

Questions for the medical establishment

So many things can bring on ADHD symptoms; why use a stimulant drug to address all of them? How can the same prescription be suitable for so many different kids whose problems can have so many different causes?

Is ADHD medicine the answer for the child whose hyperactivity is being triggered by exposure to lead? Wouldn't chelation be a better option? What about mercury exposure?

Research shows that when stimulant drugs help, their benefits usually don't last beyond 2 or 3 years. If a child starts taking medication at age 6 what can be done to help him once he is 8 or 9?

Research has also consistently shown that the children most likely to be labeled as ADHD are the youngest in a class. Why not move the child to a different class where he can be among younger children?

How did 'hyperactivity' go from a footnote in medical textbooks to a condition said to affect 11% of the children in the U.S.?

Why are more than 10% of children in Louisiana and only 2% of the children in Nevada diagnosed with ADHD? [Source: Centers for Disease Control]

Since Ritalin has been found to reduce the levels of the neurotransmitter GABA (gamma-aminobutyric acid) in the brain, and since GABA is known to promote relaxation and to enhance learning, memory and sound sleep, how can a child avoid these side effects? (Solleveld *NeuroImage* 2017) [Note: According to the researchers who conducted this study, most of the testing on drugs like Ritalin has been conducted on adults over the age of 23, not on children whose brains are still developing.]

If a family is advised to NOT remove petroleum-based additives from a child's diet, what is the daily recommended dose of Yellow No. 5?

An alternative to stimulant drugs

Since supplements have been shown to be as effective as drugs in helping children with ADHD symptoms, why not try these first?

Essential fatty acids have been found to be as effective as stimulant drugs in treating the symptoms of ADHD according to a double-blind, placebo-controlled study published in the *Journal of Developmental and Behavioral Pediatrics*. (N. Sinn, April 2007)

A 2016 "systematic review and meta-analysis" published in the *Journal of Affective Disorders* reached a similar conclusion. (Cooper, January 2016)

Vitamin D deficiencies have been correlated with ADHD symptoms in children and adolescents. (Bener 2014, Goksugur 2014)

Various combinations of nutrients have been shown to dramatically help children with behavior and attention problems. (Tammam 2016, Kaplan 2015, Gordon 2015, Rucklidge 2014)



When a child is placed on ADHD medicine, are doctors required to monitor him for the risk of heart disease?

ADHD drugs and heart failure

In March of this year, the journal *CNS Drugs* published a review and meta-analysis of the research on the effects of ADHD medicine on children and adolescents. (Hennissen et al.) They found that a "significant minority" of children experienced increased blood pressure and heart rate, putting them at risk for future heart attacks. The researchers recommended "paediatric patients using ADHD medication should be monitored closely and regularly for HR (heart rate) and BP (blood pressure)."