



ORIGINAL RESEARCH PAPER

Commerce

THE BASICS OF ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD)

KEY WORDS:

Dr. C. Anbuchelvan

Assistant Professor in Commerce, AUCE, School of Education, Alagappa University, Karaikudi, Tamilnadu.

ABSTRACT

ADHD is a disorder that makes it difficult for a person to pay attention and control impulsive behaviors. He or she may also be restless and almost constantly active. ADHD is not just a childhood disorder. Although the symptoms of ADHD begin in childhood, ADHD can continue through adolescence and adulthood. Even though hyperactivity tends to improve as a child becomes a teen, problems with inattention, disorganization, and poor impulse control often continue through the teen years and into adulthood.

INTRODUCTION

Almost all children have times when their behavior veers out of control. They may speed about in constant motion, make noise nonstop, refuse to wait their turn, and crash into everything around them. At other times they may drift as if in a daydream, failing to pay attention or finish what they start.

However, for some children, these kinds of behaviors are more than an occasional problem. Children with attention-deficit/hyperactivity disorder (ADHD) have behavior problems that are so frequent and/or severe that they interfere with their ability to live normal lives. These children often have trouble getting along with siblings and other children at school, at home, and in other settings. Those who have trouble paying attention usually have trouble learning. Some have an impulsive nature and this may put them in actual physical danger. Because children with ADHD have difficulty controlling their behavior, they may be labeled as "bad kids" or "space cadets." Left untreated, more severe forms of ADHD can lead to serious, lifelong problems such as poor grades in school, run-ins with the law, failed relationships, substance abuse and the inability to keep a job.

ADHD

Attention Deficit Hyperactivity Disorder ADHD is a condition of the brain that makes the difficult for children to control their behavior. It is one of the most common chronic conditions of childhood. It affects 4% to 12% of school-aged children. About 3 times more boys than girls are diagnosed with ADHD.

ADHD is not just a childhood disorder.

Although the symptoms of ADHD begin in childhood, ADHD can continue through adolescence and adulthood. Even though hyperactivity tends to improve as a child becomes a teen, problems with inattention, disorganization, and poor impulse control often continue through the teen years and into adulthood.

Warning Signs

People with ADHD show an ongoing pattern of three different types of symptoms:

- Difficulty paying attention (inattention)
- Being overactive (hyperactivity)
- Acting without thinking (impulsivity)

A child with inattention symptoms may have the following behaviors:

- Has a hard time paying attention, daydreams
- Does not seem to listen
- Is easily distracted from work or play
- Does not seem to care about details, makes careless mistakes
- Does not follow through on instructions or finish tasks
- Is disorganized
- Loses a lot of important things

- Forgets things
- Does not want to do things that require ongoing mental effort

These symptoms get in the way of functioning or development. People who have ADHD have combinations of these symptoms:

- Have problems sustaining attention in tasks or play, including conversations, lectures, or lengthy reading
- Seem to not listen when spoken to directly
- Fail to not follow through on instructions, fail to finish schoolwork, chores, or duties in the workplace, or start tasks but quickly lose focus and get easily sidetracked
- Have problems organizing tasks and activities, such as doing tasks in sequence, keeping materials and belongings in order, keeping work organized, managing time, and meeting deadlines
- Avoid or dislike tasks that require sustained mental effort, such as schoolwork or homework, or for teens and older adults, preparing reports, completing forms, or reviewing lengthy papers
- Lose things necessary for tasks or activities, such as school supplies, pencils, books, tools, wallets, keys, paperwork, eyeglasses, and cell phones
- Become easily distracted by unrelated thoughts or stimuli
- Forgetful in daily activities, such as chores, errands, returning calls, and keeping appointments

Signs of hyperactivity may include:

Cannot stay seated, Squirms and fidgets, Talks too much, Runs, jumps, and climbs when this is not permitted, Cannot play quietly (video games do not count), constantly in motion or "on the go," or acting as if "driven by a motor"

A child with impulsivity symptoms may have the following behaviors:

Acts and speaks without thinking, May run into the street without looking for traffic first, Has trouble taking turns, Cannot wait for things, Calls out answers before the question is complete, Interrupts others

Showing these signs and symptoms does not necessarily mean a person has ADHD. Many other problems, like anxiety, depression, and certain types of learning disabilities, can have similar symptoms. If you are concerned about whether you or your child might have ADHD, the first step is to talk with a health care professional to find out if the symptoms fit the diagnosis. The diagnosis can be made by a mental health professional, like a psychiatrist or clinical psychologist, primary care provider, or pediatrician.

Causes -ADHD

Researchers at the National Institute of Mental Health (NIMH), National Institutes of Health (NIH), and across the country are studying the causes of ADHD. Current research suggests ADHD may be caused by interactions between genes and

environmental or non-genetic factors. Like many other illnesses, a number of factors may contribute to ADHD such as:

- Genes, Cigarette smoking, alcohol use, or drug use during pregnancy, Exposure to environmental toxins, such as high levels of lead, at a young age, Low birth weight and Brain injuries

Coexisting conditions

Many children who have been diagnosed with ADHD have at least 1 coexisting condition. Common coexisting conditions include the following:

- **Oppositional defiant disorder or conduct disorder**— Up to 35% of children with ADHD also have oppositional defiant disorder or conduct disorder. Children with oppositional defiant disorder tend to lose their temper easily and annoy people on purpose and are defiant and hostile toward authority figures. Children with conduct disorder break rules, destroy property, and violate the rights of other people. Children with coexisting conduct disorder are at much higher risk for getting into trouble with the law than children who have only ADHD.
- **Mood disorders/depression**—About 18% of children with ADHD also have mood disorders such as depression. There is frequently a family history of these types of disorders. Coexisting mood disorders may put children at higher risk for suicide, especially during the teenage years. These disorders are more common among children with inattentive and combined types of ADHD.
- **Anxiety disorders**—these affect about 25% of children with ADHD. Children with anxiety disorders have extreme feelings of fear, worry, or panic that make it difficult to function.
- **Learning disabilities**— Learning disabilities are conditions that make it difficult for a child to master specific skills such as reading or math.

Treatment

Once the diagnosis is confirmed, the outlook for most children who receive treatment for ADHD is very encouraging. There is no specific cure for ADHD, but there are many treatment options available. Each child's treatment must be tailored to meet individual needs. In most cases, treatment for ADHD could include the following:

- **A long-term management plan with:**
- Target outcomes for behavior
- Follow-up activities
- Monitoring
- Education about ADHD
- Team work among doctors, parents, teachers, caregivers, other healthcare professionals, and the child
- Medication
- Behavior therapy
- Parent training
- Individual and family counseling

Treatment for ADHD uses the same principles that are used to treat other chronic conditions like asthma or diabetes. Long-term planning is needed because these conditions continue or recur for a long time. Families must manage them on an ongoing basis. In the case of ADHD, schools and other caregivers must also be involved in managing the condition. Educating the people involved with your child about ADHD is a key part of treating your child. As a parent, you will need to learn about ADHD. Read about the condition and talk to people who understand it. This will help you manage the ways ADHD affects your child and your family on a day-to-day basis. It will also help your child learn to help himself.

Side effects can stimulants cause

Side effects occur sometimes. These tend to happen early in treatment and are usually mild and short-lived. The most common side effects include the following:

- Sleep problems, and Headaches
- Stomachaches
- Decreased appetite/weight loss.

Some less common side effects include the following:

- Dry mouth, Jitteriness, Social withdrawal, Dizziness, Rebound effect (increased activity or a bad mood as the medication wears off) and Transient tics

Very rare side effects include the following:

Stuttering, Increase in blood pressure or heart rate, Growth delay and Most side effects can be relieved using one of the following strategies:

Changing the medication dosage, Adjusting the schedule of medication and Using a different stimulant

Behavior therapy

There are many forms of behavior therapy, but all have a common goal— to change the child's physical and social environments to help the child improve his behavior. Under this approach, parents, teachers, and other caregivers learn better ways to work with and relate to the child with ADHD. You will learn how to set and enforce rules, help your child understand what he needs to do, use discipline effectively, and encourage good behavior. Your child will learn better ways to control his behavior as a result.

CONCLUSION

ADHD continues into adulthood in most cases. However, by developing their strengths, structuring their environments, and using medication when needed, adults with ADHD can lead very productive lives. In some careers, having a high-energy behavior pattern can be an asset.

REFERENCES

1. Rief, S. F. (2015). *The ADHD book of lists: a practical guide for helping children and teens with attention deficit disorders*. Second edition. San Francisco, CA: Jossey-Bass, a Wiley brand
2. Rief, Sandra F. 2015. *The ADHD Book of Lists: A Practical Guide for Helping Children and Teens With Attention Deficit Disorders*. San Francisco, CA: Jossey-Bass, a Wiley brand.
3. Ananda S.P (1983), 'Disadvantaged children' a hand note presented to SS/CC students RCE Bhuvanewar
4. Chintamani Kar (1995), 'Exceptional Children' Sterling publishing private limited
5. Allen, Gorden, 'Patterns of Discovery in the Genetics of Mental Deficiency' American journal of mental deficiency, 62, march 1958. Pp.840-849.
6. AAP (American Academy of Pediatrics)
7. About Our Kids (from NYU Child Study Center)
8. Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)
9. Adapted directly from
10. American Academy of Pediatrics
11. The Zukerman Parker Handbook of Development and Behavioral Pediatrics for Primary care