

SPINS

Students and Parents Information Network Support

SPINS Newzine • Fall 2006 • Volume 2 Issue 3

FEATURED IN THIS ISSUE:

**10 QUESTIONS AND
ANSWERS ABOUT
YOUR COLLEGE-
BOUND STUDENT'S
ATTENTION DEFICIT
HYPERACTIVITY
DISORDER**

**HELP YOUR CHILD
GET ORGANIZED**

**ACHIEVING SUCCESS
WITH ADD**

**ADHD AND
MEDICATION
TREATMENT:
REVIEWING THE
AVAILABLE OPTIONS**

**ADD & CONCURRENT
ILLNESS**

**INSIDE THE ADD
MIND**

It's that time of year – the trees are engaged in a spectacular display, nature's way of signaling a time of transition. Fall is also a time of transition for our children. They are settling in to school and adjusting to new teachers and different expectations. Some have made the transition to new schools or colleges or are just beginning kindergarten or first grade.

Transitions may be particularly difficult for students with Attention Deficit Disorder because of executive processing deficits, poor organization, and time management skills, and the very nature of ADD itself.

Whether your child is off to college, high school, middle school, elementary, or kindergarten, we hope you will find this issue's articles informative and interesting.

FROM THE EDITOR'S DESK

With the school year now in full swing, we devote the inaugural issue of the *SPINS Newzine* to Attention Deficit Disorder. The symptoms of ADD and ADHD may present a devastating impact on a student's academic performance frustrating the child and parents alike. Problems with organization, time management and maintaining focus affect a student's performance at every age and grade level.

In this issue Donna Goldberg, author of *The Organized Student*, offers constructive advice on starting the year off right by first recognizing the signs of disorganization and then providing practical suggestions for alleviating the problems of lost books, forgotten assignments, and messy backpacks.

On their own for the first time, students with ADD may experience a total meltdown at college. Dr. Fern Leventhal and Dr. Ruth Nass have contributed an ADHD addendum to their book *100 Questions and Answers About Your Child's Attention Deficit Hyperactivity Disorder* for the *SPINS Newzine*! *100 Questions and Answers About Your College-Bound Student's Attention Deficit Hyperactivity Disorder* provides advice for selecting a college, examining available services and accommodations, and medication issues.

Medication treatment is discussed in Dr. Jeffrey Newcorn's article, *ADHD and Medication Treatment: Reviewing the Available Options*. Occasionally, a student diagnosed with ADD or ADHD may not be responding adequately to stimulants and therapy. Dr. Michelle Hirsch and Dr. Patricio Paez discuss the possible reasons in their article, *Attention Deficit Disorder and Concurrent Illness*.

Success stories are a powerful source of inspiration for students struggling to "keep up." Nanci Brody interviews Richard Feinbloom who has achieved phenomenal success in spite of, or is it because of having ADD. Expanded departments include *Nanci's Resource Corner* featuring books, magazines, websites, tools, etc. The *SPINS Newzine* will now feature a *Bulletin Board* listing workshops, conferences, and events in and around the New York City Area and a *Book Review* section.

Theresa Peduto

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MEMBERSHIP FORM

SPINS, is a not-for-profit organization of professionals and parents dedicated to provide ongoing support and information to students and parents of children with learning issues.

Membership is \$50 a year. Membership benefits will include newsletters and opportunities to network with parents and professionals involved with this student population.

SPINS, the Students' and Parents' Information Network Support, Inc. has been approved for non-profit tax-exempt status. All donations are fully deductible to the extent allowed by law.

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10 QUESTIONS AND ANSWERS ABOUT YOUR COLLEGE-BOUND STUDENT'S ADHD

By Fern Leventhal, PhD and Ruth Nass, MD

In our book, *100 Questions and Answers About Your Child's Attention Deficit Hyperactivity Disorder*, we discussed many issues concerning the diagnosis and treatment of ADHD in children and adolescents. In this article, we address some of the specific issues that parents of college-bound, ADHD students may encounter. In order to do so, we've created an addendum to the book for this Spins Newsletter called "10 Questions and Answers About Your College-bound Student's Attention Deficit Hyperactivity Disorder".

1. My 18-year old is a high school senior. She's been diagnosed with ADHD for several years, but I'm not really sure how much she understands about the diagnosis. What ADHD issues should we talk about before she heads off to college?

Most certainly, parents of college-bound students should set a goal of helping their sons or daughters understand the reason for their diagnosis as well as their own personal symptom profile. These teenagers must develop an understanding of their own individual needs so that they can appropriately advocate for themselves in an academic or work setting. In addition, topics such as classroom accommodations, time management, the multiple distractions of college life, self-esteem and self-advocacy, appropriate storage of medication in the dorm room, and medication abuse should be addressed.

2. Should ADHD be a factor in my teenager's decision about which college to attend?

There is no doubt that ADHD can be a huge factor in your adolescent's success at college. Every school has a different philosophy of education, so it is important to consider factors such as the nature of the available curriculum, the general teaching methods used by faculty, or the degree of "self-pacing" required. During your college search, it is also very important to thoroughly examine the size of typical classes as well as each school's available support

services. Although it is possible to gather information through catalogues and college websites, it is best to have a face-to-face talk with personnel in the learning resource office and/or counseling center to discover if an individual school actually offers the best environment for your child's learning. There are many questions to ask: Are there special services or accommodations tailored to the needs of ADHD students? What is the procedure that a student must follow to obtain these services or accommodations? Is there a learning center with tutoring or designated study areas? Is there a faculty education program to familiarize faculty with the needs of ADHD students? Are their counselors available for ongoing support?

It is crucial, however, that your adolescent be a part of this aspect of the college search. There are many stories of parents with great intentions who set up support services for their college freshmen - freshmen who then never show their faces in the learning support center. Your child must want to go to the college that is chosen and he/she must be motivated to use the available services, be they academic or therapeutic. Although a school may have the best services or seem the most appropriate choice to you as a parent, it may not be your child's choice. This is where truthful discussion about how your child views his/her ADHD is vitally important. Some students try to dismiss their ADHD problems when they head off to college, fearing the label of being different that may have been a part of their high school experience. In that case, it may be helpful to try and convince your child that regardless of his/her present attitude about taking advantage of services, it would be advantageous to be in an academic environment where those services were available if he/she ever wants them.

3. My daughter has attended the high school learning center for the last four years. What kind of services and



Fern Leventhal, Ph. D



Ruth D, Nass, MD

accommodations should I be expecting the college to provide?

Schools should offer a range of general services and accommodations as well as ones that are more specific to particular learning issues. Most certainly, accommodations such as extended time and distraction-reduced exam sites should be available. In addition, the assistance of an anonymous note-taker or an editing service for written assignments usually can be arranged. Students can also easily get permission to use a tape recorder or gain access to lecture notes.

Different schools have different arrangements. Some may have an Office of Disability Services, while others may have Learning Centers. These are the places where students can access services such as study skills classes, tutors, note-takers and editors. It is also the place where students can find counselors who can provide a variety of supports including helping students formulate and follow-up on an academic plan, assisting with time management issues, providing "coaching" or problem-solving, monitoring for stress and

teaching stress-reduction techniques, and referring to other mental health professionals when necessary.

4. *What kinds of things can my college-bound ADHD student do to help himself with this transition? Are their considerations he should make about planning his schedule?*

Self-advocacy is a crucial factor in the success of college-bound students. This can only happen if a student truly understands what ADHD is. Students should be encouraged to read and talk about their own profile of symptoms and treatments. Even though some students have been evaluated several times, many are not able to describe clearly the difficulties they have learning and/or negotiating interactions. Students can talk to family, educators, or therapists about these important issues. If students have relationships with local professionals in the educational or psychological world, they can be encouraged to continue these interactions - long-distance. In fact, many students schedule once-a-week phone sessions with their therapists at home rather than start fresh with counselors or therapists at college. ADHD students may need the social/emotional support just as much as the academic support.

The following are some important educational considerations students should address: Schedule realistically - arrange classes for times that you will be awake and alert. Try not to schedule classes that are more than one hour long. Take a manageable course load. If possible, chose professors who are interesting and engaging. Try to meet and talk to each professor personally, so they are aware of who you are. Request an appointment with each professor to discuss specific accommodation needs. Sit in front of the class to optimize your attention. Break large assignments into smaller, more manageable tasks. Keep a "to do" list which you revise and prioritize each day. Plan your study times and keep to a schedule. Determine the best learning environment. Organize and attend study groups.

5. *My teenager's medication has been working well throughout his high school years. Do we need to consider other factors and make changes in his medication before he heads off to college?*

As a general rule, most college students do not get up at 7:00 am for classes. They also may take naps in

the middle of the day or stay up late into the wee hours of the morning to study. Although long-acting medication might have been used throughout high school, some college students prefer short-acting medication which they can tailor to their own needs. It is very important that, prior to going to college, you and your child work with your physician in order to develop a medication plan that is realistic for your college student. This medication plan should include not only which medication should be prescribed, but also how the student will remember to take the medication and how it will be renewed.

The way your child obtains medications while he/she is at college needs to be planned. Does he/she go directly to a doctor at home or at college? Does he/she receive his/her medication through his or her parents? Once your child gets to college, there are alternative ways of proceeding. After the student settles in and finds out his/her schedule, he/she can get in touch with the hometown physician, either by phone or email. As your adolescent is now an adult, it most certainly becomes his/her responsibility to make regular contact with the physician. If you are maintaining the medication from the pharmacy, have a designated plan with your child. Get an idea about when in each calendar month the renewal is due. For example, plan to renew the first week of each month, so the medication will reach your student by the second week.

A second alternative is to work with the hometown physician or the school to find a new psychiatrist or neurologist at the college or in the surrounding community who will moni-

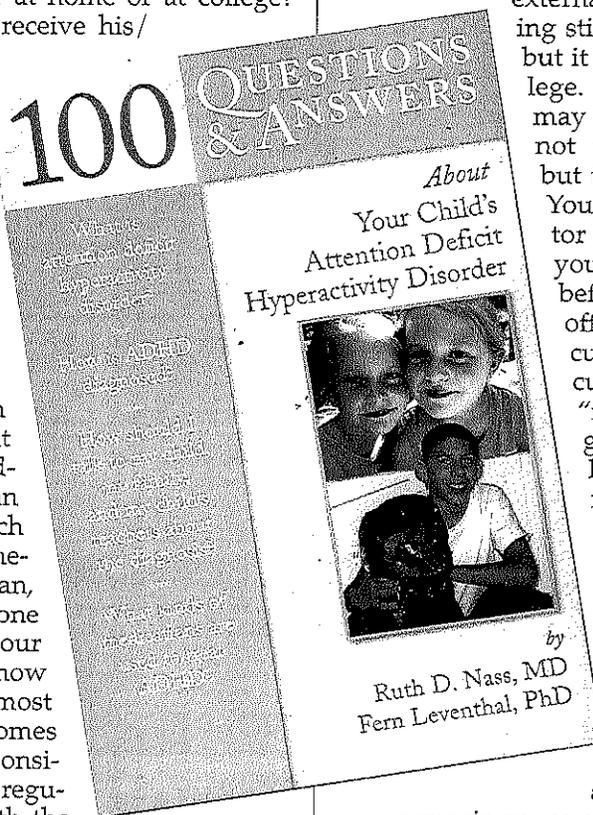
tor and prescribe your child's medication. Because these medications are controlled substances, out-of-state prescriptions may not be honored. Rather than mailing medication from home, it is also possible that your student can obtain it directly from a pharmacy on or close to campus. This decision may depend on your insurance coverage and where your child attends school.

6. *I know that the drugs that are prescribed for ADHD are widely abused. How can I be sure that my child or his friends do not abuse the medication?*

There are several abuse issues that your child may run into in college. For one, college students are now in control of their own medication. This makes them vulnerable to internal or external pressures. Selling stimulants is illegal, but it does occur at college. Other students may want medication, not just to get high but to get work done. You and your doctor need to talk with your child about this before he/she heads off to college. Discussion should focus on how to say "no" and strategies about how to keep medication in a private and secure place. In addition, another topic of discussion should be about how much your child wants to let his/her peers know about his/her diagnosis or use of medication.

Abuse comes in many forms. When used properly, an individual cannot get high on ADHD medication. However, if stimulant medications are ground up and subsequently, snorted or taken intravenously, they can make someone high. Other students may try to buy or steal your teenager's medication for this purpose.

Another way some students abuse their medications is by taking too much of it. They falsely believe that more medication will enhance their power of concentration and improve their performance. Too much medicine will



probably make your child jittery and actually be counter productive in terms of getting work accomplished. In fact, using too much medicine for long periods of time can be quite dangerous and cause severe agitation and confusion.

7. I'm worried about my daughter. I know that the medication she takes can ruin her appetite for several hours. I also know that she has a tendency to be quite weight conscious and restrict her diet. When she goes off to school, I'm worried she may use the medicine to lose weight. What should I do?

Stimulants and even medications like Strattera can decrease appetite. Your child's high school medication regime probably addressed this issue. However, college schedules can be different. Classes are not on a regular schedule and sometimes your student may need medicine at a time that he/she would normally be eating. In addition, the dining hall is not like the refrigerator at home. It is not open 24 hours a day. Be sure that your child can get food during off hours. If he/she doesn't have access to markets and restaurants, a small refrigerator in the dorm room is useful. If loss of weight has been a problem, getting "a visual" on your child every two or three months is certainly important.

8. What about the distractions of dorm life? Do you have any suggestions?

Since distractibility is a problem for ADHD students, dorm life can certainly present difficulties. Noise levels in many dorms can be quite high and often continue into the early morning hours. Although single rooms may be slightly more isolating, your teenager may want to sign up for a single dorm room in order to limit the distractions of a roommate. Studying may be quite difficult in noisy dorm environments. Headphones can sometimes help to screen out distracting noises. Otherwise, it is important to find a quiet study space, either in the library or other designated study areas.

One of the big distractions of dorm life is the social pull from other students. Talking, going out to eat, partying – these are all tremendous temptations. Although your child should do his/her share of socializing, it is important that he/she develop a study plan and stick to it. If it is difficult to set limits, a student may have to leave the dorm to study and return when he/she is ready to socialize.

9. My son is typically a procrastinator in terms of his work. I have served as the one to help him budget his time and remind him about upcoming assignments and exams. How can I now help him prepare for the upcoming time management issues which he will have to handle on his own?

Parental "micro-managing" may have become a well-established strategy that has been used successfully with your high school student. At college and in the work world, however, your student must be able to function independently. Some important hints: Begin the process of learning to function independently when your child is in high school. Practice before it becomes a necessity. Help your child with the time management basics: making a calendar with "work" time and "play" time, developing a "to do" list, learning to prioritize, and organizing materials. Create some strategies to deal with procrastination. Let your child manage his/her own responsibilities as well as the repercussions of failing to manage time correctly. It is better for your student to learn these skills while his/her parents are watching, rather than on his/her own at school, far from your protective eye.

10. I know that I need to let my child be responsible for himself at college? But, what if I sense that he is beginning to perform poorly? When and how should I intervene?

Many ADHD students will find great success at college. Nevertheless, others may find themselves walking a rocky road. Some ADHD students want a fresh start when they head off to college. They have felt burdened by being identified as "disabled" in high school and now just want to be like everyone else. Therefore, they refuse services and/or medication. Other students go off with the best intentions to use available resources and/or manage their time appropriately, yet are unable to actively assert themselves within the peer environment or successfully advocate for their own needs. Others may just become overwhelmed by the amount of work, the multiple distractions, and the lack of parental guidance. Because some of these students have been "micro-managed" by parents during their high school years, it may be quite difficult for them to now operate more independently. Subsequently, some of these students may find themselves falling behind academically.

Fortunately or unfortunately, you cannot accompany your college student on his/her journey down this road. This fact is reinforced by the college's privacy rules which make it difficult for parents to talk to counselors or gain access to

information about students' progress. Therefore, keeping an open channel of communication with your college student is the best approach.

It is important to remember that even students without learning issues often take more than four years to complete college. Your ADHD teenager may choose to enroll for a reduced course-load, take off for a semester or a year, or live at home while attending school as a full-time or part-time student. In other words, ADHD students may have to find their own educational pace and rhythm. Some of these students may stumble along the way; however, by pulling themselves up and finding a means to move forward, they only increase their opportunity for success.

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Both Dr. Leventhal and Dr. Nass are professors who teach trainees at their respective hospitals as well as clinicians with expertise in working with children and adolescents. They share interest in nonverbal learning disabilities, dyslexia, autistic spectrum disorders, and ADHD.

Recommended Reading:

Bramer, J.S. *Succeeding in College with Attention Deficit Disorders*. Plantation, Florida: Specialty Press, Inc., 1996.

Mooney, J. and Cole, D. *Learning Outside the Lines*. New York, New York: Fireside, 2000.

Nadeau, K. *Survival Guide for College Students with ADD or LD*. Washington, DC: American Psychological Association, 1994.

Nass, R. and Leventhal, F. *100 Questions and Answers about Your Child's Attention Deficit Hyperactivity Disorder*. Boston, Massachusetts: Jones and Bartlett, 2005.

Quinn, P. *ADD and the College Student*. Washington, DC: American Psychological Association, 1994.

NANCI'S RESOURCE CORNER

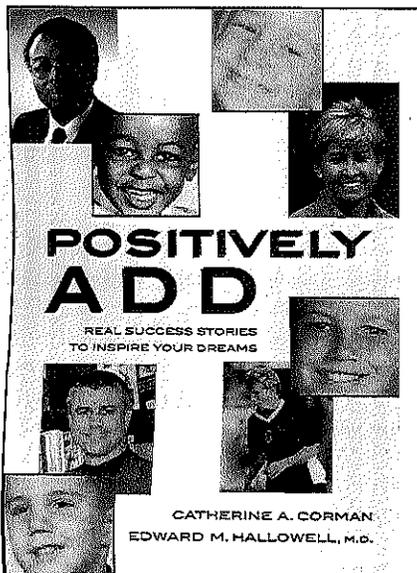
The following is a list of helpful resources including, magazines, books, products, websites and services for parents of kids with AD/HD.

MAGAZINES:

- ADDitude (www.additudemag.com)
Excellent bimonthly resource jammed packed with informative articles, strategies and the most current resources.

BOOKS FOR PARENTS AND YOUNG ADULTS:

- Dr. Larry Silver's Advice to Parents on ADHD: Second Edition, by Larry B. Silver, M.D. (Three Rivers Press)
- Making the System Work for Your Child with ADHD, by Peter S. Jensen, M.D. (The Guilford Press)
- The Organized Student, by Donna Goldberg, with Jennifer Zwiebel (Simon & Schuster)
- Driven to Distraction, by Edward M. Hallowell, M.D.
- Positively ADD: Real Success Stories To Inspire Your Dreams by Catherine Corman and Dr. Edward Hallowell, (Bloomsbury Children's Books)



- 100 Questions & Answers About Your Child's Attention Deficit Hyperactivity Disorder by Ruth D. Nass, MD and Fern Leventhal, PhD (Jones and Bartlett).
- Attention Deficit Disorder: The Unfocused Mind In Children And Adults by Thomas E. Brown, PhD (Yale University Press)
- Straight Talk about Psychiatric Medications for Kids (Revised Edition) , by Timothy E. Wilens, M.D. (The Guilford Press)
- Straight Talk about Psychological Testing for Kids, by Ellen Braaten, Ph.D., and Gretchen Felopulos, Ph.D. (The Guilford Press)
- The AD/HD Book: Answers to Parents' Most Pressing Questions, by Beth Ann Hill, with James Van Haren, M.D. (Avery)

BOOKS FOR KIDS:

These books can be read to kids, with kids or by kids.

- Shelley, the Hyperactive Turtle (Second Edition), by Deborah Moss (Woodbine House)
- A Walk in the Rain with a Brain, by Edward M. Hallowell, M.D. (Regan Books)
- Otto Learns About His Medicine, by Matthew Galvin (Magination Press)
- Putting on the Brakes: Young People's Guide to Understanding Attention Deficit Hyperactivity Disorder, by Patricia Quinn, M.D. (Magination Press)
- Get Organized Without Losing It, by Janet S. Fox (Free Spirit Publishing)

PROGRAMS, ORGANIZATIONS & WEB SITES:

These resources are worth looking into by both parents and professionals.

- ADDitude (www.additudemag.com)
- Children and Adults with Attention Deficit/Hyperactivity Disorder (www.chadd.org)
- ADD Warehouse (www.addwarehouse.com)
- ADD Consults/myaddstore.com (www.addconsults.com)
- The ADD Resource Center - Harold Meyer (646) 205-8080
- ADDvance (www.addvance.com)

- Schwab Learning (www.schwablearning.org)

EDUCATIONAL TOOLS, TOYS, SERVICES:

These products have proved to be successful interventions.

- Time Tracker Visual Timer & Clock (www.learningresources.com)
- Chorebuster (www.chorebuster.net) (www.childtherapytoys.com)
- Franklin Electronic Publishers, Inc (John_Applegate@Franklin.com) (609) 386-2500
- ABT Advanced Brain Technologies develop innovated brain training products to enhance human potential. (www.advancedbrain.com)
 - ABT products include:
 1. The Listening Program
 2. Shelly My First Computer Game (www.shellysnail.com)
 3. BrainBuilder (www.brainbuilder.com)
 4. Music for Babies

ADD/ADHD A PSYCHIATRIST'S PERSPECTIVE: RECOGNITION, TREATMENT AND MANAGEMENT

By Michelle Hirsch, M.D. & Patricio Paez, M.D.

Children, who leave their seats frequently, lose or forget their assignments, and disrupt the class with their behavior and remarks are well known to most teachers and principals. These children are demonstrating symptoms of Attention Deficit Disorder. This syndrome is characterized by inattention, impulsivity, and may occur with or without hyperactivity. These children may have difficulty sustaining attention in academic or play activities, in following through with instructions, and often do not seem to listen when spoken to directly. Other difficulties include organization, losing things, forgetfulness, and easy distractibility. Impulse problems include such things as blurting out answers before the question has been completed, not waiting for his turn, and interrupting. When the child also displays an excessive amount of activity it is referred to as ADHD, attention deficit disorder with hyperactivity. Typical hyperactive signs include fidgeting with hands or feet, inability to stay seated, excessive talking, and "class clown" behavior. When hyperactivity is not present, this problem is referred to as attention deficit disorder (ADD). Children with ADHD are often come to the attention of parents and teachers because of disruptive behavior and, as a result, may receive treatment earlier. However, it is important to note that all hyperactivity is not necessarily attributed to ADHD. Other factors such as anxiety or depression, for example, may manifest with excessive activity.

Children who lack the physical symptoms of hyperactivity and yet have issues with inattention may not be diagnosed as readily. This is more likely to occur with girls and with older students. Often, academic problems, or depression, or anxiety may alert the family or school to an attention problem. Attention problems and learning issues are clarified in neuropsychological testing. It is not unusual for the two to co-exist; more than two thirds of children with ADD/ADHD will have another psychiatric disorder in their life span.

When a child suspected of ADD or ADHD comes to the attention of a child psychiatrist, a comprehensive approach to treatment is initiated. First, the child

is screened for relevant medical, psychiatric, or learning issues. A careful family history is helpful as there maybe other family members who have coped with this problem. It is important for the parents and the child to be educated to the fact that ADD is a medical problem, rather than anyone's fault. Defusing anger, blame, and shame is very important.

Psychotherapy, behavioral interventions, and medications can all be of value in the treatment of this problem. With younger children, it is important to involve the school and the parents. Children do best in a structured classroom with small class size. Behavior therapy techniques emphasizing positive reinforcement for appropriate behavior gets better results than punishment. Striving for a positive, cooperative attitude is fostered when the enemy is the illness and children feel that adults are on their side.

High school and college students may have had undiagnosed ADD/ADHD for years, and may be viewed by parents as underachievers and lazy. There may be parent-child conflicts and self-esteem issues. Individual psychotherapy and family psychotherapy is important to address these issues. It also helps to select appropriate school settings, such as a smaller college with seminar rather than lecture style classes. High schools may offer support through members of their guidance staff, and alert teachers to helpful accommodations.

Medications are very effective in the treatment of ADHD, but should be monitored closely by an experienced clinician. The main medications are psychostimulants: Ritalin (and the longer acting Concerta) and Adderall (and the longer acting Adderall XR) are some of the most popular stimulants used. The improvement in attention and hyperactivity is usually rapid and clear cut once the dose is adequate. Side effects are common and may include decreased appetite, insomnia, anxiety, rebound hyperactivity, irritability, and mood changes. There can be cardiac effects and very rarely deaths have been reported. Some people also have concerns about potential for addiction. In spite of all these concerns,

stimulants remain a highly effective and popular treatment which generally does not have to be stopped because of side effects. Their safe and effective use requires proper medical supervision.

Strattera, the only non-stimulant medication FDA approved for treatment of attention deficit disorder is also an effective option. Therapeutic improvement may not occur for several weeks. However, improvement in attention and hyperactivity last all day long. This is an excellent option for children who may not tolerate stimulants well, although Strattera can also have side effects and blood tests are necessary.

Medication treatment options also include anti-depressants such as, Wellbutrin and Tricycles, anti-hypertensives, including Clonidine, and Tenex and arousal agents such as Provigil. Each of these has unique therapeutic effectiveness and different side effect profiles. Many people, who are uncomfortable with the idea of using medication with their child, should also consider biofeedback.

In summary, management of ADD/ADHD integrates knowledge from medicine, psychiatry, and education. Academic environments should provide as much individual instruction as possible. Behavioral techniques based on positive reinforcement for appropriate behavior and setting clear limits should be practiced at home and at school. Individual, family or group therapy and cognitive behavioral therapy are all helpful according to the specific needs of the child. Medications are very helpful if chosen carefully and monitored by a well-trained clinician.

Dr. Hirsch and Dr. Paez are child psychiatrists on the teaching faculty of College of Physicians and Surgeons at Columbia Presbyterian Hospital/Columbia University. They maintain private practices for the treatment of children, adolescents, and adults with offices in Manhattan and Riverdale. Dr. Hirsch is the medical consultant for SPINS and Dr. Paez is a specialist in neuropsychiatry at Columbia Presbyterian Hospital. Both have been in practice over 25 years treating the full range of psychiatric disorders.