

LEARNING MADE EASY



2nd Edition

ADHD

for
dummies[®]
A Wiley Brand



Learn about the
many facets of ADHD

Find the right professional
and explore treatment options

Succeed at home,
at school, and at work

Jeff Strong
Carol MacHendrie, LCSW

ADHD

for
dummies[®]
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2nd Edition

**by Jeff Strong and
Carol MacHendrie, LCSW**

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ADHD For Dummies®, 2nd Edition

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Introduction

A lot of people have attention deficit/hyperactivity disorder (ADHD). Researchers estimate that in the United States, people with ADHD constitute anywhere from 3 to 6 percent of the population (or more, depending on which study you read). On the low side, this totals about 9 million people. Almost everyone knows at least one person with ADHD (whether they're aware of it or not). So rest assured that if you have ADHD, or are related to someone who does, you're not alone.

Even though so many people have ADHD, the condition is widely misunderstood. Some people — including many healthcare professionals — believe that ADHD isn't real. These people believe ADHD is a made-up excuse for bad behavior and bad parenting.

We want to assure you right from the start that ADHD is a real condition that affects millions of people. For many, it makes life very difficult. ADHD has a biological cause and can't be willed away through discipline or hard work. And the symptoms of ADHD can't be ignored in the hopes that the person will simply grow out of them.

To reduce (and sometimes eliminate) the symptoms of ADHD, you need to understand this condition and receive knowledgeable intervention. The purpose of *ADHD For Dummies*, 2nd Edition, is to help you gain a better understanding of ADHD and discover where to look for help. Our goal is to give you the tools to effectively address ADHD in your life, whether you, your child, your spouse, or your friend is the one with ADHD.

About This Book

ADHD For Dummies, 2nd Edition, is unique among books on this condition in that we've written it with the ADHD person in mind. We don't go into long explanations with obscure points; we go right to the heart of the matter and give you the information you need to know with as little fuss as possible.

When we set out to write this book, obviously we wanted to offer basic information about what ADHD is and where it comes from. But we also wanted to provide information on cutting-edge treatment approaches and simple, effective strategies to help you start getting the symptoms under control and begin living the life you want to live. As a result, this book is short on background details and jargon and long on real-world advice. Both of us have many years' experience working with people with ADHD, and we draw heavily from these experiences in the pages that follow.

In this book, we don't assume that you're the person with ADHD. Instead, we try to offer a view of this condition as if you, your spouse, your child, your grandchild, your friend, or your student has ADHD. (Whew, that's a lot of perspectives in one book!) Given the enormity of perspective that we try to cover, we can't very well list each of the possible relationships you may have with ADHD in each paragraph. To keep things simple, we generally refer to *you* throughout the book as if you're the person who has ADHD. However, in some instances we do mention a specific perspective as it relates to a particular relationship, and in those cases we write about *your child*, *your spouse*, and so on.

Another convention we want to clarify up front is how we reference the condition we're writing about. In the mental health field, this condition is called *attention deficit/hyperactivity disorder*, or ADHD. Most likely, you've also heard it called simply *attention deficit disorder*, or ADD. We're talking about the same condition; we've simply chosen to use its formal name in this book. (As you find out in Chapter 2, this condition has had many names over the years).

Foolish Assumptions

In this book, we make only one assumption about you: We assume that you want to read a book about ADHD that doesn't dilly-dally around with poetic descriptions and lengthy anecdotes, because you have very little time and want to get the bottom line quickly. We don't waste your time with lengthy explanations, but we do want to make this book engaging to read, so we include some references to people we've worked with to give you insights into life with ADHD.

Icons Used in This Book

As with all *For Dummies* books, we use a few icons to help you along your way.



REMEMBER

Certain ideas and techniques are very important and worth remembering. This icon gives you those gentle nudges to keep you on track.



TECHNICAL
STUFF

This icon sits next to paragraphs that are interesting but ultimately aren't critical to understanding the discussion at hand. You can skip them if you need to.



TIP

The Tip highlights expert advice and ideas that can help you to better deal with ADHD in your life.



WARNING

This icon alerts you to instances when you need to take special care not to hurt yourself or someone else.

Beyond the Book

In addition to the abundance of information and guidance related to ADHD that we provide in this book, you get access to even more help and information online at Dummies.com. Check out this book's online Cheat Sheet. Just go to www.dummies.com and search for "ADHD For Dummies Cheat Sheet."

Where to Go from Here

This book is set up so that you can read it cover to cover or jump around and read only those parts that interest you at the time. For instance, if you don't know anything about ADHD and want to get up to speed on the basics, start with Chapter 1. On the other hand, if your child is having trouble in school and you want to find some ways to deal with their challenges, you can head straight for Chapter 16. If you want to find out about the latest alternative treatment methods for ADHD, check out Chapter 11, 12, or 13 first.

Regardless of where you start in this book, if you run across a term or idea that's covered in more detail somewhere else, we offer a cross reference so you can locate the background information you need.

1

The ABCs of ADHD

IN THIS PART . . .

Understand what ADHD is.

Check out theories about what causes ADHD.

Survey the symptoms that most people with ADHD experience.

IN THIS CHAPTER

- » Recognizing symptoms of attention deficit/hyperactivity disorder
- » Understanding the origins of ADHD
- » Looking at ADHD diagnosis and treatment
- » Coping with ADHD in your life

Chapter 1

ADHD Basics

In 1980, a new term entered the common vocabulary: *attention deficit disorder*. It described a condition that has been recognized since the latter part of the 19th century but called a variety of other names. This term — which later morphed into *attention deficit/hyperactivity disorder (ADHD)* — often rears itself whenever someone has difficulty in school or work, can't sit still, or is unable to control their behaviors. The symptoms of ADHD can affect anyone — people of all ages, genders, and socioeconomic backgrounds. Because of this fact, and because the symptoms of ADHD are simply extremes of everyday behavior, this condition is often misunderstood and misdiagnosed.

In this chapter, we introduce you to ADHD. We give you a brief overview of the common symptoms, biological causes, diagnosis, treatment approaches, and life strategies for coping with ADHD. This chapter gets you up to speed on the basics, and we deal with each of these topics in much more detail in the rest of the book.



REMEMBER

As we point out in the Introduction, ADHD is a complex condition that's estimated to affect between 3 and 6 percent of the people in the United States. Rest assured that many happy, successful people live with ADHD, including both of us.

Having so many people around you with ADHD means that quality information, support, treatments, and life strategies are available that can help minimize the negative effects and maximize the positive. (And yes, ADHD does have positive attributes. You can read about these in Chapter 14.)

Identifying Symptoms of ADHD

If you have ADHD, you may have trouble regulating yourself. This difficulty can exist in the areas of attention, behavior, and motor movements. ADHD looks different in almost everyone. For example, one person may have no problem sitting still but gaze off into space unable to focus at all. Another person may constantly fidget but be able to spend seemingly endless amounts of time focusing on one thing, often to the exclusion of everything else in their life. Yet another person may not be able to stop themselves from impulsive and often dangerous behaviors but may be able to sit calmly in school. The following sections break down both primary and secondary ADHD symptoms.

Peering into primary symptoms

Despite all the different ways that ADHD manifests, the condition has three basic symptoms:

- » **Inattention/distractibility:** People with ADHD have problems focusing. You may be able to focus sometimes but not others. This variable nature of being able to pay attention is one of the main features of ADHD. Because attention is inconsistent, people can easily rationalize or dismiss this symptom.
- » **Impulsivity:** Many people with ADHD have trouble regulating their behavior. In this case, you often act without thinking, perhaps talking out of turn or taking unnecessary risks.
- » **Hyperactivity:** Someone who is *hyperactive* is frequently moving in some way. You may be able to sit but may need to move some part of your body when doing so; leg rocking or shaking is one common example. This hyperactivity is more of a problem with children than adults because most ADHD adults have less physical restlessness as they get older and often find activities to channel it.

The term *attention deficit/hyperactivity disorder* (ADHD) comes from the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V). The DSM-V outlines three types of ADHD:

- » **Inattentive type:** Having this type of ADHD means that you have difficulty focusing but are able to sit still.
- » **Hyperactive/impulsive type:** If you have this type of ADHD, you struggle to sit still and have difficulty considering consequences before doing or saying something, but focusing isn't an issue.
- » **Combined type:** If you have a hard time focusing as well as difficulty sitting still or doing things without thinking, you have the combined type.

The DSM-V also rates the current severity of ADHD from mild to moderate to severe. These ratings are helpful to understand where you fit within the overall spectrum of the condition.

Seeing a few secondary symptoms

Aside from the basic three symptoms of inattention, impulsivity, and hyperactivity (which we discuss in the preceding section), ADHD has a ton of other symptoms. These symptoms can include, but aren't limited to, the following:

- » Worry
- » Boredom
- » Loss of motivation
- » Frustration
- » Low self-esteem
- » Sleep disturbances
- » Hopelessness

In Chapter 3, we discuss these and other symptoms in detail.



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These secondary symptoms are also connected to other common disorders. The overlap of symptoms among a variety of disorders is called *comorbidity* and is one of the reasons that diagnosing ADHD is so difficult. (See the “Getting a Diagnosis of ADHD” section later in this chapter, or check out Chapter 5.)

Clueing in on ADHD's Origins

Many people used to believe that ADHD (before it even had this name) was merely a behavioral disorder and had no biological basis. However, research since then has shown that people with ADHD have something different happening biologically than people without the disorder. What exactly that biological basis is no one knows for sure. Some of the discoveries that researchers have made include the following:

- » **Genetic links:** Having the disorder frequently is a genetic predisposition. ADHD runs in families; you're more likely to see a child with ADHD born into a family where at least one parent has it.

- » **Neurological activity:** Some studies show that people with ADHD have brain function differences. For example, some studies have shown a lower level of activity in the front of the brain — the area that controls attention. Others have discovered activity abnormalities in other regions deep within the brain.
- » **Chemical differences:** Certain chemical activity, such as dopamine and norepinephrine, seems to be different in people who have ADHD. Several studies suggest that there are differences in the responses when neurochemicals are created and released by people with ADHD compared to people who don't have the condition. This is an important component when it comes to choosing medication (Chapter 8 explores ADHD medications in more detail).



REMEMBER

Even after decades of research, the actual cause(s) of ADHD aren't known. But despite this lack of completely detailed understanding of the causes, they do know a lot about how to treat the disorder. We give you an introduction later in this chapter in the section "Viewing Various Treatment Approaches," and we write about treatment options in detail in Part 3 of this book.

Getting a Diagnosis of ADHD

Diagnosing ADHD can be frustrating for some people because there's no definitive way to check for it. You can't see it in a brain scan. You can't test for it with a blood sample. The only way to diagnose ADHD is to do a detailed evaluation of your (or your loved one's) past and present behaviors. This job involves finding a professional who understands the subtleties and variations of ADHD and can make a *differential diagnosis* (a list of conditions that have the same symptoms). The following sections give you an overview of this important process.

Choosing your professional

The first step to finding out whether you have ADHD involves finding the right healthcare professional. You may start with your family doctor or pediatrician, but in order to get an accurate diagnosis (as accurate as possible, anyway), you need to see a professional who understands all the different ways ADHD looks and can review your history properly. Your options can include, but aren't limited to, the following:

- » **Psychiatrist:** A *psychiatrist* is a medical doctor who specializes in mental illness and behavioral disorders. A psychiatrist can prescribe medication and often is up-to-date on the neurological factors of ADHD.

- » **Neurologist:** A *neurologist* is a medical doctor whose specialty is the brain. This person often views ADHD from a biological basis and can prescribe medication. They may not be up-to-date on the best ADHD life strategies or alternative treatments.
- » **Psychologist:** A *psychologist* is trained in matters of the mind. Most psychologists understand the criteria for diagnosing ADHD and can offer many treatment options; some can prescribe medication depending on their license.
- » **ADHD specialist:** An *ADHD specialist* can be anyone from a teacher to a therapist who has experience and expertise in working with people with ADHD. Specialists likely have knowledge of many treatment and coping strategies, but they aren't able to prescribe medication.
- » **ADHD coach:** An *ADHD coach* helps you improve your functioning in the world. Coaches can come from many backgrounds — education, business, psychology — and their focus tends to be on practical, day-to-day matters, such as skills training. Like an ADHD specialist, a coach has expertise in working with people with ADHD but usually can't prescribe medication.

Each professional will immediately recommend the approaches that they're most familiar with and that fit with their treatment philosophy, so choosing the best professional for you depends partly on your values regarding medication and partly on how open you are to unconventional ways of approaching treatment.



TIP

In Chapter 4, we help you explore your values and how they fit with each type of ADHD professional. You also find out how to question a professional to see whether their philosophy fits with yours. Knowing this information prevents you from feeling pressured to attempt treatments you don't agree with and helps you find treatments that fit your style.

Preparing for the evaluation process

After you've chosen a professional to work with (as we explain in the preceding section), you can dig into the actual process of evaluation. This process involves answering a lot of questions and looking at your past. Chapter 5 gives you a heads up on the types of questions you have to answer, as well as the official criteria for being diagnosed with ADHD.



REMEMBER

Diagnosing ADHD isn't easy, and a diagnosis either way isn't the final word. ADHD is one of many similar conditions, and even the best professional can place you or your loved one in the wrong category. We recommend that you seek a second opinion, especially if you have any doubts about the diagnosis. Chapter 6 introduces you to many conditions and symptoms that can appear to be ADHD or that can accompany it.

Viewing Various Treatment Approaches

Treating ADHD has so many approaches that one of the main struggles most people have when they're diagnosed with the disorder is to weed through all the treatment options and choose the best ones to try.

Treatment options break down into several broad categories, which include the following. The most conventional treatment methods for ADHD are medication and behavior modification. Both are useful and effective approaches, but many other types of treatment can work wonders with the right person:

- » Medication
- » Counseling and therapy
- » Coaching
- » Training
- » Behavior management
- » Nutrition and supplements
- » Herbs and homeopathies
- » Neuromodulation therapies
- » Rebalancing therapies
- » Social skills training

We discuss each option in detail in Chapters 8 through 13. Each treatment approach has a place, and many of them work well together. Knowing how to choose and what to combine can be difficult. Our goal is to make this challenge more manageable, which is why we wrote Chapter 7, where we help you develop and implement a plan for treatment success.

Recognizing ADHD's Role in Your Life

One of the best ways to deal with the symptoms of ADHD is to have a toolbox of strategies you can reach into when you run into difficulties. The more tools you have in this box, the easier life becomes. As we explain in the following sections, we dedicate an entire section of this book (Part 4) to helping you fill your box with the best tools possible.