

Disobedience vs. disorder: Recognizing, diagnosing ADHD

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Have you noticed that your child is unable to sit still for more than a few minutes at a time?

Does he or she consistently not listen to you or a teacher?

Has anyone ever told you that your child needs to learn better self-control?

Some children have learned to be disobedient and act 'out of control,' but for many others, situations like the ones listed here represent a real disorder.

Attention deficit hyperactivity disorder (ADHD) has become one of the most controversial childhood issues in America. By definition, it is a behavioral condition in which children have difficulty paying attention and focusing on tasks. Most people respond to this by saying, "What child doesn't?" Although it is true that all children at some point in time will have difficulty focusing or paying attention, some seem to be troubled by this constantly.

There are three types of ADHD: inattentive, hyperactive and mixed. Boys are more often diagnosed and treated than girls, and most commonly display the mixed type of ADHD. The symptoms of ADHD correlate with the three types.

Inattentive - unable to concentrate
These children will tend to display forgetfulness, disorganization, poor attention and are easily distracted.

Hyperactive - impulsive
Symptoms are: excessive fidgeting or talking, difficulty remaining seated, difficulty playing quietly, restlessness, difficulty waiting turns, disruptive classroom behavior, interrupting or intruding on other's activities, and unintentional injuries.

Children with mixed inattentive and hyperactive ADHD will have symptoms from both lists above.

Although many show signs before the age of six, most children are diagnosed between the ages of six and 12. Children younger than six have shorter attention spans and often are very active, this can make the

diagnosis more difficult for that age group. As children enter school, their symptoms can become more identifiable. It is important to note that these symptoms have to persist on a daily basis and need to be present in several settings (school, home, church, etc.) in order to be diagnosed.

Here is the controversial question: Disobedient children or childhood disorder? The answer is that new evidence is further supporting the theory that this is a real psychiatric disorder. Studies have shown differences in chemical activity and brain structure in children with ADHD versus those without. An exact cause hasn't been identified yet, but studies show that the development of ADHD seems to be influenced by a few key factors: family history (genetics), social and family environment, diet, certain drug and alcohol use during pregnancy, and coexisting psychiatric illnesses.

I think most of you have heard various opinions from your friends and families as to why children have ADHD. I've heard several theories myself, including the following:

"These kids are eating too much candy and watching too much television."

"There must not be enough discipline in their homes."

"They all come from dysfunctional families."

I do feel that most examples given by people are certainly worthy of causing childhood problems, but unfortunately they aren't by themselves explaining the real reason why kids develop ADHD.

The challenge of this condition doesn't stop there. The diagnosis of ADHD is currently based solely on the observation of these children; there is no physical test that is done. It can sometimes be difficult to distinguish these symptoms from normally-developing children. Additionally, those who have learned to be disobedient are often times mistaken for having ADHD. This has created negative stereotypes against children who indeed live with this disorder. Even more challenging is when a child has ADHD and also has learned to be disobedient. This significantly interferes with the management of these



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children. Lastly, many children with ADHD will have other psychiatric disorders such as depression, anxiety, oppositional defiant disorder, or bipolar disorder.

As you can see, diagnosing and treating this condition takes time; participation from the parents, teachers, counselors, medical providers and other specialists is crucial.

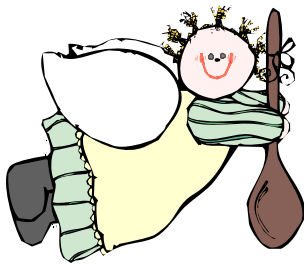
It is estimated that five to 10 percent of school-aged children suffer from ADHD. Due to its effects, children with this condition may never reach their full potential in school or life. This makes early detection and treatment essential.

As a parent of three young children, I know the important role that we face in making sure that our children are nurtured, disciplined and brought up with their fullest potential to succeed!

I encourage you to seek help if you or a teacher have concerns that your child may have ADHD. Talk to your primary medical provider about your concerns. If you do not have a relationship with a medical provider, feel free to call the Elroy Family Medical Center at 462-8466.

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