

## **ADD/ADHD – What is it?**

In 1987, ADHD was voted into existence with a show of hands by the American Psychiatric Association. Within one year 500,000 children in America alone had been diagnosed. As a result many children were then prescribed drugs to control their behaviour. Today ADHD is said to account for a third to half of all child mental health referrals.

Is ADHD a disease, needing drugs such as Ritalin, or are there more basic areas that need to be addressed?

### **Testimonial**

When Lillian Reekie's child showed symptoms of hyperactivity and anger from birth, she decided not to go down the road of conventional drug treatment but instead researched and tried broader approach, taking a look at foods and additives, toxins in the home, nutritional supplements and developing positive self-image. Lillian, a trained primary school teacher, has shared her journey in her book, "Hidden Dangers". She is committed to helping parents become proactive in finding answers – not reactive. The following information is taken from pp. 23 – 32.

Lillian read the research work of Phillip Day, who reported that scientists at Purdue University, USA, had found that children exhibiting hyperactivity have altered fatty acid metabolism and lower levels of these in their blood, compared to the control group. Lillian found that essential fatty acids, (EFAs), appeared to assist with her son's concentration and mental capacity. Trace mineral, vitamin and antioxidant supplementation were also very important. However she discovered that poor nutrition alone is not the only area of concern for hyperactivity and ADD.

### **Food factors**

Chemical toxins found in food and beverages and also in our homes and environment can act as anti-nutrients. They stop the absorption of essential nutrients. Heavy metals, such as lead for example, produces symptoms of aggression, poor impulse control and poor attention span. Sugar also produces a kaleidoscope of problems with hyperactivity.

Phosphorous and phosphoric acid are known mental impairment agents. Soft drinks contain high levels of phosphoric acid and up to 8-10 teaspoons of sugar in one can.

Food allergies are another leading contributor. Dr. Neil Ward of Guildford UK, scientist at the forefront of additive research, reports: *"Children's disruptive behaviour can be linked to food choice. Hyperactivity, ADD...and antisocial aggressive behaviour in children can be often traced back to what they eat."* He found that some children reacted to additives, preservatives and colourants in food products causing certain behavioural problems.

### **Lillian's fourfold approach:**

1. meeting the body's nutritional needs that diet simply cannot provide today, (i.e. supplementing the diet with EFAs, trace minerals, vitamins and antioxidants.)
2. elimination of toxic chemicals in the home, i.e. choosing personal care products that do not contain harsh chemicals like Sodium Lauryl Sulphate for example; using only natural cleaning materials such as *Enjo*.
3. Reduction of exposure to chemicals in all areas of food production, i.e. buy organic fruit and vegetables; make your own food – do not eat processed food; eliminate foods which commonly cause allergies – wheat, dairy, sugar, orange juice, nuts
4. Assist in developing a more positive self image by overcoming prior conditioning.

### **Nutritional versus drug approach**

The optimal approach to helping a child with hyperactivity problems involves a strategy which tackles all the above factors. A study by Dr. Humphrey Osmond found that more cases were worsened by drugs than helped by them. For example, in his study, out of 66 cases on Ritalin, 22 were helped and 27 were worsened. Out of 172 cases on Dexedrine, 44 were helped and 80 worsened. Interestingly, out of 191 cases taking a nutritional approach, 127 were helped and only 7 worsened.

### **Profile Ritalin**

Ritalin is an amphetamine similar to cocaine. Adverse reactions include anxiety, hair loss, slowing growth and compulsive nervous behaviours. Suicide and suicidal tendencies have dogged withdrawal from Ritalin from its outset. To neurologist Fred Baughman, the greatest tragedy is that, after being diagnosed, children believe they have something wrong with them that only a drug can fix. Unfortunately sometimes the child sees that his parents and schools teachers believe this also.

### **Profile on Prozac**

Released in 1987, it was designed as a 'mood brightener'. Side effects can include abnormal dreams, bronchitis, agitation, chills, diarrhea, dizziness, loss of appetite, paranoid reactions and insomnia.

### **ADD – the nutritional approach**

The following notes are taken from Phillip Day's book, *The ABCs of Disease* pp. 29-30

*Action:*

Please note that a qualified health practitioner should supervise each individual case. Patients must never discontinue any psychiatric medications unsupervised.

- Commence a natural foods diet, organic if possible
- Eliminate chemical additives
- Discontinue junk foods, especially sodas and other chemical-laden, high-street food attractions
- Avoid sugar and all refined flour products

- Avoid pork, artificial sweeteners, artificial fats, sweets/candy and fluoridated water
- Ensure that 70% of the diet comprises high-water-content, high fibre, living, whole organic foods
- test for and detoxify toxic elements
- Restore nutrient balance: commence a supplement program as follows:
- Flax seed oil – 1 tablesp. per day; vit B complex, calcium, magnesium, zinc and trace minerals
- Take fish oils (EFAs) that are guaranteed mercury-free
- A probiotic will reduce yeast overgrowth, (Candida), common in children whose diet is high in sugar and white processed foods.
- Ensure adequate exercise to burn off excess energy
- Avoid foods that may contribute to allergies – typically wheat, dairy, sugar, eggs, oranges and chocolate
- Examine and evaluate heavy metals in the child's environment, together with any other toxic chemicals. (A mineral hair analysis is one method of diagnosing these.)
- Watch for somatic, allergic reactions in the child, including bloating, irregular bowel movements, excessive mucus, ear infections, skin rashes, tonsillitis, bloating, digestive problems, discolouration around the eyes, bed-wetting, bad breath, eczema, asthma
- Apply a firm but loving discipline
- Ensure consistency in applying dietary amendments.

### **References:**

Reekie, Lillian, Hidden Dangers, 2003, Health and Wellness Solutions, Australia, [www.hiddendangers.com.au](http://www.hiddendangers.com.au)

Day, Phillip, The ABCs of Disease, 2003, Credence Publications, [www.credence.org](http://www.credence.org)