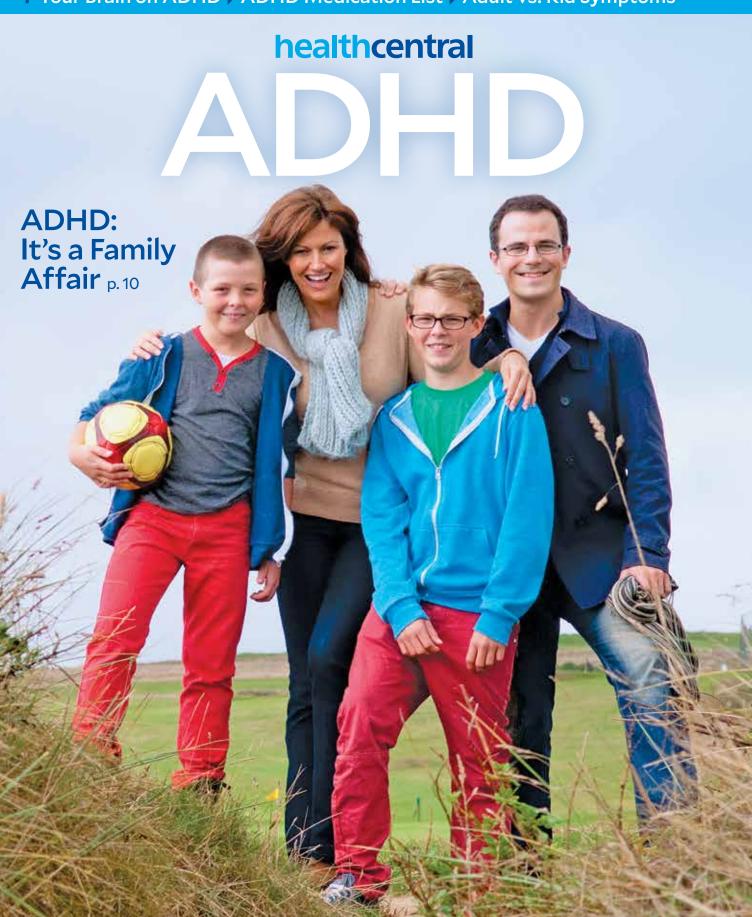
3 Experts, 10 Treatment Tips p.12

+ Your Brain on ADHD ▶ ADHD Medication List ▶ Adult vs. Kid Symptoms



WELCOME to HealthCentral's guide to ADHD. In these pages, you'll find research news, insights from parents and experts, and tips for dealing with ADHD every day.

For more information, go to healthcentral.com/ADHDGuide.



ADHD's Happy Birthday 'Gift'?

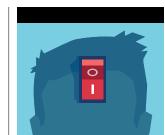
Children with ADHD generally develop more slowly than their peers, so a 10-year-old with ADHD may have the focus and emotional control of a child two years younger. But what if a child is *actually younger* than their school peers?

A study published in 2018 in *The New England Journal of Medicine* found that age differences among classmates can lead to misdiagnoses of ADHD in younger students. Many U.S. states require kids to have a pre-September 1 birthday to start kindergarten the following year, so those with August birthdays can be as much as a year younger than their oldest classmates. Data on more than 400,000 children showed that kids with August birthdays in states with a September 1 cutoff had 34 percent higher rates of ADHD diagnosis than those born in September.

This Is Your Brain on ADHD

One of the most persistent myths about ADHD is that it's a behavioral issue—that kids with ADHD are simply acting out. But neuroimaging is countering that myth, by demonstrating physiological differences in brain structure and function in people with ADHD. While brain scans alone shouldn't be used to diagnose ADHD-symptom assessment is still key—imaging shows that it has physiological connections. A 2017 Dutch study, published in in The Lancet Psychiatry looked at more than 3,200 MRIs and identified slight differences in volume in five brain areas in people with ADHD. The researchers said the findings suggest that delays in the development of several brain regions are characteristic of ADHD.





A LITTLE ZAP TO THE FOREHEAD

In April 2019, the FDA approved the first medical device for childhood ADHD. The Monarch external trigeminal nerve stimulation (eTNS) system delivers mild electrical impulses through a patch worn on your forehead while you sleep, which seems to boost activity in parts of the brain that regulate attention, emotion, and behavior.

The approval was based on a UCLA study of 62 children that found significant symptom improvement after four weeks of use. Michael Manos, PhD, clinical director of Cleveland Clinic's ADHD Center for Evaluation and Treatment, commented on the clinic's website after the approval, "The short story is it works, but not quite as well as meds." Dr. Manos also noted that it's nice to have alternatives, especially for kids who can't tolerate meds. The device is for kids 7 to 12 who are not taking ADHD medications.

ADHD affects more than 4 percent of U.S. adults, says the National Institute of Mental Health, many undiagnosed. Untreated ADHD can lead to anxiety, depression, and substance abuse. A 2018 study in Therapeutic Advances in Psychopharmacology found that potential consequences of untreated ADHD include poor quality of life, relationship troubles, and employment struggles, contributing to mental health issues. Correctly identifying ADHD as the root cause is key, as well as treating adult ADHD with meds and therapy.



ADHD IN KIDS VS. ADULTS

The main symptoms of ADHD are INATTENTION, HYPERACTIVITY, and IMPULSIVENESS, but they can look quite different in a child versus an adult. Here are some examples.

HYPERACTIVITY

CHILDREN

- In constant motion
- Run and climb excessively
- Constantly fidget or squirm
 Get up, drop pencils, cause classroom distractions
- Can't sit still
- ▶ Talk excessively

ADULTS

- In constant motion, tapping feet, doodling, fidgeting
- Easily bored
- Move from job to job
- Leave projects uncompleted
- Restless
- ▶ Have trouble sitting still
- Like active, risky, fast paced activities and jobs

INATTENTION

CHILDREN • Easily distracted

- Make careless mistakes in schoolwork
- Don't pay attention to details
- Short attention span for age
- Avoid homework or schoolworkSeem to not listen when spoken to
- Don't complete projects or chores
- Move from activity to activity
- Disorganized
- Lose things, forgetful

ADULTS

- Lose or misplace items (e.g., keys, phone numbers, important papers)
- Forgetful about routine tasks (e.g., picking up the kids)
- Leave tasks uncompleted
- Easily distracted, move from task to task
- Difficulty following conversations
- Lack self-motivation
- Lose track of time, poor time management
- Disorganized, problems prioritizing
- Lack of focus
- ▶ Difficulty multitasking

IMPULSIVENESS

CHILDREN

- Appear rude or have behavioral problems
- ▶ Blurt out comments in conversations or in school
- ▶ Have problems waiting their turn
- Interrupt others, jump into games other kids are playing
- Act without thinking about risk (e.g., jumping from the top of a slide or running into the street)

ADULTS

- Spend money impulsively, wreaking havoc on household budgets
- Drive fast, gamble, or have risky sex
- Interrupt others in conversation
- Blurt out offensive or hurtful comments without thinking
- ▶ Low frustration tolerance
- Frequent mood swings
- ▶ Hot temper
- Trouble coping with stress
- Trouble coping with stress
- Unemployment
- Financial problems
- > Trouble with the law
- ▶ Alcohol or other substance misuse



For more info, go to **HealthCentral.com/ADHDGuide**.



Parenting a child with ADHD can be a bumpy road. Here are 10 expert tips to help smooth out the rough spots.

ttention-deficit hyperactivity disorder (ADHD) looks distinctly different in every child (and adult) who has it—which can make it a puzzle for professionals and parents alike. While it's associated with a set of core symptoms—inattention, distractibility, forgetfulness, hyperactivity, and poor impulse control—some people struggle primarily with the inability to pay attention while others deal with hyperactivity.

An estimated 9.4 percent of U.S. kids, ages 2 to 17, have been diagnosed with ADHD, according to the Centers for Disease Control and Prevention, and many others are believed to have it but are undiagnosed. No one knows precisely what causes ADHD but there is a genetic or hereditary component, so it often runs in families. To receive the diagnosis, a child must have symptoms severe enough to interfere with daily functioning in at least two settings, such as school, home, or social situations.

"Children with this condition have less voluntary control over their attention, their level of activity, and how quickly they make decisions, so parents can become frustrated, impatient, and demoralized," says Richard Gallagher, PhD, an associate professor of child and adolescent psychiatry at NYU Langone Health in New York City. To help out moms and dads, Dr. Gallagher and other pros outlined common challenges and offered problem-solving strategies:

Mornings are hell—you can't get your child up and out the door in a timely fashion.

Create a schedule with a checklist of tasks your child is expected to complete in the a.m.—getting dressed, making their bed, eating breakfast, and brushing their teeth, suggests Sanford Newmark, MD, a clinical professor of pediatrics and director of clinical programs at the Osher Center for Integrative Medicine at the Univer-

sity of California San Francisco. "Have your child check things off as they're completed and reward them for being cooperative." The night before, make sure your child's pack is ready to go, with homework inside.

It's often a struggle to get your son or daughter to do what you ask.

Get your child's attention, using eye contact, and make your requests clear and short, Gallagher advises. Then, ask them to repeat what you've said. When they follow through on a request, praise them for a job well done; positive reinforcement can inspire a repeat performance.

At school, your child is fidgety and restless and has trouble sitting still.

Many school systems offer accommodations, so find out if yours does. "Kids with ADHD may do their work better if they're allowed to move a little," Dr. Newmark says. Ask teachers if your child can use a wobble chair or get up and walk to the back of the room occasionally to release energy without disturbing other students.

■ Play dates don't always go well because your child has trouble taking turns

Coach them about how to make sure other kids have their fair share of time doing the activity, Gallagher suggests. If your child tends to interrupt a lot, practice at home: Set a goal of waiting until a family member is finished talking at the dinner table, for example, and praise your child when he does it. "The idea is to catch them being good," Gallagher says. Similarly, remind them to respect other people's personal space—by standing an arm's length away and asking permission to give someone a hug, for example. Also, limit play sessions to 90 minutes for preschoolers and two hours for school-age kids.

Your child's room is a disaster zone and you can't get them to clean it up.

Break down what needs to be done in a step-by-step fashion, ad-

vises Karyn Erkfritz-Gay, PhD, a child and adolescent psychologist and manager of behavioral health programs at the Northwestern Medicine Ben Gordon Center in Dekalb, Illinois. She suggests they start by putting dirty clothes in the hamper, then making the bed, putting books and toys away, and so on. Make it clear where school materials should go, perhaps with a labeling system for desk drawers. Since cleaning their room isn't inherently gratifying for most kids, develop a reward system, such as earning extra screen time if they do it regularly, says Erkfritz-Gay. "Remember: Parents are the gatekeepers to a lot of things kids want."

■ Getting your kid to do homework and turn it in—is an ongoing battle.

Carefully select a time for homework, Gallagher says. While your son or daughter may need a break right after school, if they're taking a long-acting ADHD medicine, you'll want them to do homework before the effects wear off. At the chosen time, have your child sit down and get it done, then praise them for completing it and putting it into their backpack to turn in the next day, says Gallagher. Ask teachers where homework gets turned in—and remind your child of the protocol.

Your son or daugher often misplaces important items, which leads to a mad scramble to find them.

Set up a system so that everything has a place, with specific spots for your older child's keys, wallet, and cell phone, for example. Designate a special place for backpacks, sports equipment, and shoes—cubbies, a mudroom, or another key spot, Erkfritz-Gay says. Encourage kids early to put items where they belong so they can find them easily.

Your child's eating habits are erratic because of ADHD medication.

ADHD meds can affect a child's appetite for lunch, so make sure they have a good breakfast and a healthy dinner (and an afternoon snack if they're hungry). "Kids who are taking ADHD meds may not get hungry until 7 or 8 p.m.—feed them when they're hungry and let them eat as much as they want," Dr. Newmark says. All meals should contain plenty of protein, fiber to slow digestion, and lots of fruits and vegetables. "Avoid processed carbs or sugar because these can cause blood sugar spikes, then dramatic drops, that make ADHD symptoms worse," he says.

Your child sometimes has emotional meltdowns and can't calm down.

Don't yell or let your child get away with bad behavior. Instead, suggest that they take a private break to cool down, and then you can talk. Once they settle, give them positive feedback for calming down, suggests Dr. Newmark, then redirect their attention, perhaps by saying, "Good job calming down. Let's go do X." To help with emotion regulation, encourage your kids to recognize and label their emotions and give them tips for how to handle them constructively, Gallagher says. If they're really frustrated, you might say, It's okay if you growl but not if you curse or throw things.

You can't get your child to go to bed at a reasonable hour.

Rule No. 1 is setting a consistent bedtime, based on how much sleep your child needs. Make sure their bedroom is quiet, calm, dimly lit, and conducive to getting rest. "Do not have a TV in the room or access to computers, tablets, or phones at bedtime," Gallagher advises. Work with them to set a digital curfew 30 to 60 minutes before bedtime, and encourage your child to engage in gentle activities like taking a warm bath and reading a book before lights out.

For more information on ADHD, go to **HealthCentral.com/ADHDGuide**.



More than other kids, those with ADHD may become super focused on their smart devices.

ids with attention-deficit hyperactivity disorder are often hyper-focused on technology. If you're a parent of such a child, you know it's a myth that kids with ADHD can't focus. Their attention can be directed quite intensely onto a smartphone or tablet or apps displaying something they find fascinating: games, texts, the internet, social media. Mobile devices provide an endless supply of feedback and enticements that keep the pleasure center of the brain very happy, which can make it a real struggle to pull a child away from their phone or yours.

There is a correlation between having ADHD and high levels of

smartphone use, and the increase in the rate of children diagnosed with the disorder does make you wonder how mobile technology is impacting attention levels in young children and teens. One study found that children who use smartphones may be at increased risk for ADHD, but researchers say it's possible these children may spend more time with their devices because they already have symptoms of ADHD, such as inattention and hyper-focus.

Some kids become engrossed with a particular smartphone game or app and later toss it aside, but kids with ADHD are at higher risk for becoming dependent on a device. This is cause

(Continued on p. 9)



for concern, because research has linked smartphone dependence to anxiety, depression, sleep disturbances, and low self-esteem.

Being overinvolved with a smartphone isn't just about the number of games a child plays or texts they send or their social media posts. Kids with ADHD can become caught in a behavioral loop, mindlessly checking social media or seeking to achieve the next level in a difficult game. Dependence also means the child may become so hyper-focused on their phone, they can't stop. They may become distressed when the battery dies, the phone is out of sight, or they're not allowed to sleep with it at night. To evaluate your son or daughter's dependence on their smartphone or other device, consider the following questions:

Do they:

- Talk about or look for their phone when they're not using it?
- Use their phone for no particular reason?

- Argue with you about their smartphone use?
- Interrupt whatever they're doing when they get an alert on their phone?
- Lose track of how much time they spend using their phone?
- Feel distressed when their phone is off or out of reach?
- Feel unable to reduce their smartphone use?

What You Can Do

The American Academy of Pediatrics recommends that you start young, by discouraging screen use by children yourger than 18 months other than videochatting. For older kids, they encourage you to monitor how much time they spend on their devices and the content they're viewing, and to keep mobile devices out of their bedroom to ensure healthy sleep habits. Here are more action steps for smartphone use in a child with ADHD.

■ Model good phone behavior Make sure to reflect on your own smartphone habits before you create a technology plan with your child or teen. Try designating no-phone spaces in the house (e.g., the kitchen or living room) or at certain times (e.g., mealtimes or bedtimes). These strategies can enhance family time and help everyone feel more in control of their phone use.

- Create alternatives Less phone use won't feel like a punishment if kids and teens have other options. What activities does your child enjoy that don't involve screens? How can you steer your son or daughter in that direction when they seem particularly dependent on their phone? A family bike ride or a local softball game could provide a much-needed break from hyper-focus on a phone.
- **Avoid abstinence** As they progress in school and, eventually, at work, your child will rely increasingly on mobile devices. Abstinence from phone use is not the goal, because it's not sustainable for the future. Showing them how to use smartphones thoughtfully and monitor their use will only benefit them as they move forward in life.
- **Ask for help** Never hesitate to ask for help if setting limits and negotiating doesn't seem to work. A mental health professional who specializes in ADHD can help you tailor your approach to your child's device dependence and creatively redirect their attention. They can also help you negotiate rules that benefit everyone.

Start by having an open and honest conversation with your child or teen about their smartphone use. What do they like about their phone? What makes them happy that doesn't require a phone? Finding balance with technology can be difficult, even for adults. So, practice patience with your child, and consider how you can help them, and yourself, develop a thoughtful, healthy relationship with smartphones and other devices.

Allinthe Family

ADHD really complicates universal parenting challenges like the morning rush, sibling rivalry, and homework. We asked three parents to share their strategies for making every day go as smoothly as possible.

THE A.M. HUSTLE

MARIA: We do as much as possible the night before. We put everything Jack needs in his backpack and lay out his clothes. He loses track of time so we have a morning checklist: Get dressed, eat, brush his teeth.

and a marker, he'd check off things without doing them. So I laminated a 4x6 card that had pictures of everything he had to do in the morning: a toothbrush for brushing his teeth, a clothes basket to remind him to put his PJs in the laundry. I put a jumbo paper clip on the side that he could slide down as he did each task. If he got it all done by a certain time, he earned screen time before school, which was very motivating for him.

ENERGY OVERLOAD

BILLY: When Isaac was little, a play therapist told us to give him physically exhausting things to do: Take him swimming, have him push the grocery cart. When he was 4 or 5 he started playing football. Now he plays rugby too. For Jayden, sports teach him to be organized. He keeps his helmet, mouthguard, and jersey in a bag, so there's only one thing to remember to grab.

MARIA: We tried soccer for a few

years, but Jack would get upset if someone kicked the ball away from him, even though that's how the game works. It was frustrating instead of fun. So we switched to karate and baseball, which he loves. The positive reinforcement of earning a karate belt boosts his confidence, and being part of a baseball team has been positive socially.

BEHAVIOR BLOWOUTS

PENNY: I always try to figure out what's driving Luke's behavior. If I give him a 40-question math worksheet and he throws it on the floor or in the trash, my inclination might be to get angry. But there could be many reasons for this. He could be hungry or have not slept well. Or maybe 40 questions feels too overwhelming. Instead of yelling, I say, "I can see that you're angry, or frustrated. How can I help?" Even if he yells at me, I have validated his feelings—that's a huge piece of helping kids with ADHD.

BILLY: Jasmine is a chatterbox, which is common with ADHD. So sometimes we get messages from her teachers about her talking. We know she can't help it—suppressing the urge to talk is like holding a beach ball under water. But the behavior isn't acceptable. We give her multiple chances and

Meet the Parents



MARIA EBBETS, Massapequa, NY, graphic designer. Her son, Jack, 11, was diagnosed with ADHD in second grade.



PENNY WILLIAMS, Asheville, NC, author, has written about ADHD since her son Luke, 16, was diagnosed in first grade. Her most recent book is *The Hidden Layers of ADHD*.



BILLY CUCHENS, The Colony, TX, real estate and freelance writing. Two of his four children (Isaac, 14; Jayden 11) have ADHD or ADD, and Jasmine, age 8, is being evaluated.

try to understand. But if it keeps happening, she'll have consequences, like not having TV for the night.

MARIA: When Jack was younger, I tried to defuse a lot of situations. If he was playing and got upset because his friend didn't want to play the same thing, I'd call the parent and say "They played handball today. Can they do what Jack wants tomorrow?" But now I'm letting him sort it out. He has to see that the other kid doesn't want to play with him because he flipped out.

SIBLING SOOTHERS

PENNY: My daughter is a few years older than Luke. When she was younger she had anxiety from watching her brother's public meltdowns. She wouldn't sleep anywhere but home, not even with her grandparents down the street, because she felt neglected. At her first therapy appointment she talked about how we should build an altar to him. It was one of the most profound parenting moments I've ever had. After that we were more conscientious about carving out time for her.

BILLY: Our kids bicker all the time, and the ones who have diagnoses take up a lot of our physical and mental time. Jasmine, who is under evaluation for ADHD, is driven by quality time. We can spend 12 hours with her at a water park and she still wants to be together.

So sometimes we have to be firm with her that it's the siblings' time. But we never shame her about needing us.

MARIA: Jack's sister Lily is 8, but often she's the more mature one. He loses patience with her easily, but she often isn't fazed. Maybe he'll get stuck on something, like he wants to go to Carvel and she wants Baskin-Robbins. She's pretty good about going along, but sometimes we'll go both places.

HOMEWORK HASSLES

PENNY: When Luke started high school, he was getting so assaulted, sensory-wise, that he'd hide in the bathroom or text asking me to pick him up. He couldn't get anything done. So I asked the school if he could do online classes part time at home. I had zero hope they'd agree to it, but they did. I see a huge difference. On the work he does at home, he gets As; he often gets Cs and Ds at school, where he doesn't get enough help.

MARIA: If I don't give him a break after school, getting Jack to do homework is a struggle. He'll walk around or fidget. I let him decompress by shooting baskets or playing with a neighborhood friend. Sometimes he'll watch TV, but he stands up to do it. Once he's

had down time it goes more smoothly. It's difficult for him to focus on writing or reading. He also fatigues easily when writing. His handwriting is illegible, so he gets occupational therapy at school. At home he uses a pencil gripper, and we use graph paper to show him how to stay between the lines.

KEEPING YOUR COOL

PENNY: You're the last thing on your own mind when your child gets an ADHD diagnosis, and everything feels like it's falling apart. But it's so important to carve out time for yourself, even if it's just an extra 5 minutes in the bathroom to breathe.

MARIA: I try to make sure I do something for myself—get coffee, go to the gym, take a shower—before I address what I need Jack to do. When I'm calmer, I can better explain and am less likely to yell.

BILLY: It's hard not to let exhaustion deplete you, and to remember how much joy these kids bring. Sometimes my wife and I tell the kids, "Mom and Dad need some time." It's also important to talk to other parents of kids with these diagnoses. We have to connect so we know we're not the only ones who can't always keep their cool.

For additional info, visit **HealthCentral.com/ ADHDGuide.**

STOCK



hile medications treat symptoms of ADHD, researchers are always evaluating non-medication strategies, such as psychotherapy, and complementary health approaches like meditation. We asked the experts to weigh in on these tools and others.

Is there a downside to taking meds for ADHD?

Medication won't cure ADHD; it treats the symptoms, says child and adult ADHD specialist Mark Stein, PhD, a research affiliate at the Center on Human Development and Disability at the University of Washington in Seattle. This is important, he says, because, "People may think that untreated ADHD is benign. But the person may do poorly in school and in their relationships, and it has an impact on their self-esteem and health and well-being."

For kids, are there effective non-medication strategies?

"The only treatment with demonstrated efficacy is behavior management, or modification," says Ronald Brown, PhD, dean of the School of Integrated Health Sciences at the University of

Nevada, Las Vegas. "This means giving effective instructions and using reward systems like praise or a point system. With younger children, that's timeouts and loss of privileges."

■ Can parents practice behavior management at home?

"Parents can use behavior modification with their child but should go to a trained provider to learn how," Brown says. "Some techniques are simple, like doing homework in a special place each day so your child associates this place with studying. If the child doesn't follow the rules with appropriate behavior, it costs them points or an activity."

■ How would a parent know if a child would respond better to medication or a behavior strategy?

"Most children are responsive to behavior management, and about 90 percent are responsive to medication," Brown says. "But I'm reluctant to treat a child only with medication. If a parent is hesitant to use meds, I will suggest starting with behavior management. Medication can be added later."

■ What alternatives are there for adults who want to avoid medication?

"It depends on what area the problems are falling into," Brown says "If a father has ADHD and can never get organized, you may want the family to have therapy together because it's affecting the whole family, or, for an individual who is always procrastinating, individual therapy. "

Which non-medication therapies are effective for adults?

"Cognitive behavioral therapy (CBT) can help with inattention and impulsivity by modifying how the person thinks and reacts," says Lenard Adler, MD, director of the Adult ADHD Program at the NYU School of Medicine in New York City. "For instance, a therapist will work on strategies to overcome procrastination. Sometimes, learning how to use a planner can help a person better manage time and complete tasks."

"CBT teaches time management and organizational skills, as well as how to set realistic goals and task-completion strategies" Brown notes. "For instance, the person learns that if their flight is leaving at 10 am, they can't get up at 8—unless they live next door to an airport."

Can diet affect symptoms of adult ADHD?

"If you are drinking a lot of caffeine while you are on a stimulant, that can cause a higher heart rate, which is not advisable," says Dr. Adler. "It's important to eat well, stay hydrated, and make sure you eat. If you are not eating and drinking fluids, it can affect your ability to pay attention."

■ Can sugar aggravate ADHD in kids or adults?

"When you have an overabundance of sugar, it can aggravate anything, but it is not the primary cause of ADHD," Brown emphasizes. "ADHD is something you are born with and persists over the lifespan."

■ Could mindfulness meditation ease symptoms of ADHD?

According to Brown, "For an adult with ADHD who has a lot going on and who needs to clear their head of stress, mindfulness can be helpful, but not for ADHD symptoms—in kids either."

■ Is exercise beneficial in treating ADHD?

"Physical activity helps to combat negative habits, such as excessive screen time and inadequate sleep," says Dr. Stein, "Staying active also helps build resilience and improves mood."

Medications to Treat ADHD

STIMULANTS	
NAME	TREATS
Adderall, Adderall XR (mixed amphetamine salts, amphetamine sulfate)	Children & Adults
Adzenys XR-ODT (d- & l-amphetamine sulfate)	Children & Adults
Aptensio XR (methylphenidate HCL)	Children & Adults
Concerta (methylphenidate HCL)	Children & Adults
Cotempla XR-ODT (methylphenidate)	Children ages 6-17
Daytrana (methylphenidate transdermal system)	Children ages 6-17
Desoxyn (methamphetamine HCL)	Children & Adults
Dexedrine ER (amphetamine sulfate)	Children & Adults
Dyanavel XR (d- & I-amphetamine sulfate)	Children & Adults
Evekeo (amphetamine sulfate)	Children & Adults
Focalin, Focalin XR (dexmethylphenidate)	Children & Adults
Jornay PM (methylphenidate HCL)	Children & Adults
Metadate CD (dexmethylphenidate)	Children & Adults
Methylin (methylphenidate HCL)	Children ages 6-12, Adolescents, Adults
Mydayis (mixed amphetamine salts)	Children 13 & up, Adults
ProCentra (amphetamine sulfate)	Children & Adults
QuilliChew ER (methylphenidate)	Children & Adults
Quillivant XR (methylphenidate HCL)	Children & Adults
Ritalin, Ritalin SR, Ritalin LA (methylphenidate HCL)	Children & Adults
Vyvanse (lisdexamfetamine dimesylate)	Children & Adults
Zenzedi (amphetamine sulfate)	Children

NONSTIMULANTS								
Intuniv (guanfacine)	Children							
Kapvay (clonidine)	Children & Adults							
Strattera (atomoxetine)	Children & Adults							

YOUR CHILD AND ADHD



Monitoring your child's symptoms and getting the right care can make a world of difference when they have attention deficit hyperactivity disorder (ADHD). This guide is designed to help you gather your thoughts—a tough task for a parent of an ADHD child—to get ready for your next doctor or therapist appointment. Fill it out, make notes, and share it with your provider to ensure that both you and your child get the most out of your visit, and take back a bit of time and control you may have lost to ADHD.

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1. My child experiences the most difficulty focusing during the:

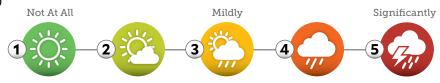
☐ Morning

☐ School day/after school

□Nighttime

2. How much does your child's ADHD affect your family's morning routine:

(circle one)



- 4. Describe one situation when ADHD interfered with your child's daily life: _____
- 5. What ADHD medications is your child currently taking? _____
- 6. How satisfied are you with your child's current treatment?______

Questions to ask your child's doctor:

- 1. How does ADHD change with age? _____
- 2. What are some ways I can manage my child's ADHD? _____
- 3. What treatment recommendations can you make to help keep my child focused? ______
- 4. What are some signs that my child's ADHD treatments are working?





- ADHD Friends & Family Millions of people live with ADHD or are parents of kids with the condition. Organizations like CHADD (chadd.org/affiliate-locator/) and ADDA (add.org/adhd-resources/) can help, with directories of ADHD support groups and resources.
- What ADHD is Really Like A lot of ADHD books teach parents how to manage and support their kids. The Survival Guide for Kids With ADHD, by John F. Taylor, PhD (freespirit.com/gifted-and-special-education/survival-guide-for-kids-with-adhd-john-taylor), is made for the family to read together, so parents get an inkling of their child's experience, while kids learn about the brain and get easy impulse-control tips.
- Music to Focus By Prefer to enhance your concentration by listening to curated music? The streaming service Focus@Will (focusatwill.com) claims users who pick from their library of music, such as the ADHD 1 channel, are less distracted by ambient sounds.

4 Tips for Parents of ADHD Kids

Sometimes, distraction is the best tactic for an exasperated child.

USE PUNISHMENT SPARINGLY, Parents and teachers of kids with ADHD can get easily frustrated and resort to yelling or punishment when the kids are being disruptive. Remember, they struggle to control their impulses and may feel just as confounded as you do. Punishment may contribute to their anxiety and frustration. Instead, set clear rules, and be consistent in doing what you say you're going to do if they break the rules.

MAKE ROUTINE ROUTINE. All kids thrive on routine, and sticking to a schedule is even more important for kids with ADHD. Consistent mealtimes, bath times, and bedtimes help kids know what to expect—and what's expected of them—and also build coping strategies that will help them stay focused.

THINK POSITIVE.
Praising your child
encourages the same good
behavior in the future.
Thank them for clearing
their plate after dinner or
putting a book back on
the shelf. Celebrate their
successes in sports or other
activities. The perk for you:
You'll be less likely to sink
into negativity over myriad
daily frustrations.

GO OFF IN A NEW DIRECTION. Exasperation, anger, and aggression can quickly bubble to the surface in children with ADHD. Redirect their attention to diffuse explosive situations: If they're frustrated over math homework, suggest a break to work on an art project for a bit. Intervene early to prevent outbursts. Just be mindful not to redirect in ways that reward unwanted behavior.



For more info, go to **HealthCentral. com/ADHDGuide**.

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