

Attention deficit hyperactivity disorder

What is attention deficit hyperactivity disorder (ADHD)?

ADHD is a behaviour disorder of children with the key features of problematic behaviour and difficulty with learning. It affects about 1 in 20 to 30 children and is far more common in boys, being about 6 times more prevalent compared with girls.

It is usually present from early childhood, even in infancy, and has an onset no later than 7 years of age.

What is the cause of ADHD?

The cause is not clearly known but many experts believe that it has a hereditary basis. Having ADHD does not imply that the child has an illness or is not intelligent.

What are the main diagnostic features of ADHD?

The 3 characteristic features are:

- inattention—has difficulty concentrating, following directions and forgets instructions
- overactivity—the hyperactive child cannot seem to stay still, and is fidgety and restless
- impulsiveness—a tendency to 'shoot from the hip' and do 'stupid things' without thinking or taking steps to correct this problem; a tendency to talk over the top of others and to be accident-prone

The symptoms must be present in at least two situations, for example, at both home and school.

Note: Not all children with ADHD are overactive and not all children who are inattentive, overactive and impulsive have ADHD.

It is very important to accurately diagnose ADHD before putting such a label on the child—there are no foolproof diagnostic tests, including blood tests, to make the diagnosis. There has to be a consistent pattern to the behaviour and not occasional breakdown in attention span or impulsive acts which can happen to any normal child. Your doctor can make an assessment of the child and arrange a referral.

What are other features?

Day-to-day problems can include some or all of the following:

- irritability, including a 'short fuse'
- moodiness
- poor co-ordination
- disorganisation
- inflexibility
- clumsiness
- poor school performance with learning disability in at least 25% of children with ADHD
- difficulty mixing with other children
- lack of a consistent work or study pattern

- causes a lot of distress in the home
- poor short-term memory

How does the child with ADHD affect the family?

Parents usually come in looking exhausted and frustrated with the comment, 'I didn't realise raising children was this hard'. The patience of all members of the family can be stretched to breaking point.

What can be done?

The child should be assessed by an expert in the area. There are many things that can be done to help children and their families, including medication, teacher/school support and parent support groups.

Help for the child

- Protect their self-esteem.
- Praise any positive behaviour.
- Be consistent in your approach and with routines.
- Don't make a thing out of minor behavioural issues.
- Have appropriate 'punishments' for major misbehaviours (time-out is suitable for those 2 to 10 years of age).
- Old-fashioned 'toe in the backside' and 'clip over the ears' methods do not work.
- Have clear and simple rules to follow.
- Be close to them and insist on having their full attention when giving instructions.
- Watch out for risk-taking behaviours and be protective.
- Establish clear-cut routines, rules and consequences.

The children need much understanding and support from the family, teachers and therapists as their difficult behaviour is not intentional.

Help for the family

- Work as a team within the family.
- Work as a team with teachers and community contacts.
- Try to join a support group.
- Get frequent breaks from the child.

Medication

The use of medicines for ADHD is controversial but there are some mood-alleviating drugs available. Your doctor will be able to advise on the best option. If the prescribed drug proves helpful, it may be necessary to use it for years.

Is a special diet recommended?

It is always valuable to encourage a good balanced diet and a dietician can help. However, the old method of treating ADHD with a special exclusion diet such as avoiding junk foods, colouring and preservatives has not been shown generally to be of significant benefit.

What is the outlook?

As a rule children do not grow out of ADHD. Although many symptoms can improve with time, more than one-half of children will carry some degree of the disorder into adult life.