


DOES MY CHILD HAVE ADHD?




Peter was eight years old. His parents and teachers had no doubt that he was highly intelligent and yet he had difficulty in reading and writing. His teachers complained that he was very easily distracted in class and fought with his peers often. He was very fidgety and could not sit still. Repeated complaints from school made his distressed parents consult a doctor. The doctor straight away gave Ritalin after which Peter became quiet, less demanding and conformed with the class routines. However, Peter did not appear intelligent, inquisitive and active anymore. He was labeled as ADHD by the doctor.

What is ADHD? It is behavior problem that interferes with normal functioning and activities at home, at school and at work. It is the most common childhood behavior problem that manifests with difficulty in attention and concentration. The American Psychiatric Association published criteria for ADD/ADHD in the DSMIV (Diagnostic and Statistical Manual of Mental Disorder) to help doctors identify ADHD. But these definitions are mainly based on subjective criteria and depends on the bias, personality and experience of the diagnosing doctor and many doctors simply base the diagnosis on observations and experiences of teachers and parents.

One expert on ADHD wrote: " There is no detectable abnormality specific to the diagnosis of ADHD; no characteristic abnormality validated for ADHD; there is no laboratory test established as diagnostic of ADHD." He ceaselessly emphasized that children diagnosed as ADHD must be considered 'physically normal' if no physical examination, laboratory test, x-ray, scan or biopsy shows abnormality. Then why drugs? Drugs most commonly prescribed for ADHD are stimulants like Ritalin and Dexedrine, the side effects of which include anxiety, nausea, insomnia, loss of appetite, high blood pressure, high heart rate and headaches. In America, even preschoolers as young as 2 to 4 years of age are given Ritalin. Many critics on drug therapy for ADHD feel that, while there are genuine cases of ADHD requiring drug therapy, there is over-diagnosis and over-prescription of dangerous drugs like Ritalin.

William Carey, clinical professor of Paediatrics, University of Pennsylvania, observes



that the widely used ADHD questionnaires are highly subjective and impressionistic, that use phrases such as 'talks too much', 'messy work', 'often fidgets'. He argues that ADHD represents nothing more than variation of temperament and believes that half of temperament is of genetic origin and half is fully malleable by the environment. "What appears to be going on with most children being diagnosed with ADHD today is normal variations, especially of temperament, in neurologically intact individuals. The dysfunction appears to be in the interaction between child and environment, both of which may be normal but incompatible with each other. That does not mean however, that there is an underlying disorder in the child."

Peter Breggen writes," ADHD diagnosis is nothing more than a list of all the behaviours that annoy teachers and require extra attention in the classroom. DSM-IV states that signs of the disorder may be minimal or absent when the child is under strict control, when experiencing interesting activities and in a one-to-one situation or when the person experiences frequent rewards for appropriate behaviour. He writes,"This extraordinary admission indicates that ADHD is a 'disorder' which disappears when the child gets proper attention. Genuine neurological disorders would not so readily disappear under improved environmental circumstances."

Some critics blame the very fast and dynamic TV games and violence on TV and video viewings the children of today are exposed to, as opposed to the imaginative and creative play routines and reading books their older generation used to enjoy, so much so that the class routine that requires them to sit still and do quiet work becomes too boring and even unbearable to them. One author, writes that there would have been no Einstein, Newton nor Edison, if the diagnosis of ADHD had been in vogue and Ritalin had been discovered in those days. These points give food for thought for teachers, parents and paediatricians dealing with the little people who tend to be more distractive, inattentive, and active than the others.

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