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Driven to Distraction

POSTED AT: THURSDAY, MARCH 31, 2011 02:42:42 PM

AUTHOR: [WILLIAM VAN ORNUM](#)

I have been reading a wonderful book, *DRIVEN TO DISTRACTION: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood* by Edward M. Hallowell, M.D., and John Ratey, M.D. Attention Deficit Disorder is a concern for anyone teaching, studying to become an educator or professional in the human service, or working in religious education in a parish.

This book brings to a general trade audience wisdom gained from peer-reviewed studies and research. Unlike some books on this topic, there is no ax to grind or ideology to defend. The authors have expertise in both the medical, cognitive, and behavioral treatment of this problem. Much of the attention has looked at boys with ADD; their antics can test the patience of teacher, parent, or saint. Many think boys are overdiagnosed with this disorder. However, girls and adults may be underdiagnosed. The authors offer screening tests and DSM IV criteria for ADD. These can be used as a first step and are obviously not valid for diagnosis.

There are helpful chapters on how ADD enters a family or a marriage and whose presence reverberates around all relationships. This knowledge forms a basis for connecting the person with ADD back into meaningful relationships with those who can offer great support--if the problem is acknowledged, diagnosed, and talked about.

I discovered great wisdom in the chapter that teaches us how to discern the presence of ADD with anxiety, depression, substance abuse, borderline states, and family problems. Are these different manifestations of ADD + another condition or are there many different and unique disorders? Perhaps brain imaging studies and further research and understanding will lead to new categorizations in DSM V and VI.

There are 50 tips on how to manage ADD--each helpful and practical. I especially like this one: "Recharge your batteries. Related to number 30, most adults with ADD need, on a daily basis some time to waste without feeling guilty about it. One guilt-free way to conceptualize it is to call it time to recharge your batteries. Take a nap, watch TV, meditate. Something calm, restful, at ease."

(p. 250). Those without ADD may find many of the approaches helpful!

For parents and teachers, there is a section on 50 classroom management tips. This chapter would be especially helpful to therapists who consult in schools. Is there a genetic link to ADD? Is it present at birth? Is it strictly a neurological disease? How do small environments or even the environment of our culture itself magnify or even cause the problem? All of these topics are examined in a classic book that will find a place in homes, schools, clinical centers, and parishes.

William Van Ornum

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Comments

The book sounds really interesting Bill. I have a friend with ADD and it's a real cross for her - and for me when I try to have a conversation with her because she plays verbal hopscotch and I feel like I am having a surrealist conversation.

1. Thanks for bringing up the topic.

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Posted By [Juan Lino Lopez](#) | Thursday, March 31, 2011 03:10:14 PM

Juan,

2. Thanks for your response. ADD and many other conditions are truly a cross and hopefully we can raise awareness here about this. I've worked with many people with ADD and this book captures what it really is like. (ADD/ADHD can often be confused with other conditions and some doubt its existence, and this sometimes creates even more problems for someone who suffers from it or for parents or a family. Your phrase "verbal hopscotch" to me captures what can happen in ADD. By the way, I have been reading your posts on the other blogs and am glad that you are among the contributors in some of the difficult discussions going on. amdg, bill

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Posted By [bill van ornum](#) | Thursday, March 31, 2011 03:41:34 PM

3. This book sounds interesting and helpful to anyone diagnosed with ADD or anyone close to someone diagnosed with ADD, be it a family member, teacher, or friend. You brought up a good point when you stated that girls may be underdiagnosed. Though many people believe it's less common in girls, there is evidence that it is just less commonly diagnosed and treated. Patricia Quinn, director of the National Center for Gender Issues and ADHD explained that the reason many girls are overlooked is that they present hyperactivity differently than boys. "In a classroom setting, a boy might continually blurt out answers or repeatedly tap his foot, whereas a girl might demonstrate hyperactivity by talking incessantly," she says. A girl who talks all the time is often viewed by the teacher as chatty, not hyper or problematic — and thus is less likely to be recommended for an evaluation (<http://www.additudemag.com/adhd/article/1626.html>)."
From what you have written on the book, I am inspired to read it and possibly purchase it for my classroom someday. There are so many misconceptions and misunderstandings about ADHD, hopefully this book can help to combat those.

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Posted By [Kailee McEvoy](#) | Thursday, March 31, 2011 03:46:55 PM

4. I think this book would be very useful for future teachers to read. One idea that you brought up that I found interesting was how boys are overdiagnosed with ADHD, while girls are underdiagnosed. I did a project on ADHD when I was taking the Exceptional Child, and I found many articles on the misdiagnosis of ADHD. I was just reading another article about how there are many children who are misdiagnosed with ADHD. The title of the article even states that there is the potential for about one million children in the United States alone to be misdiagnosed with ADHD. That is very scary because children with ADHD take medication to control it, but what if a child is misdiagnosed? The article says it does not know the long term effects of the drugs being used to treat ADHD, so what would happen if a child was just taking this medication even if he or she didn't need it and it harmed them? Like the psychiatrist who met with his patient for 15 minutes to change the patient's prescription, I think more time needs to be taken when working with children who potentially have ADHD in order to make sure that they will not be misdiagnosed.

<http://www.sciencedaily.com/releases/2010/08/100817103342.htm>

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Posted By [Joey Komorowski](#) | Thursday, March 31, 2011 03:57:18 PM

Kailee,

5. it's especially sad when a young woman is not diagnosed until college or even afterwards. One of the interesting and frustrating things I have learned about ADHD is that it is both OVERDIAGNOSED and UNDERDIAGNOSED at the same time. And sadly there are persons who misrepresent themselves as having ADHD (read: fake) in order to get access to psychostimulant drugs. Thanks for the good points you'd made. bvo

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Posted By [bill van ornum](#) | Thursday, March 31, 2011 03:59:25 PM

6. Just to add what I just previously commented, I think that ADHD needs to be studied more. It is just too dangerous to be giving children medication to treat something that they might not even have. I also think it is important that future teachers better understand disorders such as ADHD in order to make better themselves, the children in their class who have a learning disability or another type of disability, and the other students in the class. Reading books such as the one being discussed in this article can help better a classroom environment.

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Posted By [Joey Komorowski](#) | Thursday, March 31, 2011 04:02:36 PM

7. Attention Deficit Disorder has always been a fascinating topic for me. One of my close friends has a brother with ADD, and the impact it has had on both his family and his life is eye-opening. I have watched him grow up with this disorder, and for many years now, I have thought to myself: "What if I had this child in my classroom?" He can never sit still at home and does not listen to any rules or consequences. I have always wondered what life as his teacher would be like. As my fieldwork experiences began in elementary schools, I came across more and more students with this disorder. Although at times, it was obvious that these particular students functioned differently, at others it was impossible to notice a difference between their behavior and that of other's. I have caught on to several tips that, according to teachers, make all the difference. For example, I have learned that the physical setup of the classroom is an important aspect when dealing with a child with ADD. The student should be seated away from doors, windows, and even other loud peers. He/she should be seated towards the front of the classroom where the teacher can easily prompt the child to say on task. Students with ADD should also be given breaks throughout the day. Any child that is forced to sit at a desk with no intermission would become antsy; and this is even truer when it comes to children with this disorder. Increased movement and physical activity will help the student stay on task throughout the day. This activity can be as simple as having the child run an errand for the teacher, or even putting away materials. It will help portray to the child appropriate ways and appropriate times to move around.
- In addition, I have observed the importance of a strict behavior plan when dealing with students with ADD. According to an article from HelpGuide.org, children with *Attention Deficit Disorder* need "structure and clear expectations in order to keep their symptoms in check," and behavior plans do just that. These plans will help students work on specific goals by providing them with positive reinforcement and direct feedback.
- However, like the article shows, effects of ADD do not stop at the classroom door. It is a disease that strongly impacts all aspects of life: from family to relationships to jobs. However, where does this disease come from? In the past, some have felt that ADD is a result of poor parenting. However, scientists have done studies and brain imaging which have helped show that ADD does have a genetic factor. For example, Anita Thapar, a professor of psychiatry at Cardiff University, scanned the gene maps of more than 1,400 children. She and her team found that those with ADD were more likely than others to have small chunks of their DNA duplicated or missing (Kelland, 2010).

Article link: http://helpguide.org/mental/adhd_add_teaching_strategies.htm

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Posted By [Alyssa Moirano](#) | Thursday, March 31, 2011 04:14:57 PM

8. I think that ADD and ADHD are disorders associated with many misconceptions and misunderstandings. As mentioned in the article it is often under diagnosed and over diagnosed. Some of the confusion about diagnosis may stem from the fact that there are still many unanswered questions about the disorder. The questions brought up in the article are many common questions and this book seems very helpful to anyone affected by or dealing with ADD. I think this book would provide interesting perspective because the authors have so much experience dealing with the disorder in many different forms, cognitively, medically, and behaviorally. It seems that this book gives advice and insight into helping an individual with ADD. Even though diagnosis may not be perfect the most important thing is that each child is given the assistance they need to reach their full potential academically, and socially. I think this is the most important goal to have as an educator for every student.
- While researching the topic a little further I found an interesting research study that was conducted. These authors had found that much of the research in the past 40 years suspected "that ADHD is largely an American disorder and is much less prevalent elsewhere. This impression was reinforced by the perception that ADHD may stem from social and cultural factors that are most common in American society." (<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1525089/>) There research found that this was untrue children in numerous different countries were affected by ADHD. The authors believe that the recognition of this idea could greatly increase the psychiatric care of children. I feel that ADHD may not be a product of the individual's social and cultural environment but that may account for some of the under diagnosis and over diagnosis which occurs today. By finding out it is not solely an American disorder may give a little more understanding to society.
- <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1525089/>

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Posted By [Kristen Kannengeiser](#) | Thursday, March 31, 2011 04:52:27 PM

9. This book sounds really interesting and informative, I have always found ADD very intriguing and yet complicated. What I wonder is does the book only focus on attention deficit disorder or does it talk about the hyperactive and impulsivity aspects of the disorder as well. I was under the impression that ADD is no longer the correct medical name rather ADHD which encompasses both types of the disorder. Either way I strongly agree with the statement made in this article about girl students being underdiagnosed. In my opinion girls do not get referred for ADHD as much as boys because while boys have the hyperactive and attention deficit aspects of the disorder I think many girls have the attention deficit as well but since they are not as hyper it goes under the radar. I have two friends in college who did not get diagnosed with ADHD until high school. They both said that they were never hyper in school but always struggled on focusing, organization, and finishing assignments on time.
- Their experiences further my belief that girls get under diagnosed for ADHD even more. If my two friends got all the way to high school without being diagnosed there is an obvious flaw in the system when it comes to referring girls who don't show the hyperactive or impulsive sides of ADHD for an evaluation. This may just be because it is hard to recognize in girls. According to an article I read, the usual signs include things like "inattentiveness, poor school performance, and depressive affect" these things "elicit less attention from teachers and parents than characteristic ADHD symptoms seen in boys, such as disruptive behavior and acting out." (Slovak, 2008, p.12) The symptoms that girls display are a lot less noticeable and don't cause as much trouble to the teacher and parents alike. For example "teacher based reports indicated that boys with ADHD display more classroom symptoms of inattention

than girls with ADHD." (Slovak, 2008, p.12) Overall I believe that parents and teachers should be more aware and attune to girls who may be struggling in school and who seem inattentive at times. Although it may not be ADHD, the earlier a student gets diagnosed the earlier they can get help to succeed.

Slovak, J.A. (2008). *Identification and classroom strategies for girls with attention deficit hyperactivity disorder: development of a handbook for teachers* (Dissertation), Retrieved from <http://books.google.com/books?id=32rUzaGOMHAC&printsec=frontcover#v=onepage&q&f=false>

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Posted By [Jaclyn Greiner](#) | Thursday, March 31, 2011 05:01:39 PM

This article made me think a lot about friends of mine who have ADD, and who are prescribed medications for it, and friends who believe they have ADD, and seem to abuse the medication they are prescribed. It is definitely true that boys are overdiagnosed with the disorder, and that girls seem to be underdiagnosed. But now a days it seems that anyone who wants to "pill to make them focus", can easily fool a doctor or psychiatrist into believing that they have ADD or ADHD just so that they can use the medication to focus easier. I definitely know people who have done this, and I am not saying it is a good idea at all. People who want to abuse drugs to make life or certain tasks easier for them is a sad thing to hear about.

10.

It is apparent in a few friends that I have, that their ADD sometimes gets the best of them, and is hard to control for them without medication. I can tell if a friend forgot to take their medication because during conversation, they would abruptly change topic or lose train or thought, or steer into a different subject. The quote I love from the article, "Recharge your batteries. Related to number 30, most adults with ADD need, on a daily basis some time to waste without feeling guilty about it. One guilt-free way to conceptualize it is to call it time to recharge your batteries. Take a nap, watch TV, meditate. Something calm, restful, at ease." (p. 250), is a good tip for anyone who suffers from ADD or ADHD. That tip even works for me sometimes. If ever I feel that I can't focus or concentrate, it isn't because I think I have ADD or ADHD, but it is because I am overwhelmed and need to relax and take a break in order to let my mind breathe instead of go crazy due to endless amounts of school or work I have sometimes. I believe that if a child is diagnosed early with ADHD or ADD, prescribing medication at such an early age can lead to an abuse of drugs or a dependency later on in life. I think doctors and psychiatrists should try their best to detect such a disorder early in life, but instead of turning to prescription drugs to "fix" it, focus on techniques to help a child direct their attention more, or listen more carefully, encourage and show them how to eliminate distractions when trying to concentrate on school work, or solving a puzzle, etc.

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Posted By [Stephanie Waring](#) | Thursday, March 31, 2011 05:10:44 PM

Dr. Van Ornum,

I am happy to see that you have posted this article! It was extremely interesting to read and I am drawn to this book, *DRIVEN TO DISTRACTION: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood* by Edward M. Hallowell, M.D., and John Ratey, M.D. It seems very fascinating to me and I am curious to continue reading the 50 tips on how to manage ADD you mentioned briefly. As a future teacher, I feel the need to read that section to learn methods to work and deal better with students who may have ADD in my classroom one day. Over the last couple of years the term ADD has truly sprung everywhere! It is a disorder that interests me and I am looking for answers as to why it is so common. It is an interesting, yet scary point that you and other make that children could be OVERDIAGNOSED. Overdiagnoses makes me think that there are children in the world who are taking medicine for something they do not have, which is awful. I enjoyed reading about recharging your batteries. I think that as a future teacher it is important to keep this in mind as well as think outside the box to other methods like can work for students in our classrooms. I know that providing a student with a bouncy ball as a chair works fabulously because I have seen in a classroom observation.

11. This article inspired me to do some more research on the topic of ADD and I came across this website:

<http://www.add.org/site/PageServer>

Anyone interested in gaining more knowledge on the topic should visit. Article are provided to address many different aspects of the disorder. One that I found interesting was titled A Tale of Two Children: From School-age Struggles to Adult Success written by Emmy Fearn, M.A.

<http://www.greatschools.org/special-education/support/874-from-struggles-to-success.gs?page=1>

It tells the story of a brother and sister who struggled with ADD in elementary school and throughout their education but today they are striving high! One is applying to law school, while the other is a freshman studying computer science. The article states that hard work, dedication, and structured education did the trick. As a future teacher, this makes me smile because I know I can provide that for a child one day!

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Posted By [Sabrina Scanga](#) | Thursday, March 31, 2011 05:11:50 PM

Thanks for your kind and supportive words Bill. AMDG!

12.

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Posted By [Juan Lino Lopez](#) | Thursday, March 31, 2011 06:09:42 PM

The article above brought various things to mind when reading about individuals with ADD. The first item is my perception of a child with ADD in the classroom. I have been a volunteer in elementary schools and have been placed with a child who has ADD and warned "keep an eye on him." Of course our perceptions of children with ADD is they are unable to pay attention, may not be able to focus for a long period of time or even stay relaxed in their seats But at the same time we need to understand that they are children as well. All children are jittery and don't have an attention span longer than 30 minutes. The article explains the idea of "recharging you battery's" as an adult with ADD. What about a child in a classroom? If there are teachers who have a child in their classroom who does have ADD, the teacher should think of an activity that the whole class can engage in to let each child let loose (mainly so the one child with ADD doesn't feel like an outsider), but also to help the classroom environment. When one child starts to get squirmy and not pay attention, other children are more likely to engage in the same behavior. Teachers should pick up on the classroom environment and attempt to benefit the whole class in a healthy manner.

13.

There was another issue mentioned, on how there are males who are over diagnosed for having ADD and females who are underdiagnosed. I feel being diagnosed with having ADD or ADHD is "simple" this day in age. I even believe some people convince themselves they have ADD/ADHD or convince their doctors they have it, due to pressures in society. My generation and even future

generations have been programmed to believe school and grades are essential for success in the future. With these pressures, people feel compelled to do whatever it takes to succeed and be the best when competing with classmates. If being the best means taking prescription drugs, which will allow a person to pull an all-nighter and study for a test resulting in a better grade, people will do it. The following article discusses the use of Adderall on a college campus in order to strive for academic success.

<http://abcnews.go.com/Health/MindMoodNews/adderall-psychosis-suicide-college-students-abuse-study-drug/story?id=12066619>

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Posted By [Daniela Pereira](#) | Thursday, March 31, 2011 06:30:45 PM

14.

Daniela, I'm so happy you brought up the usage of Adderall on college campuses.

Almost every week, I encounter a fellow Marist student using these types of medications recreationally. What I have noticed is that because these students would rather do just about anything else beside study, they wait to prepare for exams or papers until the night before the due dates. That night, they pop an Adderall they purchased from a friend with an actual diagnosis of ADHD and spend the whole night completing the assignments. To them, this is ideal because they are able to complete the assignments on-time without wasting any time at the bar the nights before the due date. Clearly, this is no way to learn.

A study completed at Louisiana State University sought to determine the relationship between ADHD meds, study habits, and academic achievement of ADHD-diagnosed undergraduate students. Although the drugs reportedly helped the students who took them, they admitted to being far worse than other students at managing their time and completing assignments. Preliminary data from the student suggested that learning good study habits alone could help the students with ADHD make up for the differences in academic success.

Perhaps instead of diagnosing and prescribing, we should do more to teach students, beginning at a young age, how to study and manage their time effectively.

If you're interested in this article, here's the link:

<http://jad.sagepub.com/content/early/2010/07/16/1087054710371168.full.pdf+html>

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Posted By [Alyssa Cariani](#) | Thursday, March 31, 2011 08:00:13 PM

15.

I was quite surprised by your suggestion that ADD could be an under diagnosed disorder. It seems to me that more kids than not are being diagnosed with ADD in today's generation, and those diagnosed are overwhelmingly male. However, isn't it possible that this is because elementary aged boys simply have too much energy to be confined to a desk for the majority of their day? Or perhaps classroom activities are just not engaging enough to keep a seven year old interested for a 45 minute period. There is also the problem of high school or college level students faking the disorder to gain access to medication in a high stress environment. Having recently watched the film "Generation Rx" in my biopsychology class, I am skeptical of the overwhelming numbers of children being diagnosed with ADD.

This article (<http://www.srmhp.org/0201/adhd.html>) discusses the 700% increase in the use of psychostimulant drugs since 1990. As in "Generation Rx", the article also discusses that there is no known biological cause of the disorder, and no universally accepted method of diagnosis. In fact, symptoms of ADHD are similar to those of children who are intellectually gifted and simply bored in the classroom because they are not being challenged. Should we really be prescribing medication to our kids based on a haphazard diagnosis?

Though I agree that ADHD is an important diagnosis that can greatly change a child's schooling experience, I also think that a more definitive diagnosis needs to be developed. The drastic increase in the amount children being medicated is cause for concern. Even when a child is properly diagnosed with ADD or ADHD, I believe that medication should not be the go-to response. Changing the learning environment and working one on one with the child should be the first response. Medication should only be used when all alternatives have failed. I think that ADHD is a disorder that must be reevaluated in terms of both diagnosis and treatment.

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Posted By [Lynde Kayser](#) | Thursday, March 31, 2011 08:06:07 PM

16.

The book sounds wonderful. I will be ordering it and reading it with great interest. My little family illustrates the changes in how ADD, ADHD and other disorders are diagnosed and treated. My son is 44 and my daughter is 39, so their history encompasses over 4 decades. At age 4, Frank was seen by a neurologist, psychologist and was diagnosed with minimal brain dysfunction. Do you remember this diagnosis, Bill? He was extremely hyperactive and was on Ritalin for a trial. Instead of meds he was given behavioral therapy (or bribery as he called it). By then, his sister was born and by the age of 3 we recognized that she too had some sort of disability. She was also extremely hyperactive. I had two children bouncing off the walls. She was DX with expressive aphasia; she was enuretic and encopretic and had many temper tantrums as she could not express her needs and wants. I learned that is I held her tight to my body for long periods of time, she would be calm and able to sleep. We had moved to CA and registered both children with the state agency for the developmentally disabled. Years of various therapies, changing diagnoses followed. My daughter was in a class for children with severe language disorders throughout her schooling, with some mainstreaming in high school. The consensus then was that she was autistic. Schooling and Girl Scouts meant all the difference in her life. She is still highly distractible and forgetful and she is very vulnerable in the "outside world". She works in supported employment and recently was awarded as the employee of the year at the La Jolla AMC theater where she ushers.

My son is another story. His diagnosis changed over the years. At one time he was considered retarded and was in the educable retarded classrooms. The school and psychologist determined he was ADHD and should be in that type of classroom. His schooling was a nightmare, no matter how much advocacy I did on his behalf. He was in 9 different schools as his program kept moving around. He was eventually dx as autistic and when he was 28 he had his first psychotic break. So he is dually diagnosed as autistic and schizophrenic. He had worked in supported employment for many years, but hasn't worked now for 2 years and is home all day. Pacing and saying: "Hi mom, how are you?" at least 100 times a day.

Having a child or children with disabilities of any kind is profoundly difficult and places great stress on marriages, especially if the marriage is wobbly to begin with. The stress manifests itself in parents who have stress related diseases and die at young ages. Divorce is common. My best friends in the network have died. My social life is restricted and I depend on my friends' understanding and patience. I never entertain company, other than my family, at home. My childrens' very peculiar behaviors are off-putting and some friends are afraid of someone with schizophrenia. While I am so accustomed to the unusual behaviors, they dont phase me, they make some people uncomfortable. I think some of this discomfort may be changing in people of my generation as they have grandchildren with disabilities. Another hard thing to deal with is the criticism of family and friends of one's parenting skills. Then

there were some in the field who called mothers of autistic children, "ice-box mothers". I am more of an "earth mother" myself :-)

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Posted By [Janice Johnson](#) | Thursday, March 31, 2011 08:40:24 PM

Thanks, Bill, for this post. I especially appreciated the point about over- and under-diagnosing ADHD. Another element here is the question of misdiagnosis. ADHD seems to have become a catch-all for any and all behavioral issues in children.

Case in point: A pediatrician diagnosed our daughter with ADHD four years ago and prescribed medication for her. But it didn't work all that well, and we had to deal with side effects like sleeplessness, anxiety, and irritability-not to mention social awkwardness. The doctor insisted that it was because my wife and I were not doing a good enough job raising her, which only added to our stress and concern. And still our little girl was falling behind in school and finding it harder and harder to make friends.

17. It wasn't until her younger brother was diagnosed with autism two years later that we began to suspect that something else may be going on. Sure enough, a couple of visits to a clinical psychologist resulted in a diagnosis of asperger syndrome. It seems that the pediatrician, because she was so accustomed to writing prescriptions for ADHD medication, completely missed the other signs.

Our girl is doing much better now that we have a more comprehensive plan in place that is helping her cope with the challenges of life on the autism spectrum. As for those two years of misdiagnosis-well, let's just say that we learned a lot!

So yes, ADHD is overdiagnosed, even in girls. It's tempting to go with the easy answer. But it's not always the right answer.

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Posted By [Leo Zanchettin](#) | Thursday, March 31, 2011 08:56:29 PM

I find this blog positing particularly interesting as it affects me directly in terms of my ideal future career; I am looking to go into school psychology. I had never really considered ADD a serious disorder before. I have known a few acquaintances with ADD, but to me that only meant they needed medication to be able to focus. It had never occurred to me that there was so much more to the disorder than that. Reading this blog, I realize that it is incredibly important to understand the needs of those with ADD in order to work to effectively help them. I will certainly look into reading this book to help me with this, as it will be inevitable that I face many children with ADD throughout my career.

18. I especially found it interesting that people are often misdiagnosed with ADD. Goldman, Genel, Bezman, and Slanetz (1998) found that 'the disorder is often diagnosed inappropriately at times because of failure to do a thorough enough evaluation or to use established diagnostic criteria.' While their research may be a little outdated now, this is still a very current problem. This only further stresses the importance of psychiatrists getting to know patients as discussed in your previous blog on the mental health care system today. It is imperative that we take our time in assessing individuals in order to fully help them, even if this means getting by on less pay.

Article: http://www.hkcss.org.hk/rh/rpp/HKPaediatricSociety20050630DxRx_ADHD_Council%20Report_JAMA_1998.pdf

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Posted By [Kerri Smith](#) | Thursday, March 31, 2011 08:57:17 PM

19. Janice-Our posts must have crossed in cyber space! So many similarities in our stories, even if my kids are much younger than yours. Blessings upon you for all your years of caring for your children!

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Posted By [Leo Zanchettin](#) | Thursday, March 31, 2011 09:05:46 PM

20. This book sounds fascinating. I definitely believe that the disease is one that is both underdiagnosed and overdiagnosed. Boys usually seem to get the diagnosis because they tend to act more hyper in nature as young boys. I've never doubted the existence of the disease but I do believe it is too often used as a "excuse", if you will. Especially in the classroom, I think some teachers may have problems with behavior management and so they turn to the disorder to explain why their class might be out of control. (That is just a hypothetical example). What I am getting at is my fear that this nation is becoming too dependent on drugs as the answers to problems. If a kid is a little rowdy and has trouble focusing, instead of trying some techniques to help control the problem, many times people assume, "oh he/she must have ADHD" and therefore place them on medications (which they become dependent on) when it actually is not needed.

Also I think an interesting fact about ADHD is that these children (or adults) have trouble focusing. Many times it is assumed that they cannot focus on anything but in reality they are focusing on everything and that is why it is difficult for them to concentrate on one thing at a time.

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Posted By [Erin Graetzer](#) | Thursday, March 31, 2011 09:25:29 PM

Continued from #16

Some years ago, before my son's first breakdown, my children were studied by a dysmorphologist, Dr. Marilyn Jones. Dr. Jones determined that their condition was genetic. Their father and I were unable to pinpoint who in our families may have had these disabilities as two branches of the families were largely unknown.

21. Bill, thank you for your post and bringing this important subject up for discussion. I find the comments and perspective of the students to be very interesting and helpful.

Leo, Thank you for the kind wishes. I send you blessings too as your family meets the challenges ahead. Our Faith is a great support in carrying our crosses. Janice

[Report comment](#)

Posted By [Janice Johnson](#) | Thursday, March 31, 2011 09:28:05 PM

I have to agree with Janice (#15). After watching the movie Generation Rx, I will never feel the same about ADD and ADHD EVER AGAIN!

I understand that many people may experience the symptoms of ADD, but maybe there is another cause for such behaviors.

According to Generation Rx, diagnosing ADD in children is a very profitable thing for drug companies. Think about it. It starts a child on a drug that they will be hooked on for life, ultimately determining who they will be as a person, before they really even have a chance to grow up to find out. Also keep in mind that some people in the APA are also members of the FDA (I believe there is some clause or something somewhere that forgives this conflict of interest).

Face it, some kids are just hyper. My one neighbor is a great example of this. We were both the same age and my sister babysat for him occasionally. Let me tell you, he was off-the-wall, 100% certifiably hyperactive and what I considered to be insane at the age of 7! He pretty much bounced off the walls all day long and was a complete troublemaker. Then....he grew up. Now, he is a handsome, charming, CALM, young man. My neighbor also was able to release much of his energy through swimming and other sports. I think some people are just more energetic than others and maybe we can turn this around some how and use it to their advantage.

22. Maybe parents need to think of alternative ideas when it comes to engaging a "hyperactive" child, such as more interesting and hands on ways of learning. Sitting in a classroom for a long time for ANY ONE is boring and if you take a look around the room, everyone is shaking their legs. Generation Rx even acknowledges how parents can be worse than the children! If a psychiatrist does not think the child should be on Adderrall or Ritalin, some parents say, "Well, fine, I'll just find another doctor who will prescribe." I am not implying that all parents are like this, but some want to take the easy way out and will choose medication over behavioral methods. I also suspect that some of the parents want it and have their children pretend that they have ADD so that they can get prescriptions. I know that this occurs at my pharmacy. There is a woman who has the calmest children ever, yet her son is supposedly just starting on Ritalin? Yeah right. She is a huge drug addict and we suspect that she is just using his name to get the drugs.

I think that the book that you speak of sounds like it is a very informative book, but I really think that before people start talking about this, they should watch Generation Rx. It has interviews with many doctors, reporters, and even has footage of conferences where the researchers are so full of s***, they do not even know how to keep their story straight. For the Marist students reading this, talk to Dr. Dingman or Dr. Otte and I am sure they would talk to you about it.

[Report comment](#)

Posted By [Christine C.](#) | Thursday, March 31, 2011 09:32:02 PM

I am in no way trying to disrespect the opinions of others, I am just simply stating my own. I obviously am no expert in ADD/ADHD or any areas of psychology for that matter, but i have gathered my beliefs through my own research and experiences.

I also agree with Lynde (#15). I was always fairly skeptical of ADD/ADHD and was hesitant to believe that people who are inattentive or hyperactive have a disorder specifically causing this. I am not saying that nothing is wrong, however, I do not believe that the problem lies simply in the fact that he or she has a brain abnormality specifically creating inattentive or hyperactive behaviors. What makes a person this way? What contributing factor/s is behind this matter?

After watching Generation Rx (which is clearly biased), my previous beliefs were solidified. I was amazed to hear how drug companies planned to target the only untouched population (children) right before ADD/ADHD sprang up and became such a popular diagnoses in the 80s. In Dr. Fred Baughman's book, The ADHD Fraud: How Psychiatry Makes "Patients" of Normal Children, he discusses how most parents are never shown blood or brain scans of their child's supposed chemical imbalance simply because there is no imbalance. There is no data supporting a chemical imbalance causing ADD/ADHD (Baughman, 2006). Through my research, I have found many different studies claiming various things about the brains of children with ADHD. One found that the hippocampus is enlarged and the prefrontal cortex is smaller than normal (unknown,2009), another claims that the prefrontal cortex, caudate nucleus and globus pallidus are all smaller in boys with ADHD than those without ADHD (NIMH, 2009). I'm not necessarily convinced. To me, these studies are not entirely reliable considering that they all seem to find issues with different areas of the brain. This leads me to my point. Because there are so many POSSIBLE areas of the brain associated with ADD/ADHD, perhaps these children have other issues that are being hidden through symptoms such as hyperactivity, inattentiveness, impulsivity, etc.

Accordingly, I think today's society is too quick to jump the gun and say that a child showing any of these symptoms should be diagnosed with ADD/ADHD. There are so many possible explanations for these behaviors. Perhaps the child has anxieties, so he or she becomes fidgety when worried, which can be all the time if the child has an anxiety disorder. What if the child has a processing disorder in which they have trouble learning, so instead of trying to listen and gaining nothing, they tune the teacher out and daydream instead? I don't believe the girls are underdiagnosed, but the other way around. Because boys are in general more active and restless (especially young boys), they are often evaluated as being too disruptive, noisy, jumpy. Maybe the child has no backyard at home and is too often inside, so he becomes hyperactive from the buildup of energy. Maybe the student has a sensory impairment in which he/she receives too much stimulation and cannot block out distractions and focus. What if the child has a metabolic issue causing an excess of energy that the child feels the urge to release? Maybe the child has depression or is going through a difficult stage in their life that is causing them to be inattentive to matters within the classroom because they are constantly thinking or worrying? Possibly school is the only place in which the child receives attention, so any attention whether good or bad, is better than none. What if the child's brain is perfectly fine, but is developmentally delayed, so that the child needs a few extra years to mature to the level of most children his/her age? I think you get my point. I'm just throwing out examples of what CAN be the cause of a child who is very hyperactive or inattentive.

23. On the other hand, I also think there is another large contributor to ADHD symptoms that is not due to a physical abnormality of the brain. I believe that some people displaying these symptoms of ADHD have many insecurities. I'm sure we all know someone who is constantly seeking attention, and goes about it in the wrong types of ways. Many times someone who is very insecure, intends to cover it up by acting in opposition, seeking approval from peers. A young girl or boy may struggle with insecurities, be it from academic failure, physical appearance, or something other, and in an attempt to escape from these insecurities, they act up as the class clown being disruptive in order to make his/her peers laugh and approve of them. Attention seeking behaviors, in my opinion, most often come from people who struggle with insecurities and want to feel the approval of others.

Consequently, I don't believe that teachers, psychologists, or anyone else should assume that children have ADD/ADHD. Perhaps they should take a deeper look into what can be causing these behaviors to show up. With so many what ifs and no definite answers regarding ADD/ADHD and the brain, I feel strongly that psychologists and psychiatrists should evaluate their patients critically and try to work out underlying problems. Dr. Robert Mendelsohn MD states that, "No one has ever been able to demonstrate that drugs such as Cylert and Ritalin improve the academic performance of the children who take them" (Shirley's Wellness Cafe). If this is the case, there should not be so many students on medicine for ADD/ADHD. Yes, perhaps the child is calmer, but if they are making no

learning gains, clearly there is still something blocking this knowledge acquisition other than the displayed symptoms. Hyperactivity has been addressed successfully in many cases using behavioral and cognitive behavioral therapy (Kendall & Braswell, 1993), and I feel strongly that these remedies should be increased and stronger programs for them should be implemented since ADD/ADHD diagnoses are on the rise.

Baughman, F.A. Jr. (2006). *The ADHD Fraud: How Psychiatry Makes "Patients" of Normal Children*. Retrieved from <http://books.google.com>

Kendall, P.C. & Braswell, L. (1993). *Cognitive-Behavioral Therapy For Impulsive Children Second Edition*. Retrieved from <http://books.google.com>

<http://nyp.org/enews/ADHD.html>

<http://www.healthypace.com/adhd/nimh/subtle-brain-circuit-abnormalities-confirmed-in-adhd/menu-id-888/>

<http://www.shirleys-wellness-cafe.com/ritalin.htm#fred>

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Posted By [Allyse Bamonte](#) | Friday, April 01, 2011 01:58:52 AM

24. Thanks to everyone for the many intelligent and informative comments. This is one topic with many facets and different researchers, books, articles, movies, etc. bring out different points and come to different conclusions. Hope to hear more on this. Has anyone read the book or at least skimmed it? bvo

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Posted By [bill van ornum](#) | Friday, April 01, 2011 06:41:16 AM

This book seems very interesting, helpful and informative. I have always been fascinated by ADHD and would love to learn more about it. It seems that today it has become a very broad area, sometimes overdiagnosed, yet still underdiagnosed.

After tutoring for 6 years, I worked with 2 students who have ADHD; one boy and one girl. This allowed me to experience the disorder first hand and see how it affects children of different genders in different ways.

One thing I was extremely interested in was the relationship these children had with their siblings and their parents. They seemed to be treated as inferiors and many would roll their eyes at them in frustration. I often received notes from their teachers, describing the progress of the students and what they still needed to accomplish. What surprised me was the attitudes of the people in the students' lives. The teachers treated the students almost like they were incapable of completing the necessary work, using ADHD as an excuse.

25. By working with these students one-on-one I was able to understand their strengths and weaknesses and use them in my favor. Every once and a while, one of the students would get up and get a tissue, sharpen her pencil, use the bathroom, or perform some other activity that required her to get up from her seat. Her teachers acknowledged this behavior as negative, claiming the student was unable to learn if this was being done. What I actually found was that this behavior was helpful. It allowed the student to regroup her thoughts and "recharge her batteries" in a way. The same goes for the other student I worked with.

I think much more research must be done in this area and many more training programs for family members, teachers, and anyone else who has a relationship with someone who has ADHD must be created. More people need to understand that people with ADHD can still learn and that high expectations should still be set for them. Even the slightest change or accommodation can make a huge difference.

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Posted By [Lia DeGregorio](#) | Friday, April 01, 2011 07:51:07 AM

I would like to share the trailer for Generation Rx

<http://www.youtube.com/watch?v=xehHwkPpevk>

By no means, am I implying that people do not suffer with problems associated with ADD/ADHD, but since I and others here have mentioned this movie, I figured it is worth sharing the link! Please take a look at it and explore both sides of the story. Also, the movie discusses not just ADD medication, but anti-depressants in adolescents as well.

I apologize for straying from the original topic, which was the book *DRIVEN TO DISTRACTION: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood*. It must be helping people, because on Amazon, 129 people gave it 5 stars. Dr. Hallowell also has a website that is worth looking at. (Check out: <http://www.drhallowell.com/books/driven-to-distraction-recognizing-and-coping-with-attention-deficit-disorder-from-childhood-through-adulthood/>) .

I have personally never read the book, but what makes it more valuable is the fact that these men have ADD (or if you don't believe in that, as some of you have said, they at least have suffered with the symptoms), so they know a great deal of what it is like to live life with hyperactivity, inattention, etc.

26. I like the advice mentioned here about making time to relax and enjoy TV, books, etc, but that shouldn't get too excessive. In fact, that is a problem. Of course, we all need time to decompress, but our society "decompresses" WAY too much. Too many children are inside playing video games instead of riding bikes or playing catch outside. Too many kids are listening to their iPods as they lay in bed doing nothing instead of running outside and playing kickball with the neighborhood children. Our energy needs to eventually come out of us some way! I suspect those are some of the kids that act up in school.

Do not get me wrong, we all need to recharge. For example, I am constantly in motion during the week with driving to school, attending classes, working, etc. I have even displayed symptoms of ADD sometimes (which I think a lot of people display in varying

degrees). I noticed that if I do not exercise regularly throughout the week, I am completely scatterbrained. I misplace things, I forget to do homework assignments, I plan to walk upstairs to grab a cup of tea and end up walking downstairs with something completely different and unrelated, then I have to walk all the way back upstairs to get what I originally wanted, and the process repeats over and over.

When I exercise, though, I am on top of my game. My grades are always better and I have much more focus and drive to complete all of my assignments successfully and with high-quality. It's as if physically exercising stimulates my mind and makes things much more clear. It also teaches me time management because I have to schedule my day around when I can exercise. I have been doing this throughout most of college and it has helped me manage my life tremendously. I give this example because, as I referred to in my previous post, people who have these symptoms need to get their energy out in a physical, positive, and appropriate way.

Then, because I have accomplished everything I've needed to accomplish in a timely manner, I can "recharge my batteries" guilt free as well and sit back and watch episodes of Seinfeld and The Office. Now that is happiness, my friends:)

Thanks Dr. V for a thought-provoking, controversial, and interesting topic!

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Posted By [Christine C.](#) | Friday, April 01, 2011 10:01:40 AM

27. ADD is a topic that is discussed frequently in my education and psychology courses. From listening to different professors speak of the issue I have been able to hear many different points of view. One of my professors posed a question for thought to my class the other day, 'is ADD actually becoming more prevalent or is it just that our societies norms are beginning to stifle physical activity and movement on a day to day basis and therefore kids can't release their energy in a healthy way?' I found this question very interesting. It got me to think about how kids are stuck in their desks all day and then later strapped into a car. When they go home they are doing homework, watching television, and playing video games. When do they get the opportunity to run around outside and release their energy? Are safety concerns and modern technology stifling students to the point where they get to school and are hyper because they haven't gotten to burn off any energy? This idea was an interesting one for me to ponder. I do think that the over diagnosis of ADD could have something to do with the fact that many children aren't running around outside anymore because of safety concerns, technology, and just not having enough time in the day. Then these students get into a classroom and they are active and hyper... and it may appear like ADD. But students really need to be diagnosed properly so that they aren't being unnecessarily medicated. I came across an article discussing the over diagnosis of ADD and I thought it was an interesting read. One statistic from the article stated that "One to two percent of adult men and women in the United States have been said to have attention deficit disorder, and three to ten percent of children are diagnosed with attention deficit disorder in the United States, with three quarters of them boys." I am unsure of why boys are over diagnosed and girls under diagnosed? It may just have to do with the inattentive forms of ADD which are harder to catch and are more prevalent in girls. Here is the article I looked at, it has some interesting information on ADD as well as discussion of the over diagnosis of the disorder: <http://www.doreka.com/add/000018.htm> .

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Posted By [Erica Rascati](#) | Friday, April 01, 2011 11:35:33 AM

28. Sometimes I wonder if there is a correlation between the rise of this syndrome and the cutting of the arts (music, art, phys.ed, and in some schools, no recess) in the schools!?

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Posted By [Norma Nunag](#) | Friday, April 01, 2011 01:07:59 PM

29. What I find interesting about ADD is that research has shown that a large percentage of adults (75%) who have this disorder are unaware of it. Many adults who do not display compulsive or hyperactive symptoms do not know that they have this disorder. Instead, they may attribute their behaviors to forgetfulness. I feel that if they were aware of their disorder earlier in life then they may have had an easier time coping with their symptoms and received effective treatment to manage their symptoms. Also, if they were diagnosed as a child instead of during adulthood, they would be more educated on the disorder and may be able to pick up on ADD symptoms if present in their children. This is especially important given that ADD runs in families.

29. According to Dr. Theresa Cerulli "The genetics are strong. ADD is almost as inheritable as height." Thus, if a child has the disorder it is more than likely that one of their parents has it as well. By being proactive in diagnosing this disorder, children may be able to socialize better with their peers and do better in school. It is important for early intervention to occur so that children do not have to struggle. This is a very important topic to discuss and we should continue to educate others on this disorder.

(2007, April 12). Genetic link has more parents being diagnosed with ADD: Experts say disorder runs in families. Retrieved from: <http://www.thebostonchannel.com/r/11731794/detail.html>

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Posted By [kaynapfeiffer](#) | Friday, April 01, 2011 02:09:53 PM

30. While I was reading this, I couldn't help but wonder if ADHD is an "American disorder." It seems that we give the issue a lot of attention here, but most of what I hear refers only to the American population. If it were something that was more common in the United States, that could indicate that it is largely due to environment and culture. However, according to one study on the worldwide prevalence of ADHD, non-US children are just as likely to be diagnosed. This study looked primarily at other developed countries (i.e. UK, Australia, Italy, Japan) whose medical systems are on par with ours, so knowledge and ability to diagnose the disorder should not have played a significant role.

30. Although it appears that diagnosis is fairly steady around the world, I still wonder- as others have brought up- if we are mistaking kids being kids for hyperactivity. Medication is certainly necessary for some individuals to maintain focus, but I think that we should be putting more effort into changing their behavior without prescriptions before resorting to medication. It would be interesting to see if any research shows the effectiveness of medication versus behavior therapy.

Faraone, S.V., Sergeant, J., Gillberg, C., & Biederman, J. (2003). The worldwide prevalence of ADHD: is it an American condition? *World Psychiatry*, 2(2), 104-113. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1525089/>

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Posted By [Casey McGowan](#) | Saturday, April 02, 2011 10:06:08 AM

The general population often has an incorrect belief of what Attention Deficit Disorder is. Some common misconceptions are that these people are not able to pay attention to anything, are extremely talkative, and are always active. Although these misconceptions

are common, they are extremely false. To begin, people with ADD can pay attention, it's just that everything grasps their focus and attention it takes some time to focus in and concentrate on a task. Also, people who have ADD are not necessarily talkative or hyperactive; the student in your class with ADD might be the student who doesn't talk or volunteer, and is well behaved.

31. This book sounds extremely interesting! I think it is very important for people, especially future teachers to read the book you mentioned. It is important for people to read about how people with ADD cope from childhood through adulthood. This book could be a real eye-opener to people who are unaware about ADD. Broadening people's knowledge about this disorder will lead to fewer incorrect judgments about people with ADD. The 50 tips mentioned on how to manage ADD would be so helpful for teachers and future teachers to read. Maybe they can find some tips that they could use in the classroom to make their students with ADD feel more comfortable. The 50 classroom manageable tips would allow you to give the child with ADD the best school experience to your ability. The student's disorder is often used as an excuse to give an explanation for a student doing poorly in school. This is not okay! It is extremely possible for a student with ADD to do well in school. We, as teachers, need to try our hardest to meet the needs of all students, and stop making excuses to cover up failures.

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Posted By [Diana Sablich](#) | Saturday, April 02, 2011 11:44:24 AM

I think we tend to diagnose young boys with ADD more than girls or adults because we typically see boys acting out in school more than girls. We think that because they are bouncing off the walls and not focusing and interrupting the class, they have ADD. This may be true, but often times, like Dianna said in her post, people with ADD are likely to be very quiet and not hyperactive at all. This misconception would make it more difficult to diagnose say a young girl who just seems shy; teachers might not notice that her grades were slipping because she isn't acting out or interrupting the class, yet she still is not paying attention like the boy who has been diagnosed with ADD.

32. As a future teacher, I would definitely want to get my hands on this book. As a teacher, you have to be aware of the problems your students might have. In order for them to perform at their fullest potential, it is important to be able to recognize any symptoms they might have for any behavioral problem. Learning how to deal with these problems, and hopefully fix them, would be extremely beneficial for a teacher to know before it is too late. The example that Dr. VanOrnum portrayed to us, I found very interesting. Not only does this book have insightful knowledge on how to cope with ADD for children, but for adults too. I'm not saying it's good to worry when reading the symptoms of ADD and assume you have all of these symptoms. I am saying as a parent and teacher, if you notice a quiet child/student struggling in school, it might be wise to do a little research to see if there is anything that can be done.

[Report comment](#)

Posted By [Kate Conard](#) | Saturday, April 02, 2011 01:58:00 PM

With the fact that the article states, just like many other articles circulating the web, that ADD is over diagnosed, I thought about the people in my life that have ADD. I only have one person in my life that has ADD. Interestingly enough, this person is not medicated. Though fieldwork in the local schools, substitute teaching in my home district, and having a mother that works as a speech and language pathologist in the school system, I am constantly hearing about the prevalence of children being diagnosed with ADD (especially the prevalence of boys being diagnosed with ADD). Boys are very active in general. They constantly want to be up and moving and participating in activities where they can exert their physical energy. Therefore, they are focusing on other things and may not be focusing on school. This behavior might concern parents and teachers. Children that have the behaviors as described above could either have "childhood" or "ADD". I believe there is a fine line between a child who does not focus sometimes and a child who cannot focus at all. Children who cannot focus at all can be all over the place (scatterbrained) and may not retain any information, even when it is presented in a multitude of ways. Sometimes, the teacher is not engaging the student (it is not always the student's fault). The teacher needs to know her students and find out how his or her students learn best. The teacher needs to present the material and create activities that will make the material fun and interesting.

33. However, I do believe that many parents put their children on drugs to "solve" the problem. The stories that I hear from my fieldwork of children that go on medication are numerous. Children that go on medication generally improve their grades, but their entire personality changes as they become lethargic or may seem depressed. Most parents do not want their children to seem different or odd, so some parents would rather medicate their children immediately then wait or see if the symptoms persist or get worse. Also, some parents would rather give their children a pill everyday then look for alternative solutions (like counseling, a different school setting, different exercises etc) that do not change the child's personality or brain activity. Interestingly enough, according to an article written by Wolraich, M., Lindgren, S., Stromquist, A., Milich R., Davis C., Watson, D., (1990) it is difficult to diagnose ADD because of the varying symptoms. Also, physicians, teachers, psychologists, and parents in most cases have differing opinions on ADD and whether children should be medicated. In fact, half of all cases in their study had parents, teachers, physicians and psychologists alike taking different viewpoints on the symptoms of a particular child and whether stimulant medication would help the child. Personally, I would look for alternative methods as a future teacher to accommodate my students needs. The student would not stand out because each student would be doing work and participating in activities that suited his or her intellectual level and needs. Overall, I think that in recent times people are too quick to diagnose ADD and want an easy fix, such as medication to solve the problem, when in fact the medication in long term can possibly make the "problem" even worse or create other symptoms. Wolraich, M., Lindgren, S., Stromquist, A., Milich R., Davis C., Watson, D., (1990) Stimulant medication used by primary care physicians in the treatment of attention deficit hyperactivity disorder. *Pediatrics*. 86(1), 95-101.

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Posted By [Courtney L.](#) | Saturday, April 02, 2011 03:06:24 PM

This book sounds extremely interesting and informative! It is no secret that ADD and ADHD are becoming more and more predominant in our society and I think this article is a great way to draw attention to the growing issue. After reading this article, I really want to now go ahead and read *DRIVEN TO DISTRACTION: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood*. Prior to reading this article, I had heard that many young boys are being overdiagnosed with ADD. This is mainly because many people are quick to put active children on medication for ADD instead of acknowledging the fact that young boys are very active. However, it was interesting to hear that many girls are underdiagnosed. I understand that young girls aren't as hyper as young boys, but I wonder why they aren't tested. Is this a stigma or bias that girls aren't supposed to have ADD? Are we not helping young girls to reach their full potential because of this bias?

34. It is interesting how you note that ADD affects all of the relationships surrounding the individual. I have encountered many people throughout my lifetime with ADD and ADHD and it truly does affect all aspects of their lives. Whether this be socially unable to sit through a movie or conversation or at school/work when trying to complete an assignment. It is important to recognise this fact in order to help the individual and those surrounding the individual so that they can live up to their full potential. I love that there are useful tips on how to manage ADD and how those without ADD can use these tips too. Being able to do these activities together (people with and without ADD) will allow people to strengthen relationships. Being that I am currently studying education, I am interested to read more about the section in the book that explains 50 classroom management tips.

[Report comment](#)

Posted By [Samantha Young](#) | Saturday, April 02, 2011 03:14:23 PM

- I completely agree with your point that many boys are over diagnosed with ADD. Boys will always be boys, messy, hyperactive, and fidgety. That doesn't mean that they have ADD, it means they have energy. I have seen first hand in student teaching how over-medicated children have become. If you just make lessons interesting and teach to their strengths, students don't fidget. Some students legitimately have ADD, but some others are just too frustrating for parents and teachers to deal with, so they raise the big red ADD flag. Too many parents and teachers are quick to resort to medicating children, when in reality there are much better and safer solutions. From your description of this book, it definitely sounds like this book could offer some helpful suggestions on how to deal with a student or adult with ADD.

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Posted By [Erin Betsch](#) | Saturday, April 02, 2011 03:57:54 PM

- Joey (#4) poses some great questions. One that really struck me was, "so what would happen if a child was just taking this medication even if he or she didn't need it and it harmed them?" Since there is a great deal of misdiagnosis going on, people who do not have ADD are taking medications when they shouldn't be. This brings forth legal issues and potential lawsuits. One cannot jump the gun and start medicating these children until they are absolutely positive that the individual has ADD. This is a serious matter that should not be overlooked, and I agree that the doctor should spend a lot of time with the individual before making a decision.

[Report comment](#)

Posted By [Samantha Young](#) | Saturday, April 02, 2011 04:20:28 PM

- ADD, and related ADHD, have become household terms in the education, child development, and parenting in recent years. The recent rise is not without controversy. Doctors have been accused of over-medicating, easing their burden of time and insurance cost; parents accused of instilling ineffective values, and teachers and religious educators accused of using faulty methods in their classrooms. All of which, or none of which, may be true due to the ambiguity of the condition.

37. The best way to view, treat, and live with ADD or ADHD is to become educated. However, information on the subject can be as jaded as the controversy surrounding it. One effective article that does cover the many facets of the condition is <http://www.metrowestdailynews.com/lifestyle/health/x61785106/Over-the-Counter-Nutrition-key-for-kids-with-ADD-ADHD>. The major point of view is that of a nutritionist but does provide refreshingly unbiased, conspiracy free, and straightforward information that is readily usable.

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Posted By [Katrina Ferrer](#) | Saturday, April 02, 2011 05:08:03 PM

- Dr. Van Ornum, I was extremely happy to see that you had written on the topic of ADD as it has been a topic of conversation very often recently in my life. Attention Deficit Disorder has become a topic of controversy and concern by many individuals and has caused many a conversation. Through the choice of my major, Psych/Special Ed., this is a topic that has been brought up semester after semester, year after year, and still it does not seem to be resolved. There are so many questions that are asked and so little responses or answers provided. As Americans who are frequently diagnosed, we are looking for answers, for a solution, however, do we have these answers and are they enough to satisfy our curiosity? Many people wonder, as I do, where does this disorder stem from? Is it genetic or environmental? Do we over diagnose individuals with ADD? Should we medicate those who we believe have this disorder? Is there something that can be done to prevent Attention Deficit Disorder? So many questions but so little answers exist.
- The issue of ADD has always been of interest to me. I have known many people who have been diagnosed with Attention Deficit Disorder, and more recently Attention Deficit Hyperactivity Disorder. Some of these people I believe are accurately diagnosed, while others I tend to question the diagnosis, which causes fear within me because these individuals are being medicated. What if they are misdiagnosed and taking a medication that is not needed? In the past three years of my college career I have done many hours of fieldwork in elementary school classrooms. One year I was placed in a special education classroom and my concern about ADD heightened after this experience. There were only seven students in this classroom, several diagnosed with ADD, only at the average age of seven. I observed the students closely and found that one little boy, who I was told had ADD would finish his work several minutes early and would sit at his desk after completing the task. During the time he waited for the other students to complete their work, this little boy would sit there, not moving much and very somber. It made me question his diagnosis. Could this little boy at the age of seven really have ADD? He did not show many symptoms. I began to believe that this boy was misdiagnosed and was being deprived of an education, where instead of sitting around waiting he could be challenged to advance his knowledge. It saddened me to think that this boy was being misdiagnosed and I could only hope that he was not being medicated for this diagnosis. It also made me think about the severe effects that a misdiagnosis could have on a child, such as the case with this little boy who was being deprived of a more rigorous education that could further his knowledge. Although this frustrated me, what saddened me more was the teacher's lack of patience for these students. As an educator of special education it is important to remember that these students have a disorder in which they cannot control and demonstrate behaviors that other students normally would not. In such situations it is important for the educator to have patience for these children to avoid frustration and instead try to scaffold the student in expanding his or her knowledge. Although I felt much frustration towards what was going on in that classroom, I learned much about how the environment affects students with ADD. The teacher explained to me that it is important to eliminate as many distractions as possible, therefore a child that is diagnosed with ADD should be placed in a small class size of no more than ten students, should never be placed near a window or a door, should be placed towards the front of the classroom, and the seating area should be designated away from centers and isolated to one section of the room, all of which made perfect sense and seemed to be a reasonable solution.
- As I observed this classroom and many more, it became evident to me that environment has a huge role on ADD, however, that does not mean that I am ruling out the effects of genetics. As E.H. Cook and his colleagues had written through the article, *Association of*

Attention-Deficit Disorder and the dopamine transporter gene, "Attention-Deficit Hyperactivity Disorder has been shown to be familial and heritable." The response of ADHD patients to medications that inhibit the dopamine transporter led Cook and his colleagues to consider the dopamine transporter as a primary candidate gene for ADHD. Research has proven that indeed ADD and ADHD can be linked to genetics as well as environmental, however, there has not been enough proof to solve the issue and research is still being conducted.

I strongly believe that ADD is at times over-diagnosed and at too young of an age. In addition, as a college student it has become more evident that students are being diagnosed for a disorder in which they do not possess. First, when a child, especially a young boy, is diagnosed at a very young age with ADD it leads me to question the diagnosis. When we were young children at the age of seven was it not normal to have extreme energy, to want to run around and never take a break? Of course, this was normal. The diagnosis of high energy and constant movement used to be called, being a child; however, that diagnosis is now being classified as ADD. We are no longer allowing children to be children and are instead diagnosing them and medicating them to provide a lower energy level, which at a young age is perfectly normal. Also, as a college student, I am aware of many fellow students who are "diagnosed with ADD." Is it possible that so many college students developed this disorder and need to be medicated, or are students able to receive medication through manipulation?

As mentioned in the article there is a section in the book on 50 classroom management tips that is expressed would be especially helpful to therapists who consult schools. As I am very interested in school psychology I became even more interested in reading this book, especially this section. I plan on purchasing this book and reading about ADD in order to educate myself further on recognizing and coping with Attention Deficit Disorder from childhood through adulthood.

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1801209/>

[Report comment](#)

Posted By [Vanessa Adamo](#) | Sunday, April 03, 2011 01:53:54 PM

That book sounds really interesting. I know many times people have misconceptions about ADD. I feel like, in a way, this could be why there are problems with overdiagnosing and underdiagnosing ADD. You mentioned that many people think boys are overdiagnosed with ADD, and I can understand why. It seems like boys are usually the ones who are loud and acting out in class rather than girls. Many times, people might think that the boys acting this way have ADD or ADHD. However, they might not. I remember when I was in middle school, there was this boy that would always get in trouble and other kids would say that he had ADD, but I do not know if that was actually true. I feel like people just assume that someone who does not pay attention in class automatically has ADD or ADHD. I don't think that these people always have ADD or ADHD. Sometimes kids just have other issues on their mind or are just bored. Also, sometimes the boys that interrupt the class may be trying to act "funny" or "cool." It might not mean that they actually have ADD or ADHD.

I found an article that said that children could be misdiagnosed with ADHD for another reason. They say that "children who are young for their grade may get an inappropriate diagnosis because teachers mistake their immaturity for ADHD" (CNN Health). The studies say that "being young in a grade more than doubles the likelihood of receiving an ADHD diagnosis or treatment" (CNN Health). This made me think that maybe maturity level could have to do with boys being overdiagnosed with ADD/ADHD because boys are supposed to mature slower than girls.

39.

You also mentioned that people think that girls are underdiagnosed. I can understand way this is, too. Many times girls are not the ones who are loud and act out in class. For this reason, girls with ADD/ADHD may not be diagnosed with it if they do not act this way. I found out that there are gender differences in ADHD. Girls have different symptoms than boys, so their ADHD can go unnoticed. For example, "Girls with ADHD aren't usually hyperactive...they tend to have the attention-deficit part of the disorder" (apa.org). Since hyperactivity is pretty obvious, boys can be diagnosed more often.

I think overdiagnosing ADD/ADHD is a serious problem. Children should not be given medication unless they really need it. I have never been a fan of medications being used to treat mental issues unless it is absolutely necessary. This is because I have heard that certain medications can cause different problems. I have heard that some medications can stunt growth. Also, in one article, it said that some ADHD medications could lead to "possible cardiovascular problems" (CNN Health).

<http://thechart.blogs.cnn.com/2010/08/18/nearly-1-million-adhd-misdiagnoses-study-says/>

<http://www.apa.org/topics/adhd/gender.aspx>

[Report comment](#)

Posted By [Danielle Lettieri](#) | Sunday, April 03, 2011 08:35:54 PM

I am looking forward to reading this book dealing with ADD issues since I know many of my friends have this condition. Being able to give some suggestions to them if they ask will be something I could use on a personal level. I like the tip you noted about recharging your batteries. That is something I will use as well for myself.

40.

I wonder if the book also has a chapter on how to treat ADD. I know that it has been suggested that stimulant drugs such as Ritalin can be helpful on the medication front. Also combining medication with training in cognitive and social skills issues is also helpful. I was also glad to see that they are focusing on diagnosing more girls with the condition since it usually has been an over diagnosis with boys.

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Posted By [Elizabeth Batchelor](#) | Sunday, April 03, 2011 09:37:40 PM

The topic of ADD is obviously a controversial subject for many. After watching 'Generation Rx' many of the issues that come with this topic was brought to light for me. Before, I was accepting of the fact that ADD or ADHD is diagnosed in young children because young children legitimately have ADD or ADHD. After viewing the movie, I found that although the movie was slightly biased, there was some relevancy to the idea that many school teachers are forcing young children into see a psychologist to diagnose a problem that may be related simply to their age.

41.

I am not saying at all that the problem of ADD or ADHD does not exist; however, I do think that the diagnosing children so early on, is not the answer either. The book looks to be an interesting set of suggestions that may help mold classroom management for teachers dealing with children that display hyperactivity. I think that instead of sending a child to a consultation, teachers should maybe use different management techniques at least until the child becomes of an age in which their maturity cannot be matched with their symptoms.

[Report comment](#)

Posted By [Desiree Desaulniers](#) | Sunday, April 03, 2011 11:32:38 PM

Vanessa (#39), I completely agree with you. After doing fieldwork and student teaching, some diagnoses of ADD and ADHD are very questionable. I have seen students that are very clearly ADD/ADHD and cannot focus or control themselves. However, as you have, I

42. have also seen students, boys especially, who are just distracted or hyper. It is sad because they are unnecessarily being medicated and being deprived of an education. You may in fact be inhibiting them from being in the Least Restrictive Environment (LRE) by medicating them when instead they just need to learn to focus. I completely agree with the fact that it is an issue and needs to be resolved.

[Report comment](#)

Posted By [Erin Betsch](#) | Monday, April 04, 2011 02:26:53 PM

43. I believe that Norma (#29) brings up a good point. Schools are constantly concerned about losing instructional time, and as a result, they take away from all of the wrong places- physical education, recess, etc. Is this decrease of recreational time directly related to the rise in ADD diagnoses?

[Report comment](#)

Posted By [Alyssa Moirano](#) | Monday, April 04, 2011 05:31:50 PM

Since I started my Psychology Special Education program the topic of ADD and ADHD has been of great interest to me. There are so many issues and unknowns about ADD and it is particularly important to know about it in teaching.

44. Every time I have watched a documentary, had a discussion in class, or did research of my own it was always mentioned that boys are over diagnosed or more diagnosed than girls. Although a lot is unknown about the biological and cognitive causes of ADD one reason it has gained controversy is the natural differences between boys and girls. Biologically there are differences in the brain of males and females. Due to these differences each gender acts differently in different situations. Our society has a certain standard as to how students should act in a classroom and this standard is more conformed to the natural behavior of girls. So, when boys have a hard time acting the way they are expected to, such as being too fidgety or active or having a hard time concentrating while sitting in a desk during a lecture, it is assumed they suffer from ADD or ADHD. The book *The Wonder of Boys* by Michael Gurian goes into great detail about the differences between males and females and much more interesting concepts about gender differences. Another controversial issue is that not only are boys over diagnosed they are also over medicated. I don't know that much about the issue to say these things for certain but, from the information I have been provided from a variety of sources it seems as if medication is the most used strategy to manage ADD. This book appears to have many helpful strategies to work with students with ADD without having to medicate them. For this reason I would like to read this book because I am sure I will have students in my future class who may be considered to have ADD. In certain situation medication is necessary however I do believe that it is over used which is also where the issue of students who do not have ADD using the medication in recreational ways comes into play. As a teacher I hope to help students who may be thought to have ADD to deal with his or her disability in a way in which they don't need medication.

[Report comment](#)

Posted By [Samantha Sciacovelli](#) | Monday, April 04, 2011 07:03:05 PM

45. This article really stuck with me was about ADHD. I have done several projects on ADHD as well as have friends who have ADHD. I know there is a huge problem with people being wrongly diagnosed. I found this published article from 2002 (some readers might not be able to open it) but the article examined preschoolers to determine if that had ADHD and to do early interventions. While the study might have found positive results I have to question if as a society we are getting too carried away. I worked with a preschool camp over the summer and most of the children had short attention spans and were hyper (some children more than others), however I do not think we should consider diagnosing them or beginning an intervention at this age. While I do think many people are wrongly diagnosed or diagnosed to quickly, as future teacher I need to be familiar with techniques to help keep the kids under control and help children concentrate. I like the idea of taking time to recharge your batteries. Children with ADHD need to take breaks and not sit for a long time on one subject. A child that is asked to sit and complete one subject for an extended period of time will get bored and might begin to become restless. The little break will help a student regain focus for the remainder of the lesson.

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Posted By [Rachel Bremer](#) | Monday, April 04, 2011 10:16:50 PM

46. ADD is a concern for many teachers as well as future teachers. Diagnosing ADD has been more prominent than ever. "According to the National Institute of Mental Health two to three percent of children have ADHD. This means that in a typical classroom at least one child is ADHD. The NIMH estimates that about 2 million children in the United States have ADHD." I personally believe ADD and ADHD are over diagnosed. A child of the age of six is supposed to be hyper and want to run around outside and play. A child of the age of six will have difficulty sitting in their seat for long periods of time; an adult of the age twenty has the same problem. It truly bothers me how people so easily want to label children as ADD and ADHD. I have a friend who has ADD. She was diagnosed at a young age and without hesitation prescribed medication. As I observe her and listen to her relentlessly talk about how she has ADD and praise the fact that she has medication; it utterly irks me. Labeling a child ADD or ADHD plus prescribing medication becomes a crutch for children. As I see with my friend, she is quick to rely on her medication as well as blame it for her inabilities. After learning about the book *DRIVEN TO DISTRACTION: Recognizing and Coping with Attention Deficit Disorder from Childhood through Adulthood* by Edward M. Hallowell, M.D and John Ratey, M.D, I am overly excited to inform my friend about it! From the sound of things, I believe the book is filled with an abundance of useful information that is beneficial for all people.

[Report comment](#)

Posted By [Lauren E.](#) | Monday, April 04, 2011 10:47:24 PM

This book on ADD seems very interesting. I think it could be extremely helpful to anyone that knows or has ADD because it is hard to cope with at times. I know a few people that have been diagnosed with ADD and at times it is difficult for them to concentrate on homework and they become frustrated. I think that this book could help them learn more about their diagnosis and how to cope with it.

In one of my previous classes I learned about ADD and its diagnosis. I learned that it was seen in more young boys than girls therefore people associate it with boys more often. I am curious to see if this is true and this book states an interesting point. Girls can be under diagnosed. If this is true I feel bad for those people because they may not be receiving the help they need to deal with their disorder. I

47. hope that more people get a chance to read this book because it can give them an opportunity to learn something new or help someone they know who may have ADD.
As I observe classrooms throughout the year I have also seen many young children who have been diagnosed with ADD. Watching them in the classroom has allowed me to see how difficult it can be for these students to concentrate and do well in school. Many of them continuously got out of their seats during independent work time and made excuses to why they could not do their work. I felt extremely bad for these students because they were struggling with remaining on task. The situation can also be extremely difficult for teachers to deal with. I think that this book can provide teachers with the tips they need to deal with students that have ADD in their classroom.

[Report comment](#)

Posted By [Lauren Palmiere](#) | Monday, April 04, 2011 10:54:53 PM

I have heard many conflicting views on ADD/ADHD and this book seems to be a pretty solid one to get information from. I agree with Lynde(#15) on that I believe kids' behaviors are much too easily diagnosed as ADD. The statistics of a 700% increase within the past 21 years accurately depicts that. As a society we are too willing to take the easy, fast route even when we are given the proper one. These statistics combined with the recent blog of 15 minute psyc sessions show how we as a society do not spend the necessary time when determining a person's health and life and would much rather prescribe some medicine and be done with it. I am certain some children may truly benefit from the medication, but it should be under very necessary circumstances. What we do need to do is study the child's environment, see what reasons there may be for their behavior, and like I said only under very necessary circumstances should medication be prescribed. Even then, the medicine should be temporary until we find the true reason for the behavior.

48. In response to the presence of ADD/ADHD with anxiety, depression, substance abuse, borderline states, and family problems: I believe that inability to focus is more of a symptom than a combined disorder. Disorders/problems such as the ones listed take up so much emotional, spiritual, psychological, and physical energy that it makes it hard to live a "normal" life. If one cannot function normally than how can we expect them to focus on issues that are unimportant/trivial compared to the issues they already have to handle. The brain, body and mind can only take so much, so if these parts are so focused on handling the bigger problems, what looks like ADD/ADHD may come about.

As you can tell, I am very skeptical about the disorder on a whole. I think until a diagnosis of what the disorder actually is, we shouldn't be classifying children, especially so many children with having the disorder.

[Report comment](#)

Posted By [Janice Feng](#) | Monday, April 04, 2011 11:18:24 PM

As a future educator, I feel that it is important that teachers carefully understand all aspects of different learning disabilities besides the common conceptions associated with them. Attention Deficit Disorder is a learning disability that I have always particularly been interested in. As I have first hand experience with ADD, I have many strong opinions and feelings regarding this learning disability. ADD affects a person not only in school and in the workplace but also it can affect them in everyday life. Often times people with ADD, are mistaken for incapable, lazy, or irresponsible individuals and are therefore sometimes treated that way. Management of ADD depends on the severity of the case, and not all people who have ADD should be treated the same way. I would be interested to see some of the management techniques this book offers. Children with ADD should focus on learning skills that will help them cope and move forward with their disability throughout the rest of their lives. Educators should remember that just because students with ADD have a different way of thinking and learning, it does not mean that their way of thinking and learning is necessarily inferior or useless. I also think it is important that students with learning disabilities discover what their own unique way learning is. It may sound weird but I did not truly learn how to learn, until the end of high school or beginning of college.

49. I feel it is important for educators and doctors to convey that being diagnosed with ADD is not like receiving a death sentence. I think that people focus too much on the "disability" of learning disorders and do not acknowledge abilities of people with learning disorders. Growing up, I felt as though my learning disorder gave me a huge label that allowed teachers, friends, doctors, and even my parents to make up their own expectations about what I am capable of learning and achieving. Teachers should help students focus on the positive aspects of their learning style and at the same time, help students develop ways to cope and manage the negative aspects that ADD brings. I stumbled across a website that I once found about ADD. This website might sugarcoat Attention Deficit Disorder and portray it as not a serious disorder, but I thought it was interesting the way it depicts this learning disability in a positive light.

<http://www.stumbleupon.com/su/1gbaZU/www.borntoexplore.org/addquo%7E1.htm>

[Report comment](#)

Posted By [arowley](#) | Tuesday, April 05, 2011 12:56:39 PM

I would really love to read this book. I know a lot of people diagnosed with ADD and it would be interesting to see what this book has to say about it. A lot of my classes have mentioned that ADD is more common amongst boys than girls, however that may just be determined as the book has mentioned, from under diagnosis of girls and over diagnosis of boys.
While I was observing a fourth grade class, the teacher mentioned to me that she believed one girl, although not previously diagnosed, may have ADD and was to get testing soon. The student's was continuously not paying attention to what was going on in the class and constantly confused. She seemed very self-conscious and depended a lot on the teacher to guide her through class.

50. I think it would be beneficial for people to read this book to learn how to best handle ADD. I found it interesting that the book mentioned to "Recharge your batteries. Related to number 30, most adults with ADD need, on a daily basis some time to waste without feeling guilty about it. One guilt-free way to conceptualize it is to call it time to recharge your batteries. Take a nap, watch TV, meditate. Something calm, restful, at ease." (p. 250). Friends of mine who are diagnosed with ADD often times just need to relax before starting work and that often helps them to then focus.

[Report comment](#)

Posted By [Nicole Weir](#) | Tuesday, April 05, 2011 01:02:09 PM

The most important thing is it being "acknowledges, diagnosed, and talked about." It is such a common disorder, I think almost everyone knows someone with ADD. It is most important for the person with the diagnosis to know that there are ways they themselves can cope with it - little things that can do, things they need to know about themselves, and they need to know its not a bad thing. They see things from a different perspective, and many good things can come from that. I was diagnosed with ADHD when I was 7 and the psychologist that gave me the tests and spoke with my mom when it was all done and over with talked about how she

thought patients with ADHD were going to be the people who found cures for diseases because they think so differently from everyone.

51. Regarding "recharging your batteries." If a person with ADD knows this about themselves then they will be able to take some "down time" and not feel guilty about it and not let others make them feel guilty about it. They will plan their schedule allowing for time each day to recharge and know that they will always need it and plan accordingly. I believe it's so important for parents, teachers, and close friends and significant others to understand about ADD in order to interact.

I believe ADD is present at birth. My mom has constantly told me how she noticed the inability for me to be still when I was just an infant, immediately, and still now.

I think small environments magnify the problem. Especially as children, being confined was always awful for me. They need lots of room to run around and wear themselves out, get the energy out.

This sounds like a very useful book for anyone whose life is affected by ADD, either by having it themselves, or living with or in a relationship with someone who has it.

[Report comment](#)

Posted By [jackie puccino](#) | Tuesday, April 05, 2011 10:22:00 PM

52. After reading this blog, my 12-year-old cousin, Devin, immediately came to mind. About 7 years ago, when his parents were going through a divorce, Devin was often overlooked and not paid enough attention to in these crucial years of his childhood. In order to keep him occupied, his parents would simply set him up in front of the TV with his video games which he played for hours on end. He became addicted to the games and whenever I would come over to see him it would be almost impossible to get him away from the TV to come outside and swim in the pool on a hot summer day. When he started school, he was diagnosed with ADD which completely made sense based on his demeanor. As a result, Devin did not progress at the same rate as his classmates and often needed help staying focused in school.

Based on what I know about my cousin, I personally do not believe that ADD is inherited through one's genes. Rather I feel that it is an acquired disorder based on one's environment. If Devin had been paid more attention to as a young child I can almost guarantee that he would not be at the level he is today and it is possible that he would not have ADD at all. I feel like there are any different environmental factors which can cause a person to develop ADD and it does not depend upon one's genes.

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Posted By [Shannon McKenna](#) | Wednesday, April 06, 2011 04:48:44 PM

I for one am also shocked by your thought that ADD could be under diagnosed in girls and adults. I was a big believer that many children of my generation and until recent that all children were over diagnosed. I have to agree with Alyssa when she references "Generation Rx" saying that there is no universally accepted method of diagnosis. One of my housemates was diagnosed as a young child with ADD/ADHD and was put on medication and as he got older the doses got to be too much for him where he got to the point where he needed to go cold turkey off the drugs. The medication he was put on actually stunted his body's growth and development. Now that he is off the medications, he truly seems no different and he said the only difference is it's hard to concentrate on school work, while he has no problem focusing on other projects or activities.

53. I've always been against the idea of ADD and ADHD in younger children and even many teenagers. While I do not deny that it does exist I believe as a society we over diagnose the general population while not taking a look at who that person really is. Like everything else in our society we just throw the easy fix at the problem the person has and instead of evaluating potential we throw medication their way. I'm sorry if I sound bias and strongly against these drugs but to be frank, I am. I believe there are many different strategies on dealing with ADD and ADHD and medication shouldn't be the first route we take in treatment.

[Report comment](#)

Posted By [Ryan Mead](#) | Wednesday, April 06, 2011 06:30:02 PM

54. So, what is it like to have ADD? I found an article that explains how an individual with ADD feels everyday: <http://www.add.orgsite/News2?page=NewsArticle&id=5271>. The entire article, while explaining how an individual with ADD feels, is written in a manner that portrays this very feeling. It is jumpy, and scattered, with random thoughts thrown here and there. It made me feel anxious while reading it. For example, Hollowell writes, "That's part of the deal. I change channels a lot. And radio stations. Drives my wife nuts..." The paragraph that I feel best summed up the day of an individual with ADD was this one: *In other ways it's like being super-charged all the time. You get one idea and you have to act on it, and then, what do you know, but you've got another idea before you've finished up with the first one, and so you go for that one, but of course a third idea intercepts the second, and you just have to follow that one, and pretty soon people are calling you disorganized and impulsive and all sorts of impolite words that miss the point completely. Because you're trying really hard. It's just that you have all these invisible vectors pulling you this way and that which makes it really hard to stay on task.*

Imagine what it must be like to so desperately want to focus on one thing at a time, but there are constant disruptions that make you unable to; how frustrating this must be.

Last summer, I was a counselor at a day camp and worked with a 6-year-old boy with ADHD. However, I was not his counselor. I was the counselor for another group, but in the same grade. Even though I was not his counselor I say I worked with him because it was a team effort everyday to keep this child on task, and with his group. All the counselors of the grade always had an eye on him because it only took one minute of not watching him for him to be off somewhere else, distracted by or doing something he found more interesting, or demanding of his attention. At camp, it is not crucial to keep on schedule. Yes, we have a schedule to follow, but it doesn't matter that much if you are five minutes late for swim, or dance. However, I can only imagine what this child's teacher at school must do to keep him focused on his work. Because I will be a teacher some day, and will most likely have a child, or children, in my class with ADD or ADHD, I hope to find this book, and specifically read the section on classroom management so that I will know how to best educate my students.

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Posted By [Stacey Alley](#) | Wednesday, April 06, 2011 08:47:11 PM

I feel that this book sounds like an interesting read since my future as a teacher will inevitably involve educating a child who has ADD or ADHD. Management tips are vital for dealing with this challenge with patience and success. In order to help students facing these challenges during learning, a teacher should understand and implement methods to in manage ADD or ADHD. This will assist many students to achieve successful learning to the best of their abilities.

55. I also feel that the discussions of the derivative of these learning disorders can be interpreted in many different ways. Identifying the causes of these disorders can be confusing and produce many answers. I personally feel that it can be a combination of many answers including genetics, our society, our environment, neurological problems and so on. I personally do not suffer from these disorders, but I feel that everyone can identify and relate with a time that we experience "ADD like qualities" and have trouble concentrating. The challenges that students who face these feelings constantly and therefore are obstructed from learning to their true abilities and undermine their potential achievement inspire me to delve deeper into this topic in order to become an effective teacher in my future.

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Posted By [Danielle Molins](#) | Wednesday, April 06, 2011 11:02:25 PM

- I have always thought that ADD was a very tricky disability to diagnose. It is one that too many over-excited boys are diagnosed with and not enough inattentive, "daydreamer" girls are diagnosed with. According to the article I found, ADD symptoms present themselves differently between boys and girls. In boys, it's usually the typical jumpy, fidgety, hyperactive boys that get the most attention and are most often referred for further investigation for ADD. For girls, symptoms are usually milder and thus harder to pinpoint. They can include difficulty maintaining focus, disorganization or messiness, forgetfulness, daydreaming, carelessness, slow processing of information and hyper-talkativeness. However, the difficulty with some of these symptoms is that many people just assume they're part of a girls' nature. Things like daydreaming and the ability to be chatty are very common among girls in comparison to boys, and yet they can be symptoms as well.
56. It is also difficult to diagnose because it seems as though many people today just assume they have ADD no matter what the situation. If they're having an off day, trouble focusing or an inability to sit still, they quite cavalierly say, "Oh I probably have ADD or something and that's why I can't focus." In reality, it usually has nothing to do with a disability, but some other contributing factor; the person is being exceptionally lazy that day, he or she has had too much caffeine or has been working on the same task too long it has become mundane, or maybe that person just isn't in the best frame of mind to be the most productive. And yet people will go to their doctor with these symptoms they believe themselves to be having and wind up getting medication for something that isn't really a problem. It seems as though there is a very fine line between making the right decision and making the easiest one.

<http://add.about.com/od/childrenandteens/a/girls.htm>

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Posted By [Katie Bianco](#) | Thursday, April 07, 2011 12:18:21 AM

- I thought that it was an interesting comment to add that "those without ADD may find many of the approaches helpful!" The suggestion to "recharge the batteries" is a beneficial tip to all students, not only the ones who have ADHD. There are plenty of days that I feel the need to take a nap to clear my head during the day, just some "me" time helps me from feeling anxious or jittery during my later classes.
57. I am currently doing observations in a special education classroom. The class is made up of children ranging from the ages of seven to ten and with disorders like autism and ADHD. The students are given plenty of opportunities to "recharge their batteries" and there is a significant difference in how much they retain after they have had their break. Upon returning, they tend to focus more than toward the end of their lessons.
- A book with tips such as that previously stated seems to be a useful tool for the future teachers. I may bring it up to the teacher who I am observing.

[Report comment](#)

Posted By [Chelsea Unger](#) | Thursday, April 07, 2011 12:34:17 AM

- Bill (#5) I completely agree with the frustration of overdiagnosis. I knew many children when I was young who claimed they had ADD. There are a few levels of which frustrate me about the problem. First I believe doctors and the pharmaceutical companies profit way too much for prescribing and creating drugs for problems that don't even need medications, like yellow toe nails, irritated legs, acne etc.
58. Second, I believe that many households have two parents who work and don't want to work with the child who may need help focusing, so they medicate them to make their lives easier. Parents also put too much faith in the medical field if the answer sounds easy. Second opinions should be sought.
- Third children are aware of the laziness they will be allowed if they portray a disorder that allows them to pretend it is not their fault for not doing their homework, or wanting to watch television. The television argue is what I think is a great test of actual ADD. If a child can focus on the program they watch and tell someone what happened, it is not ADD, just selective focusing, which being left alone while parents work, and being spoiled because of the parental guilt just exacerbates the situation and the child's awareness of their ability to manipulate the parent.

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Posted By [Angeline Nielsen](#) | Thursday, April 07, 2011 10:48:20 AM

- I agree with you when you said that boys are typically over diagnosed with ADD and girls are under diagnosed. I think that if people see boys being hyper or very active and always wanting to play instead of sit and do school work, people automatically think that they have ADD. However, that is not always the case, most children, with ADD or without, would rather play than sit and learn in class. My younger cousin has ADHD and he is on medication only during the school year, and then when it is summer time, my aunt and uncle take him off of it, because they know that there isn't something that he isn't in class anymore. They don't want him to become reliant on that, and I think that that is a good idea.
59. I also really like how in the book one of the tips was to "recharge your batteries". I think that is a good expression and also a good idea of how to have someone relax. It is important for everyone to take the time in the day to wind down, however, people with ADD or anxiety or anything it could be more helpful and more beneficial for them to take a step back and relax so that they can regain their thoughts and refocus.

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Posted By [Julie Owens](#) | Thursday, April 07, 2011 04:12:50 PM

This book sounds very interesting and I too believe it is important for all those who plan to be involved with education to know a significant amount about ADD. Websites like <http://www.as.wvu.edu/~scidis/add.html> help provide examples and strategies for teaching student with ADD. I think it is also important to discuss the topic of ADD and ADHD medications that are being abused. In the article "Adderall Abuse Growing Among College Students" author Khoi Nguyen describes the rise of this drug use on college

60. campuses. <http://www.drugrehabbranch.com/staff-articles-and-drug-treatment-news/adderall-abuse-growing-among-college-students>

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Posted By [maria martin](#) | Thursday, April 07, 2011 04:39:22 PM

This book definitely sounds like an interesting read. It is encouraging to know that the authors have a great deal of experience in the field of ADD. Often times, people are more expressing their feelings about ADD diagnoses, instead of relaying the facts of the disorder. The fact that the book discusses how the presence of the disorder affects relationships also gives a unique outlook. The approaches on how to manage students with ADD seem to be especially helpful. Through classroom observation, I have observed teachers who do not know how to handle students suffering with ADD. They easily lose their temper, and do not have enough patience with the students. However, instead of focusing on the negative, teachers should put an emphasis on the positives of the child. By reading this book, I believe that teachers could more effectively manage these students and teach them in ways that will get through to them. Parents of children with ADD could most likely find this book helpful as well. Children do a great deal of learning not only in the classroom, but at home too. Anyone who deals with children with ADD on a daily basis would most likely get helpful tips by reading this book.

- 61.

[Report comment](#)

Posted By [Rachel Flaherty](#) | Thursday, April 07, 2011 04:49:04 PM

Maria (# 61) I didn't think of that before about college students. When I hear a child has ADD I think of a 5-16 year old child that is overly hyper and doesn't focus. When I read your post I thought about the reality of college students partaking in drugs to focus on heavy coursework.

Sometimes I see that college students put off work and go out to party, then when the deadline approaches they pull all-nighters to make sure their assignments are done, sometimes with the help of medications that are not perscribed to them, and even street drugs.

- 62.

It is unfortunate how easily drugs are available to people that don't need them, especially ones that the patient can trick the doctor into perscribing. Which goes back to the discussion about doctors perscribing anti-anxiety/depression medications without really analyzing the potential patient.

[Report comment](#)

Posted By [Angeline Nielsen](#) | Thursday, April 07, 2011 05:59:20 PM

I think this book would be very interesting to read, and I think you make a very good point in regards to girls being underdiagnosed and boys being overdiagnosed.

http://www.science20.com/science_motherhood/girls_add_why_it_so_often_missed

63. This article talks about girls with ADD and why it is so often missed. Most people think that ADD is actually just a boy's disease, or think that it occurs twice as often in boys as in girls. But in actuality, even though more boys are diagnosed, ADD is just as prevalent as girls.

[Report comment](#)

Posted By [Samantha Rooney](#) | Thursday, April 07, 2011 07:23:02 PM

Attention Deficit Disorder has always been fascinating to me. As a student studying special education, I have learned a lot about the disorder in many of my classes. It is so prevalent in our society, which is one of the reasons I am so intrigued by it. I also find the controversy surrounding the disorder very interesting. Many people believe that this diagnosis is given out too frequently and that any hyperactive child that misbehaves will be labeled as having ADD. Others believe that it may even be under diagnosed.

64. As a future teacher, I would like to learn more about the disorder and ways to manage people with ADD. I have never heard of the book "Driven to Distraction", but it something that I would definitely be interested in. the section on with 50 classroom management tips particularly appeals to me. I have not learned much in this area and would be really interested to find out more.

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Posted By [Dana Shea](#) | Thursday, April 07, 2011 07:36:47 PM

As a future teacher and someone with a great deal of experience working with younger children, I have found this article to be interesting. I often have wondered about the over diagnosis of boys as having Attention Deficit Disorder, and wonder if it has to do with the common idea that young boys tend to have a great deal of energy, which can often lead to distraction. In past classes, I have learned about the misdiagnosis of young boys and girls with ADD or ADHD, and it resulting negatively because of the medication which is prescribed. Although this type of medication benefits many students, I often wonder if all the children who are given it truly need it. From observing multiple children, both with and without ADD, throughout many years, I have found that there are varying degrees to which the young students seem to have the disorder. Based on the short summary which I read on *Driven to Distraction*, I became interested in the two myths which the authors discuss, which involve the idea that ADD may only be found in children and that ADD is linked to limited intelligence or limited self-discipline. I have found that this idea of over diagnosis may actually be a problem, and students may actually grow out of the disorder eventually, after years of schooling. I feel, based on information I have learned in read, that in recent years, doctors have been diagnosing children who act out with ADD, without actually finding the greater reason behind the problem.

- 65.

[Report comment](#)

Posted By [Janeen Featherston](#) | Thursday, April 07, 2011 09:37:24 PM

66. Talk of ADD and ADHD are very common nowadays due to the amount of children getting diagnosed with it. I am very knowledgeable about prescribing children medication and have strong view points on them because I have a close family member who uses prescription pills. The fact that many boys are over diagnosed with ADD scares me because that means there are a majority of young boys who are taking prescription medications when it is not necessary. Medication is not something to fool around with especially because long term effects of medication are not well known. It seems as if just giving people medication has become a quick fix when in reality I believe medication should be the last option. Like previously mentioned, getting prescribed medication such as Adderall has become all the hype on college campuses. Students are using this medicine so they can focus and stay up all night doing their homework instead of pre planning and doing it in advance. I have a friend who said her school prescribes Adderall like it is candy. This just proves that ADD is over diagnosed because once a student gets to college a condition like ADD should have already been recognized and diagnosed. Allyse (#23) makes some excellent points about society jumping the gun and saying that a child is showing symptoms of ADD/ADHD. Before automatically giving children medication to fix the problem psychologist should evaluate their patients in much more depth. My cousin who is a boy was diagnosed with ADHD and taking medication to treat it for a few years when my aunt finally took him to a new doctor because she saw no improvement. It was found that he was misdiagnosed and he actually has Tourettes Syndrome. In doing my own research I found that it is common for people who have depression, anxiety, specific learning disabilities, early onset bi polar disorder or Tourettes Syndrome to be initially diagnosed with ADD/ADHD. This is for the exact reason that the doctor does not study the patient in dept and automatically assumes the inattentiveness, impulsiveness and over activeness is a result of ADD/ADHD.

[Report comment](#)

Posted By [Lauren Cirillo](#) | Thursday, April 07, 2011 10:34:21 PM

67. ADHD causes people to have a reduced attention span, meaning they are very easily distracted. A person that suffers from ADHD finds it hard to control their behavior due to impulsivity. There are many theories as to what causes ADHD. Some experts say it is due to an imbalance of chemicals that transmit messages to the brain and partly due to the areas of the brain that affect behavior in the person with ADHD are not properly working. Recent studies have shown that 80-90% of the risk for ADHD is genetic. Who knows what exactly causes ADHD in a person though? Brain research shows a variety of different problems in ADHD, with individuals showing their own pattern of behavior— perhaps explaining why there is no set cause or any known cure for the disorder.
- Being diagnosed with ADHD means the child must have symptoms such as the ones previously mentioned and medication can be taken to help the child concentrate and be less troublesome. Of course, age restrictions and severity of the disorder are considered. An example of a prescribed drug is *Ritalin*, which improves a child's capability to focus. It helps some children more than others and, like most drugs, has potential side effects. ADHD can be a life long condition. However, a child having ADHD is not the end of the world. A child with ADHD can be charismatic, dynamic, enthusiastic and creative— they are capable of anything just like any other child.

[Report comment](#)

Posted By [Amna Mahmood](#) | Thursday, April 07, 2011 11:04:14 PM

68. One question raised in the above article that particularly interested me was the question of ADHD being genetic. This is a topic that I've spent many hours researching for various papers for my special education major. It is of personal interest to me, because many of the males in my family have been diagnose with ADHD. My youngest female cousin, however, exhibits the symptoms associated with female ADHD and the majority of the people around her attribute it to being chatty and curious. Her behavior is controlled even at her most hyper moments which is vastly different from her male peers who are at time virtually uncontrollable. This leads me to believe that there is a link between ADHD and genetics. Current research indicates that it is a polygenetic disorder linked to dopamine levels. I can't help but wonder if like several other genetically linked disorder/diseases if it is something that particularly affects male chromosomes much like color-blindness. In this case, it would explain for the vast differences between male diagnoses and female diagnoses. This is not to say that females should go unmonitored for ADHD. I believe that reading the book mentioned in the article above would be beneficial for anyone looking to work with children/young adults. It would enable them to understand the complexities of the condition and to rethink misdiagnosing children and to be cognicent of females who exhibit ADHD symptoms.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1749-6632.2001.tb05773.x/full>

[Report comment](#)

Posted By [Britt Peters](#) | Thursday, April 07, 2011 11:08:12 PM

69. ADD diagnosis continues to be a questionable topic. Many feel as though it is being over diagnosed and students are now relying on aderol to stay attentive while doing work or studying for exams. It is extremely important for teachers to keep these students on track throughout the school day. I'm sure it is difficult to decipher what students truly suffer from the disorder and who could get away with not taking medication, however, all teachers should be constructing their classroom the same for everybody even if slight adjustments are necessary. I enjoyed when you stated, "how to discern the presence of ADD with anxiety, depression, substance abuse, borderline states, and family problems. Are these different manifestations of ADD + another condition or are there many different and unique disorders?" I personally believe there are many different and unique disorders because everybody is so different that it is extremely rare for somebody to have the exact same condition even if it is ADD which can be more of a general diagnosis, some may be worse than others and therefore may be treated with a higher/lower dosage of medicine. Learning how to deal with students with a disorder such as ADD is a large responsibility for teachers, but in order to keep an orderly classroom, they need to determine the skills necessary for him/her to succeed from the very beginning.

[Report comment](#)

Posted By [Megan Walters](#) | Thursday, April 07, 2011 11:38:25 PM

I often hear common, non-educating people state that ADD is over diagnosed. If asked to justify why they feel this way however, they claim "kids are just lazy", when in turn they are quite possibly describing themselves. It's possibly that this is a glimpse of jealousy, that certain kids are allowed to swallow a pill each day that will make it easy for them to do work (perhaps why Adderall is growing in popularity). On the other hand, the use of these drugs is most often, to simply level the playing field. The part that concerned me after reading the article however is that I've never considered the amount of people that probably go undiagnosed. If I personally found out at age nineteen that I had ADD, and that I could have had an easier time in school for the past fourteen years, I would be more than

70. frustrated. I think it is a fine balance between being careful to over diagnose, while being able to pick up on true signs of ADD, which is the job of a good teacher. As far as the origins, I do believe it is likely a neurological disease, as 25% of children diagnosed with ADD have relatives with the same disorder (Serendip's). There are numerous other theories however, from the belief that ADD stems from brain damage in the whom, to contributing it to our "refined sugar" diet. I believe that while we do not currently have any completely accurate evidence, we continue to study, (diagnose), and learn more about this diagnosis.

<http://serendip.brynmawr.edu/exchange/node/449>

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Posted By [DDiMartino](#) | Friday, April 08, 2011 02:13:39 AM

71. Referring to the article that Samantha Rooney cited, It is very interesting that when girls have ADD they are described as being daydreamers because they often are too confused to even get anything started. Boys are completely different and can be known to bounce off the walls. Some other differences include girls being rather shy because they don't like negative reactions but boys continue with inappropriate behavior even after they get caught. This makes sense why more boys are diagnosed with ADD/ADHD. Boys posses more qualities that disrupt the classroom where as girls seem to keep to themselves. This makes boys get noticed quicker and teachers or parents obviously want to get this disrupted behavior fixed immediately. Girls may get looked past and their behavior may be seen as a lack of motivation.

http://www.science20.com/science_motherhood/girls_add_why_it_so_often_missed

[Report comment](#)

Posted By [Lauren Cirillo](#) | Friday, April 08, 2011 02:16:38 AM

Let me start by thanking everyone who posted for their expressed interest in this topic. It has always been a topic of concern for me, as one of my closest friends has been struggling with Attention Deficit Hyperactivity Disorder for years.

Ever since she was little, everything seemed to be more difficult for her. She could never concentrate. She would have random temper tantrums in class when frustrated. She was seemingly unable to control her emotions. Because of these issues, it was more difficult for her to both excel academically and fit in socially.

Her uncontrollable behavior made her the subject of different forms of bullying by peers. Despite attending fairly accepting elementary and high schools, she was secretly ridiculed by people who did not understand her. I was always there to help and protect her, but I could not change her or how the world viewed her.

She was on medication to help her regulate her ADHD throughout childhood, but stopped by the end of high school. Her parents had opposing viewpoints towards the use of prescription drugs, a conflict which still lingers between them today.

72. I know there is a never-ending debate about whether medication should be used to treat ADHD and related disorders. Whatever your viewpoint, I ask that you remain considerate of people with these disorders. Many of you mentioned that you plan on becoming future teachers. As educators, please strive to educate others on this prevalent issue and be personally accepting of those individuals who struggle this way. It will be easy to become frustrated and place blame on those who make classroom management difficult. Try to look past that, as your students with these disorders could be the brightest and most beautiful people in your class.

As a side note, thank you very much for the book recommendation. I am happy to hear that so many people are interested in reading it and learning more about these disorders.

- Amanda P.

[Report comment](#)

Posted By [Amanda P.](#) | Friday, April 08, 2011 02:47:00 AM

First off, this book sounds very interesting and I am going to look more into it, especially the guidelines you mentioned that may be helpful to those who do not or have not been diagnosed with ADD.

Secondly, I have a friend who has been diagnosed with ADD so when I read this article, i thought it would be interesting to talk with her about it so i get it from a first hand source. She is a side of a twin. She told me a story that occurred before she was diagnosed. While growing up, she always did better than her brother academically. Her mother said she thought her son may have had a learning disability which she later found out to be ADD. He had a hard time focusing and concentration so working under time constraints (timed tests) was always one of his weaknesses. After he was diagnosed, the psychologist asked of her progression but her mother brushed it off. Her mother said she never had a problem with her daughter even after the doctor explained the strong genetic relationship. Her mother continued to brush it off.

73. In her freshman year of college, my friend realized that she wasnt doing well as her friends even though they were taking the same classes. She started struggling with tests and realized that she was possibly experiencing the same thing that her brother was experiencing. She spoke to her mother about it and a counselor from special services and was diagnosed in the beginning of her sophomore year in college. She might now have to take an extra year to make up for the classes that she failed in her freshmane year.

Her stroy taught me alot in relation to this blog. One thing it confirmed was the strong genetic trait of ADD. As kayna mentioned, ADD is almost as genetic as height! Secondly, it draws me to the conclusion that boys could be diagnosed more due to a social issue. In this case, it seemed as if my friends mother didnt want her daughter to be diagnosed but was fine with her son being diagnosed. Another thing i learned from her story was that ADD can take a long period of time to be diagnosed, not because it is not a active trait but becuae people tend to brush it off anfd place their lack of concentration or focus on external factors

[Report comment](#)

Posted By [CBenjamin](#) | Friday, April 08, 2011 10:38:28 AM

Being as I have never read the book, from your description, it sounds like a very helpful book for those who have ADD or even the people around those who have ADD. ADD can be a very stressful disorder not only for people who have it, but also for their teachers and parents. We as teachers-to-be have to be patient and careful by how we react to the students who do have ADD. We cannot get easily frustrated with those students, because sometimes they cannot help how they act. We simply have to learn the best practices in working with these students so that they are still learning despite their condition.

74. One point that I found very interesting in your article was the idea that boys may be over diagnosed with ADD, while girls are under diagnosed. I have heard this said before in one of my classes where we were talking about ADD. Some people think that just because young boys are usually more outgoing and outspoken compared to girls who are reserved and quiet, that they must have ADD, because they cannot sit in their seat for long. This is a very scary situation, and it clearly shows that we need to run more studies and research on ADD. Children should not be given medication for ADD if they might not have it.

[Report comment](#)

Posted By [Brandy Gang](#) | Wednesday, April 13, 2011 05:18:59 PM

This book sounds interesting to me in that it focusses on the science and cognitive aspects of ADHD without a debate on opinions on whether or not it exists. It is interesting to me that the book brought up the possible overdiagnosis in boys and the possible underdiagnosis in girls and adults. There are three types of ADHD: innattentive type, hyperactive/impulsive type, and combination type. In a child development class that I took at Marist College, I learned a few reasonings for the skewed diagnoses. The hyperactive/impulsive and combination types are more common in boys, and are obviously easier to see as the symptoms are hard to ignore in a classroom setting especially. Conversely, the innattentive type is more common in girls, and is much easier to miss. I feel that teachers could do a few things to change the nature of mistakes in diagnosis of ADHD.

75. I personally feel that before suggesting that children may have hyperactive/impulsive or combination type ADHD to parents, we should look at the lifestyle of the child. Sometimes the simple routines the child has can make all the difference in performance in school. Intervention in that respect should always be tried before recommending a child should go on medication in my opinion. Also, teachers should be more aware of the symptoms in the DSM of the innattentive type ADHD, so that students who are struggling because of something they cannot change do not slip through the cracks.

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Posted By [Lauren Orichio](#) | Saturday, April 16, 2011 05:52:25 PM

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