

Parents with AD/HD

A study by the University of Maryland¹ concluded that parents of children with Attention Deficit Hyperactivity Disorder (AD/HD) should be tested for the condition themselves. These parents are over 20 times more likely to have AD/HD than parents whose children do not have AD/HD.

How common is AD/HD?

Approximately 7 percent of school-age children have AD/HD, which can continue into adulthood. AD/HD, previously called Attention Deficit Disorder or ADD, is the name of a group of behaviors found in many children and adults. In adults it is sometimes considered a “hidden disorder” because the symptoms are often covered by problems such as poor relationships, organizational skills, mood disorders, substance abuse, employment issues and other psychological difficulties. Some adults only recognize that they may have AD/HD after their own child is diagnosed.

What causes AD/HD?

Although the exact causes of AD/HD remain unclear, there is little question that genetics makes the largest contribution. Other risk factors include difficulties during pregnancy, prenatal exposure to alcohol and tobacco, premature delivery, significantly low birth weight, excessively high body lead levels, and postnatal brain injury. AD/HD *is not caused* by excessive sugar intake, food additives, excessive viewing of television, poor child management by parents, or social and environmental factors such as poverty or family chaos.

How is AD/HD diagnosed?

AD/HD does not have obvious physical signs. There are no simple tests such as a blood test, x-ray or a short written test to see if someone has it. A comprehensive evaluation and a series of interviews with the individual and other key persons in their lives is necessary to rule

out other causes, establish a diagnosis, and determine the presence or absence of co-existing conditions.

What are the symptoms?

According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), there are three patterns of behavior that indicate AD/HD: inattention, hyperactivity and impulsivity. Signs of *inattention* include becoming easily distracted, failing to pay attention to details and making careless mistakes, rarely following instructions, and losing or forgetting things needed for a task. Some signs of *hyperactivity* and *impulsivity* include feeling restless, often fidgeting with hands or feet, or squirming, running, climbing or leaving a seat in situations where sitting or quiet behavior is expected, blurting out answers before hearing the whole question and having difficulty waiting in line or for a turn.

Since now and then everyone shows some of these behaviors, the DSM has very specific guidelines for determining when they indicate AD/HD.

Why should parents of children with AD/HD be tested?

Treatment for children with AD/HD requires a lot of support from parents, so for children to perform at their best, it is important that their parents are also performing as well as possible. Identification and treatment of adults with AD/HD may be an important component of the treatment plan of children with AD/HD.

What is the treatment for AD/HD?

Although there is no cure for AD/HD, treatment plans which combine medication, education, behavioral skill building (using lists, day planners and filing systems), and psychosocial treatments can be very effective in reducing the effects of AD/HD.

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Resources

California Child Care Healthline at (800) 333-3212.

American Child & Adolescent Psychiatry at www.aacap.org.

CHADD (Children and Adults with Attention-Deficit/Hyperactivity Disorder), at www.chadd.org, offers an online directory of AD/HD professionals.



Provided by California Childcare Health Program
For more information, please contact:
Healthline 1-800-333-3212

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