

# ADHD



Do you have questions about attention-deficit/hyperactivity disorder (ADHD)? This booklet gives you the answers you need to understand this disorder—and learn to manage it.

## What is ADHD?

ADHD is a biological disorder caused by problems in the brain. People with ADHD have trouble paying attention, sitting still, or controlling their behavior.

Everyone has some symptoms of ADHD—especially children. The difference with ADHD is that it's a chronic (long lasting) condition that interferes with daily life. For example, people with ADHD often have trouble at school or work. Their personal relationships can suffer. And as a result, they may feel anxious, unsure of themselves, and depressed.

Right now, there's no cure for ADHD. But that doesn't mean you should ignore it. Most people with ADHD need treatment to reach their full potential—and enjoy better relationships and self-esteem.

“

## What a difference a year has made!

Danny earns much better grades now, and has a good attitude. He's making friends, and getting along with all of us at home, too. Our whole family just works better.

You know, I wasn't happy about Danny's ADHD diagnosis. But I'm grateful now. He needed treatment—and he's getting it.

—Miriam,  
mother of a child with ADHD

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## What are the types and symptoms of ADHD?

ADHD symptoms are patterns of behavior. ADHD is divided into 3 types, based on these patterns:

	Inattention	Hyperactivity	Impulsivity
<p><b>1 Inattentive type</b></p> <p>People with this type of ADHD consistently have trouble paying attention.</p>	<ul style="list-style-type: none"> <li>Is often distracted, and makes careless mistakes</li> <li>Has trouble focusing and organizing</li> <li>Doesn't follow through with tasks</li> <li>Often forgets and loses things</li> </ul>		
<p><b>2 Hyperactive-impulsive type</b></p> <p>People with this type of ADHD are too active (hyperactive) and tend to act without much thought or control (impulsive).</p>		<ul style="list-style-type: none"> <li>Fidgets or squirms, seems or feels restless much of the time</li> <li>Runs about or climbs too much, seems "driven by a motor"</li> <li>Has trouble being quiet</li> </ul>	<ul style="list-style-type: none"> <li>Interrupts others</li> <li>Has trouble taking turns or waiting in line</li> <li>Blurts out answers before hearing the whole question</li> </ul>
<p><b>3 Combined type</b></p> <p>People with this type of ADHD show both inattentive and hyperactive-impulsive symptoms.</p>	<ul style="list-style-type: none"> <li>Is often distracted, and makes careless mistakes</li> <li>Has trouble focusing and organizing</li> <li>Doesn't follow through with tasks</li> <li>Often forgets and loses things</li> </ul>	<ul style="list-style-type: none"> <li>Fidgets or squirms, seems or feels restless much of the time</li> <li>Runs about or climbs too much, seems "driven by a motor"</li> <li>Has trouble being quiet</li> </ul>	<ul style="list-style-type: none"> <li>Interrupts others</li> <li>Has trouble taking turns or waiting in line</li> <li>Blurts out answers before hearing the whole question</li> </ul>

## What causes ADHD?

Although there are many theories, scientists don't yet know what causes ADHD. They know that it runs in families. For example, if you have a close relative with ADHD, your chance of having it yourself is 5 times that of someone without this link.

## How is ADHD diagnosed?

There's no blood test or body scan to find out if you have ADHD. Doctors diagnose ADHD the same way they diagnose a lot of other conditions: by gathering different kinds of information and comparing it to an accepted medical definition. The tools they use are described below.

- **Questionnaires.** There are several standard questionnaires (forms) used to check for ADHD and other mental health problems. The questionnaires ask about symptoms in different settings. They also ask about stress levels and coping styles.
- **Medical history.** The doctor asks about past and present illnesses, personality and development, and family history.
- **Physical exam.** A thorough exam helps a doctor know if symptoms come from something other than ADHD. (Other conditions can also make ADHD worse.)
- **Diagnostic criteria.** Using information from the sources described above, a doctor diagnoses ADHD only if the following are true:
  - The behaviors are not age-appropriate
  - The symptoms first appeared before age 7
  - The symptoms interfere with performance in 2 or more settings—for example, at school, home, work, or in personal relationships
  - The symptoms have lasted 6 months or longer



### CO-EXISTING CONDITIONS

People with ADHD sometimes have one of these disorders as well:

- Learning disability
- Bipolar disorder
- Oppositional defiant disorder or conduct disorder
- Anxiety and depression



I had good teachers. I think if we'd known about my ADHD and dyslexia, we could have done things differently. Maybe I could have avoided so many bad grades and bad feelings.

But like my doctor says: it's never too late. Treatment is already helping with my job. And who knows? Maybe I'll go back to school.

—Marcus, newly diagnosed adult with ADHD and dyslexia (a learning disability)



## How is ADHD treated?

Studies show that ADHD is best treated with a combination of strategies. (This is called **multimodal treatment**.) Each strategy aims at the same overall goal: to reduce symptoms and help the person with ADHD succeed in various settings and personal relationships. Common strategies are described below.



### Behavioral therapy

This helps the person with ADHD focus on their current behavior—and learn new, more effective habits, skills, and responses. It involves setting specific behavior goals, then tracking progress toward these goals. Consequences and rewards help motivate the behavior changes.

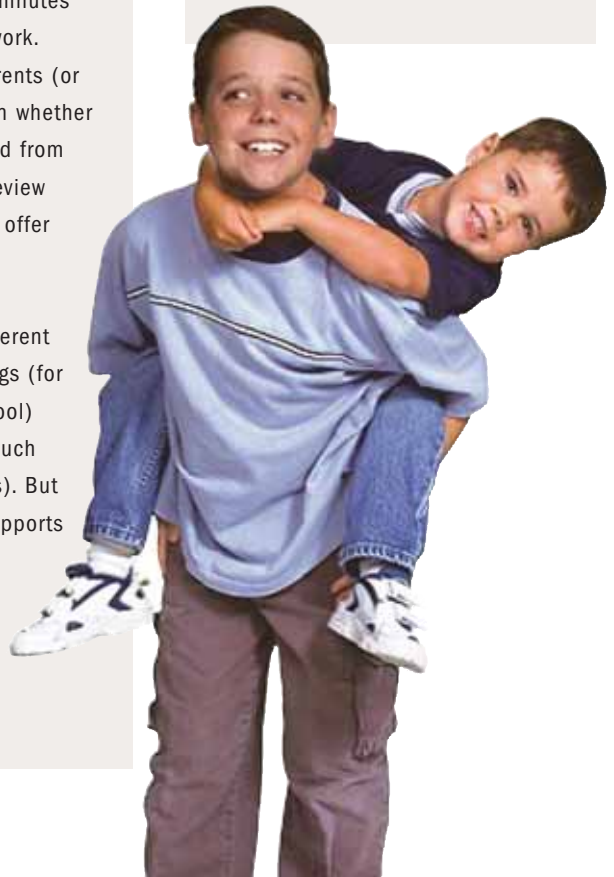
For example, a child might have a goal of sitting for 15 minutes at a time to do school work. Each day, the child's parents (or teachers) can write down whether he reached this goal. And from time to time, they can review the child's progress and offer feedback.

It's common to have different goals for different settings (for example, home and school) and in different areas (such as relationships or tasks). But each part of the plan supports the others. Each part gives more structure to daily life, and sets clear expectations for behavior.



### Counseling

People with ADHD may need counseling to improve their self-esteem and help them express their feelings better. And because ADHD affects the whole family, parents, siblings, and spouses may also benefit from counseling. Counseling can help undo some of the frustration and anger that often come with living with a person with untreated ADHD.



### WHO'S INVOLVED?

Diagnosis and treatment for ADHD should be a team effort. Here's who might participate:

- **Doctor** (primary care doctor, psychiatrist, neurologist, or other)
- **Mental health specialist** (counselor, therapist, school psychologist, or other)
- **Care manager** (person who can connect you to resources and help coordinate and reinforce treatment)
- **Family members** (parents or spouses)
- **Teachers, school staff, coaches,** and other key people in the life of a child with ADHD

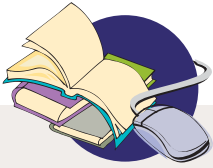
As you put together a team for yourself or your child, keep in mind that YOU are the most important person on the team. You're in the best position to help make sure that each part of treatment is working well together. Stay in touch with your care team. Let them know what's working, and what isn't.

## WHAT ABOUT ALTERNATIVE TREATMENTS?

From time to time, a new article or book promotes an alternative ADHD treatment. Here are a few recent examples:

- Biofeedback
- Dietary restrictions
- Vitamin and mineral supplements
- Allergy treatments
- Yeast infection treatments
- Herbal treatments

Research has not proven the benefit of any of these. So before trying these or other alternative treatments, learn as much as you can about the science behind them. Talk to your doctor. Then make an informed choice.



### Education, training, & support groups

The more you know about ADHD, the better you can cope with it. This goes for family members and teachers—as well as for the person with ADHD. Here are a few resources to help:

- **ADHD classes.** Learn more about ADHD from classes sponsored by a local health care company, school, or community group.
- **Books and websites.** Find in-depth information about every aspect of living with ADHD.
- **Support groups.** Connect with people who share your challenges and concerns.
- **Parent skills training.** Pick up tools and techniques for managing a child with ADHD.

See page 7 for a list of resources.



### Medication

Not everyone with ADHD takes medication. But it's a common treatment, and studies show that it works well for most people—especially when it's combined with behavioral therapy.

There are several options for treating ADHD with medication. Stimulants such as Ritalin (methylphenidate) have been used for decades. More recently, a non-stimulant medication called Strattera is being used for some patients. If one medication or dosage doesn't work, your doctor can make an adjustment.

ADHD medications control symptoms by helping the brain's chemical message carriers (neurotransmitters) work better.

- They **CAN** help focus attention, and decrease activity and impulsivity.
- They **CAN'T** cure ADHD or teach new behaviors or skills.

Just as glasses help people focus their eyes, medications allow people with ADHD to focus their thoughts and actions better.



Success stories? I have a bunch of kids I started seeing when they were really young. Now they're graduating from high school, going to college, getting jobs and having satisfying relationships. I think every one of them is a success.

But because ADHD is chronic, you're never really done. You have to have your eyes open. Celebrate your successes, but don't stop doing what you need to do to take care of yourself.

—Delia,  
family practice doctor





## help your child with ADHD

Use this page to help you guide your child's treatment—at home, at school, and with your child's doctor.

### *Home plan*

- **Educate yourself and your child about ADHD.**  
Look to the resources listed on the facing page.
- **Contact a parent support group.**  
The CHADD organization runs support groups. If you can't locate a local number through the website (see facing page), call the main Utah number: (801) 537-7878.
- **Sign up for a parenting class.**  
The CHADD organization co-sponsors parenting classes—and can point you to others.
- **Consider counseling.**  
You, your child, and other family members may want counseling (psychotherapy) to help heal the difficult feelings that ADHD can bring up. Ask your doctor for advice or a referral.
- **Set and monitor behavior goals.**  
With your child, set achievable goals in different areas. For example, you can set goals for behavior, relationships, emotions, and responsibilities. See the resources on the facing page for examples and ideas for home goals.
- **Try to be accepting and positive.**  
ADHD is a challenge—but it shouldn't be a tragedy. Try to accept the disability and help your child do the same. Be consistent and firm to help your child. But carry out your home plan in a positive way.

### *School plan*

- **Meet with teachers and other school staff.**  
Make sure your child's teachers understand ADHD. Work with them to develop a school plan with behavior goals (much like your home plan). Make sure they participate in follow-up evaluations. Involve the school counselor and principal as needed.
- **Get involved.**  
Attend school events and meetings. Volunteer in your child's classroom. You'll gain insight into your child, and build valuable relationships with school staff.
- **Understand your rights.**  
Your child may need special services at school. Two federal laws outline your child's right to a free and appropriate public education (FAPE) regardless of disability:
  - Individuals with Disabilities Education Act (IDEA), part B
  - Section 504 of the Rehabilitation Act of 1973

Not all children with ADHD will qualify for special services. Look to the resources on the facing page to learn more.

### *Medical plan*

- **Keep appointments.**  
Until symptoms are stable, your child's doctor may request follow-up appointments every 3-4 weeks. After that, follow-up visits are usually every 3-6 months.
- **Make sure your child takes medication as prescribed.**  
Don't let your child skip doses. And make sure your child's doctor tells you what to do if a dose is missed.
- **Watch for side effects.**  
Ask your child's doctor about side effects. Use a chart to help track any side effects. Call the doctor if anything worries you.
- **Ask questions and give feedback.**  
Make sure you understand every part of your child's treatment. Discuss any concerns with the doctor. Return follow-up questionnaires with information about home and school performance. Ask for a second opinion or a referral to a specialist if necessary.

## Where to learn more

The resources listed here offer information, support, and advice for managing ADHD.

### Books for adults with ADHD

- ***Adventures in Fast Forward: Life, Love, and Work for the ADD Adult.*** Taylor and Francis 1996.
- ***View from the Cliff: A Course in Achieving Daily Focus.*** Lynn Weiss. Taylor Trade 2001.

### Books for parents

- ***1-2-3 Magic: Effective Discipline for Children 2-12.*** Thomas Phelan. ParentMagic 2003.
- ***All About Attention Deficit/Hyperactivity Disorder.*** Thomas Phelan. ParentMagic 2000.
- ***Hyperactivity: Why Won't My Child Pay Attention?*** Sam Goldstein and Michael Goldstein. Wiley 1993.
- ***Surviving Your Adolescents.*** Thomas Phelan. ParentMagic 1998.
- ***Teenagers with ADD: A Parent's Guide.*** Chris Zeigler Dendy. Woodbine House 1993.
- ***Understanding Girls with AD/HD.*** Kathleen Nadeau, Ellen Littman, and Patricia Quinn. Advantage 2000.

### Books for children and adolescents

- ***Adolescents and ADD.*** Patricia Quinn. Magination 1995. (ages 13 and up)
- ***Help 4 ADD @ High School.*** Kathleen Nadeau. Advantage 1998. (ages 13 and up)
- ***Learning to Slow Down and Pay Attention.*** Kathleen Nadeau and Ellen Dixon. Magination 1997. (ages 6-14)
- ***Otto Learns About His Medicine.*** Matthew Galvin. Magination 2001. (ages 5-10)
- ***Putting on the Brakes.*** Patricia Quinn and Judith Stern. Magination 2001. (ages 8-13)

### Websites and organizations

[www.ihc.com/adhd](http://www.ihc.com/adhd)

**Intermountain Health Care (IHC)** gives access to educational materials through the ADHD Online Center. The site also includes tools to help with evaluation and treatment.

[www.chadd.org](http://www.chadd.org)  
[www.chaddofutah.com](http://www.chaddofutah.com)

**Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)** is the nation's leading non-profit organization serving people with AD/HD. Visit these websites to learn about their education, research, and support programs—including information about meetings and classes in your area.

[www.nichcy.org](http://www.nichcy.org)

**NICHCY is the National Dissemination Center for Children with Disabilities.** It provides a wealth of information on various disabilities in infants, toddlers, children, and youth. It also includes information on educational rights and practices for children with special needs.

[www.help4adhd.org](http://www.help4adhd.org)

**The National Resource Center on AD/HD** is a program by CHADD established with funding from the U.S. Centers for Disease Control and Prevention (CDC).

[www.aap.org](http://www.aap.org)

The **American Academy of Pediatrics** is dedicated to the physical, mental, and social health of children. For information on ADHD, see this topic under the "Children's Health Topics" link.



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*Myth:*

**“ADHD isn’t a REAL disorder.”**

*Truth:*

Over 100 years of research have found that ADHD is a real medical disorder caused by problems in the brain.

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*Myth:*

**“ADHD happens to people of low intelligence.”**

*Truth:*

ADHD is about poor performance, NOT poor intelligence. Treatment can help people with ADHD reach their full potential—whatever their IQ.

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*Myth:*

**“ADHD is caused by bad parenting.”**

*Truth:*

ADHD is a biological disorder. Environment can affect ADHD behaviors, but it doesn’t cause them.

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*Myth:*

**“ADHD is over-diagnosed.”**

*Truth:*

Studies show that ADHD is probably under-diagnosed. It’s one of the most common behavioral disorders in children. It affects 3-5% of school-aged children—and many adults as well.

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*Myth:*

**“Children with ADHD are over-medicated.”**

*Truth:*

Prescriptions for ADHD medications have increased. But most experts think this is due to better diagnosis and treatment of this common disorder.

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*Myth:*

**“Even if it really is ADHD, you’re better off ignoring it.”**

*Truth:*

Hardly. Studies show that without treatment for your ADHD, you’re more prone to alcohol and drug abuse, school and work problems, and difficulty with personal relationships. You’re at greater risk for criminal behavior, too.

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