David more clearly. “I am learning to praise him for the very things that often drive me crazy,” she says. “His energy makes him a great climber and athlete. I try to point out the gifts that God has given him and build him up more in that way.”

Part of keeping that focus is “picking her battles” more carefully, too. “Not every fault has to be pointed out to him, nor does every poor decision have to be analyzed,” she explains. “I am learning to let the natural consequences of his decisions take place. So if he doesn’t get up in the morning in time for school after I’ve asked him once, then he misses breakfast and gets dressed in the car.”

And there have been bigger lessons along the way for Anna, too. “Most importantly, I learned that pride goeth before the destruction of good parenting,” she says. “Before I had David, I was sure that all behavior in children could be controlled by good parents. I knew all the answers, and if you didn’t, I would be sure to shake my head sadly from my lofty position. Then God gave me a child I couldn’t even understand, much less begin to control!”

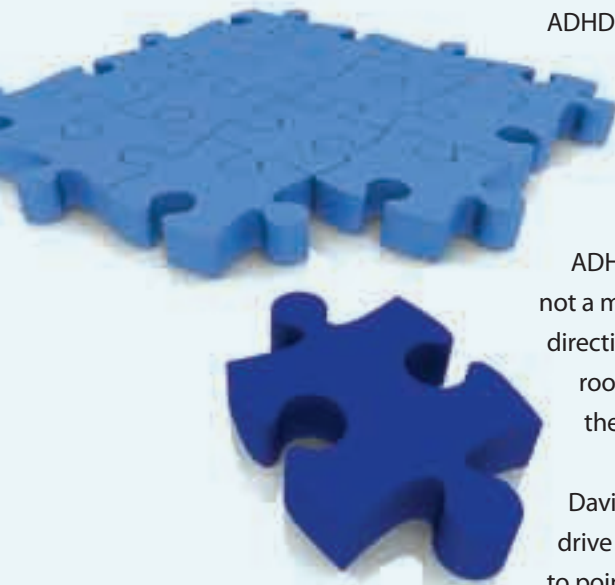
Anna’s advice to parents of children with ADHD? “First, love them, and encourage them honestly. They often lack confidence and feel down on themselves, so they really need to be built up, but they also need honesty. Also, examine your own expectations — are they helping your child grow, and are they age-appropriate? Be patient with them. Get them involved in activities they enjoy and can succeed in. Give very clear, consistent directions, and balance critiques with positive feedback. Keep the big picture in view — you won’t remember that he forgot his homework eight days in a row when you’re 80, but you will remember his heart and his love. Build a support group; others are facing the same issues you are, and there is strength in numbers. Finally, I find it helpful to pray, pray, pray!”

side effects, including decreased appetite, stomach discomfort, irritated moods, and insomnia. But these side effects can often be managed.

- **Nonstimulants:** This newer class of drug lasts longer per dose (up to 24 hours) and may have fewer side effects than stimulants for most patients. Still, there may be side effects, especially drowsiness, and they do not work well for all patients.
- **Antidepressants:** Because ADHD is sometimes accompanied by depression, antidepressants are an option pediatricians sometimes

prescribe. However, in 2004 the FDA issued a warning that these drugs can, in rare instances, lead to an increased risk of suicide in children and teens. It’s very important to discuss this option carefully with your pediatrician if an antidepressant is being considered as part of your child’s treatment plan.

One thing is sure, however: Medicine alone cannot completely treat ADHD. “One of the biggest myths I encounter is that you can treat a complex social, developmental, educational, and environmental



# Bert and Lucy: Sharing the ADHD Journey

Lucy was diagnosed with ADHD when she was in the fifth grade. “I didn’t really understand what was going on,” she recalls. “There were times before I got diagnosed that I was getting frustrated with how I was doing in school, and I had issues with sleeping.”

Lucy began taking prescription medication, and has been on several to find the right one for her symptoms. “The one I’m on now is the best so far,” she says, as she prepares to enter the 9th grade. “But I’m not hungry around lunchtime, when everyone else is, so I eat little snacks during class. The drugs help me with sleeping, but not so much with eating.”

“She does most of her eating from the time she gets home from school until she goes to bed,” says Anne, Lucy’s Mom.

“Her teachers have been very understanding and helpful with Lucy’s situation.”

Shortly after Lucy was diagnosed, Anne began to wonder if her husband Bert might also have ADHD symptoms. “I wound up going to a family doctor who has developed a strong reputation for being good with adult ADHD,” Bert says. “I had a hard time with the stomach side effects of the med I was on, but Anne noticed some differences in my behavior. The medication issue is a little trickier with adult ADHD, from what I’ve learned.”

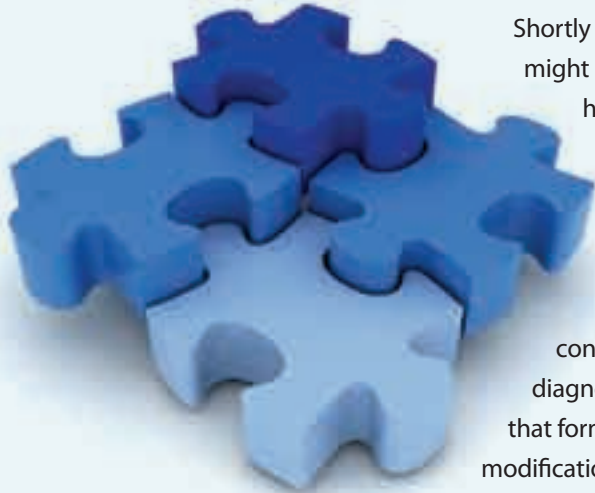
Having a daughter with ADHD has given Bert some insights into the condition he shares with her. “It really does make a difference to get it diagnosed when you’re young,” he says. “It’s a lot harder to break bad habits that form over many years when you’re older, and that makes the behavior modification part of it really tough. It can also be harder to get used to the side effects of medications when you’re older.”

Of course, along with medication and adjustments to it, there are the behavior habits that often accompany ADHD. “I think there’s an element of realizing that your parent has the same issue — that it’s not just a character flaw, or some kind of personal failure, but just part of your brain’s development,” Anne says. “But along with that, it can be harder to have another family member who has the same condition. When there’s something we don’t like about ourselves and we’re frustrated about that, we can get even more frustrated when someone else in the family has the same trait.”

It takes patience all the way around, but also clearly communicated expectations. For Lucy, it means realizing that some days are going to go better than others. “Managing my day-to-day stuff changes by the day,” she says. “When I’m on the meds, though, I manage to finish doing something by the time it’s due. When I write papers, I plan it all out in my head, and then write it all down the day before it’s due. That’s the way I’ve learned to do it, and it works for me.” Lucy has found that other activities that she enjoys actually help her focus more in school and at other times, too. “Playing guitar helps me memorize lines when I’m preparing for theatre,” she says. “And memorizing lines helps me remember guitar chords, and schoolwork also helps with both of those activities. And I like to ‘talk’ to myself, like dad does. I can apply what I’m learning as I learn it by talking to myself about it.”

Those adaptations have been tougher for Bert, who’s in his late 40s. “I got diagnosed at 48, so there were many years of negative self-talk and frustration within myself before we got it all figured out,” he says. “I had so much trouble focusing on what I needed to get done for so long, and have often felt ill-equipped to handle some very important things in my life. It makes it that much more important to get it diagnosed early and start treating it as soon as possible.”

One point Anne and Bert emphasize: ADHD is a family diagnosis, regardless of how many family members are diagnosed. “We’re going through this together as a family,” Bert says. “And we’re part of an informal network of support, too. We’ve gotten tremendous support from teachers and school officials, as well as other families facing similar issues. All of that helps, because nobody should go through this alone.”



condition with just pills,” says Dr. Perrin. “No question, medications help, but they’re not enough.”

## Managing Behavior

Another effective part of treating ADHD successfully is therapy aimed at changing behavior, simply called behavioral therapy. When used with medication, behavioral therapy is much more effective in helping children with ADHD manage their condition. Your pediatrician and school staff should work closely with you to develop a plan for managing your child’s behavior, and it’s important that communication continue along the way. “It’s a triangle of communication,” Kaplanek explains. “Every point of the triangle is critical, and each point represents its own set of groups. As a parent, you’re serving as your child’s case manager, in an important sense.”

“Effective treatment is also a matter of getting parents and other resources involved in other parts of a child’s care, so that they can create an environment that encourages the child’s growth and development,” says Dr. Perrin.

With that “triangle” established, it’s time to examine your home. “You want to set up systems in your home to lessen the stress on your child,” Kaplanek says. “Structure, routine, and consistency are all important, along with empathy, listening, and doing what you can to avoid angry outbursts and explosions.”

“You want to model the behavior you want to see in your child,” says Dr. Feldman. “If the child is disorganized, loud, or scattered, it is important for the parent to remain organized, calm, quiet, and focused.”

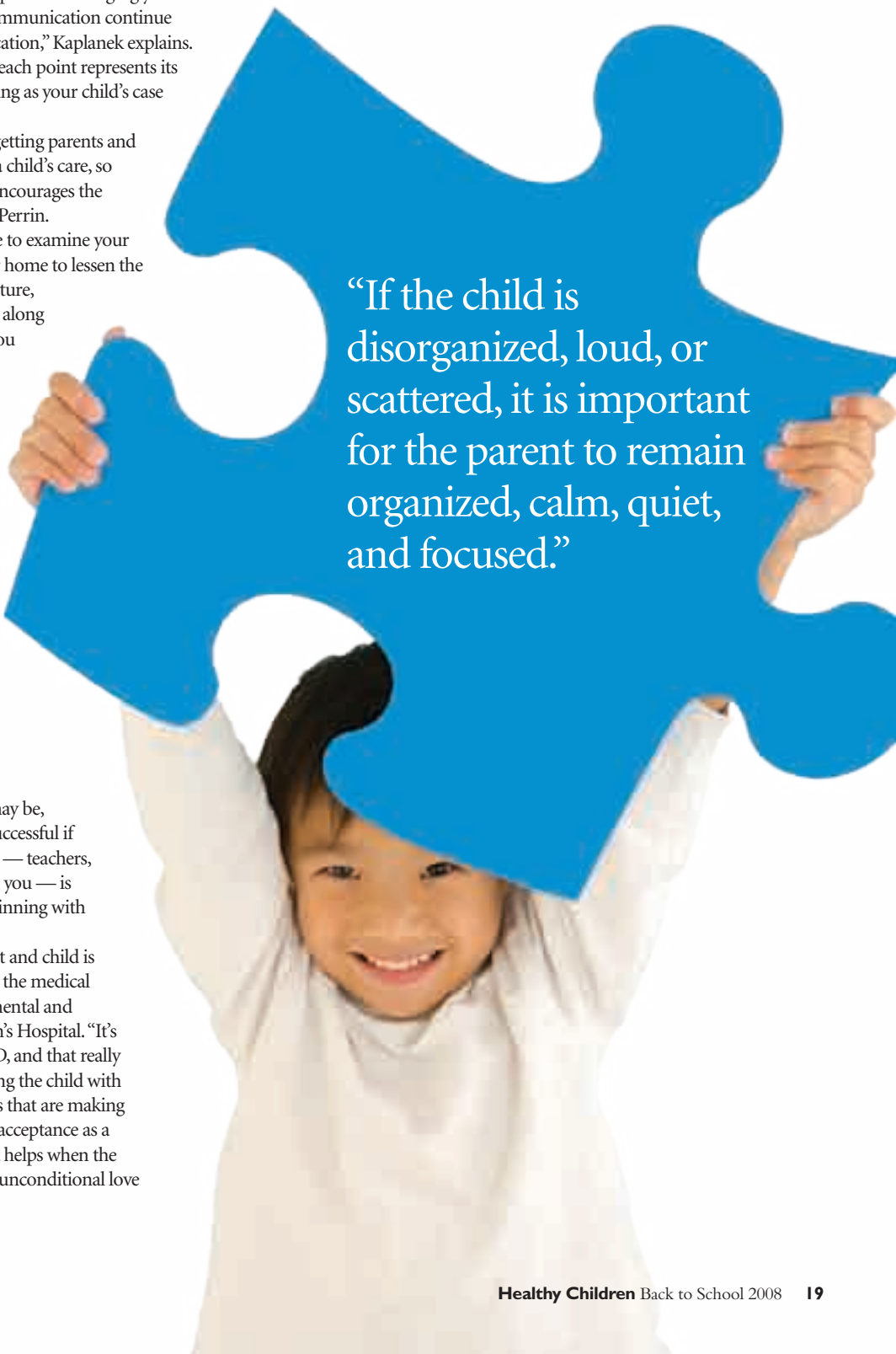
Dr. Perrin provides an example. “A 10-year-old is starting to get homework, but isn’t getting it done regularly. For the family, it’s important to find a quiet place for the child to study — one that has minimal distractions so the child can concentrate. The fewer the distractions, the better.”

## Keys to Success

Whatever your child’s treatment plan may be, experts suggest that it’s likely to be more successful if everyone who is responsible for your child — teachers, administrators, coaches, other leaders, and you — is working together from the same page, beginning with the parent and child.

“A good relationship between the parent and child is the first key,” says Dr. Feldman, who is also the medical director of the Mary L. Johnson Developmental and Behavioral Unit at Lucile Packard Children’s Hospital. “It’s really easy to get angry at a kid with ADHD, and that really doesn’t help at all. What does help is treating the child with love and respect — not to ignore the issues that are making life problematic, but to keep that love and acceptance as a foundation for reaching out to the child. It helps when the parent sees the child’s assets, and provides unconditional love and respect.”

Kaplanek agrees. “There is no quick fix with ADHD,” she says. “It takes time, patience, education, cooperation, and focus. Don’t rush yourself into processing all that you learn immediately; it takes time and every point of the triangle working in unison.” •



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