

MANAGING CHILDHOOD BEHAVIORAL DISORDERS: *GOING BEYOND LABELS TO FIND THE ROOT CAUSE*

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Overview of Talk



- Definitions & Statistics
- Case studies
- Food/Digestion
- Supplements
- Environment
- Homeopathy
- Testing

Naturopathic Physicians



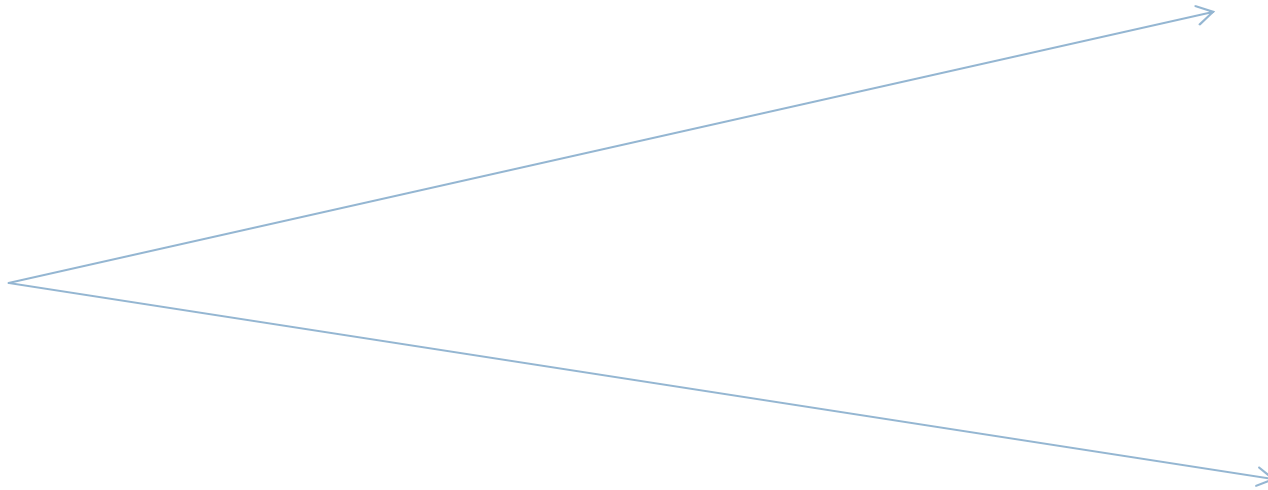
Education

- Undergraduate degree
- 4-years residential, accredited medical school
- 5-day national licensing exam
- Licensed as primary care physicians in 15 states
- Boise Natural Health – full service medical center offering natural medicine for men, women, children

Principles of Naturopathic Medicine

- **First Do No Harm**
- **The Healing Power of Nature –
*vis medicatrix naturae***
- **Discover and Treat the Cause, Not Just
the Effect**
- **Treat the Whole Person**
- **Physician as Teacher**
- **Prevention is the best “cure”**

Get 'em While They're Young



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Diagnostic Criteria

Attention Deficit/ Hyperactivity Disorder

- I. Two major subtypes, Inattentive & Hyperactive/Impulsive, each having nine features. To be diagnosed, a child must have at least six. Can have features of both (combined type).
- II. Some symptoms were present before age 7.
- III. Some impairment from the symptoms is present in two or more settings .
- IV. Clear evidence of significant impairment in social, school, or work functioning.
- V. The symptoms are not better accounted for by another mental disorder.

Diagnostic Criteria ADHD

Hyperactive/Impulsive Subtype

1. Fidgets when seated.
2. Often leaves his or her seat in the classroom.
3. Is restless, and runs around excessively.
4. Doesn't like quiet activities.
5. Is often active, and on the go.
6. Talks excessively.
7. Blurts out answers before questions are complete.
8. Has difficulty awaiting turn.
9. Interrupts conversations and games.

Diagnostic Criteria ADHD

Inattentive Subtype

1. Is not good at details.
2. Has difficulty sustaining attention.
3. Frequently fails to listen carefully.
4. Doesn't follow through on tasks well.
5. Is not good at organizing.
6. Dislikes sustained mental effort.
7. Often loses things.
8. Is easily distracted.
9. Is often forgetful.

Other Related Diagnoses



- Bipolar
- Depression
- Anxiety
- Obsessive Compulsive Disorder
- Oppositional Defiance Disorder
- Insomnia
- Autism Spectrum Disorders
- Asperger's

Vision Problems



- Symptoms of a vision problem can mimic ADHD
- Can have 20/20 vision
- Functional Vision Problem
 - ▣ Convergence insufficiency, dyslexia, eye teaming, tracking and perceptual vision problems

Is it ADHD or Vision Disorder?

| Comparative Symptoms of AD(H)D and of Vision Disorders | | | |
|--|---------------|-------------------------------------|-------------------------|
| Symptoms | ADHD(DSM-IV*) | Learning-Related Vision Problems | Normal Child Under 7 |
| Inattention (At least 6 are necessary): | | | |
| Often fails to give close attention to details or makes careless mistakes | X | X | |
| Often has difficulty sustaining attention in tasks or play activities | X | X | X |
| Often does not listen when spoken to directly | X | X | |
| Often does not follow through on instructions or fails to finish work | X | X | X |
| Often has difficulty organizing tasks and activities | X | X | X |
| Often avoids, dislikes or reluctant to engage in tasks requiring sustained mental effort | X | X | X |
| Often loses things | X | X | X |
| Often distracted by extraneous stimuli | X | X | X |
| Often forgetful in daily activities | X | X | |
| Hyperactivity and Impulsivity (at least 6 are necessary): | | | |
| Often fidgets with hands or feet or squirms in seat | X | X | X |
| Often has difficulty remaining seated when required to do so | X | X | X |
| Often runs or climbs excessively | X | | X |
| Often has difficulty playing quietly | X | | |
| Often "on the go" | X | | X |
| Often talks excessively | X | X | |
| Often blurts out answers to questions before they have been completed | X | X | |
| Often has difficulty awaiting turn | X | X | X |
| Often interrupts or intrudes on others | X | X | X |
| *DSM-IV: Diagnostic and Statistical Manual of Mental Disorders, 4th Edition | | | |

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Statistics of an epidemic

- ADHD has increased by 400 percent over the past twenty years
- DSM IV: 3%-7% of children have ADHD
- Studies have estimated higher rates in surveys of parents
- Approximately 9.5% or 5.4 million children 4-17 years of age have ever been diagnosed with ADHD, as of 2007
- Boys (13.2%) were more likely than girls (5.6%) to have ever been diagnosed with ADHD

Medication Statistics

- As of 2007, 2.7 million youth ages 4-17 years (66.3% of those with a current diagnosis) were receiving medication treatment for the disorder.
- Rates of medication treatment for ADHD varied by age and sex; with kids over 10 years old more likely to be medicated, and boys 2.8 times more likely to take medication than girls.

Peer Relationships



- Parents of children with a history of ADHD report almost 3 times as many peer problems as those without a history of ADHD.
- Parents report that children with a history of ADHD are almost 10 times as likely to have difficulties that interfere with friendships.

Economic Costs



- Using a prevalence rate of 5 %, the annual societal “cost of illness” for ADHD is estimated to be between \$36 and \$52 billion, in 2005 dollars.
- It is estimated to be between \$12,005 and \$17,458 annually per individual.

The Four Catastrophic Changes



- Toxins proliferated.
- Nutrition deteriorated.
- Vaccinations increased.
- Ability to detoxify dwindled.

The Four Catastrophic Changes



1. Toxins proliferated.

- The total toxic burden on the average American is measurably higher than it was even ten years ago.
- Our air, water, oceans, and food are highly polluted with heavy metals, hydrocarbons, pesticides, and countless other chemicals.
- Government controls are inadequate.

The Four Catastrophic Changes



1. Toxins proliferated.

- Children are exposed to the highest levels of nerve-damaging organophosphorous (OP) pesticides.
- Organochlorines can seriously disrupt brain development of infants, triggering learning disabilities.
- (*Second National Report on Human Exposure to Environmental Chemicals*. 2003, The CDC)

The Four Catastrophic Changes



2. Nutrition deteriorated.

- Over the past 3 decades, fast-food retail sales in the United States have soared 900%, from \$16.1 billion in 1975 to \$153.1 billion in 2004.
- Nutrients in healthy foods like fruits and vegetables have declined dramatically over the last 50 years due to conventional farming practices.
- Besides the obvious implications for obesity, it's the subtle metabolic damage of poor food choices that toxify the body and deplete it of the nutrients needed to protect and restore itself.

The Four Catastrophic Changes



3. Vaccinations increased.

- Vaccinations doubled in number since 1991, which increased the load of toxic mercury, increased the frequency, and increased the probability of children receiving multiple vaccinations in a single injection. Mercury has now been removed from most vaccinations, many flu vaccines being a notable exception.
- Administering thimerosal-free vaccines to robustly healthy kids ONE AT A TIME in single dose vials will greatly increase their safety profile.

The Four Catastrophic Changes



3. Vaccinations increased.

- For more info about vaccines, see *What Your Doctor May Not Tell You about Children's Vaccinations*, by Stephanie Cave, MD

The Four Catastrophic Changes



4. Ability to detoxify dwindled.

- The toxins that entered children's bodies over the past 10-20 years became more likely to stay there, due to damage among millions of children to two important detoxification processes: **methylation** and **sulfation**, which remove mercury and other toxins.
- A gross overload of mercury debilitates the process of methylation.

Food & Nutrition



- Water
- Glycemic Control
- Digestion
- Allergies / Intolerance
- Nutritional Deficiencies

Water



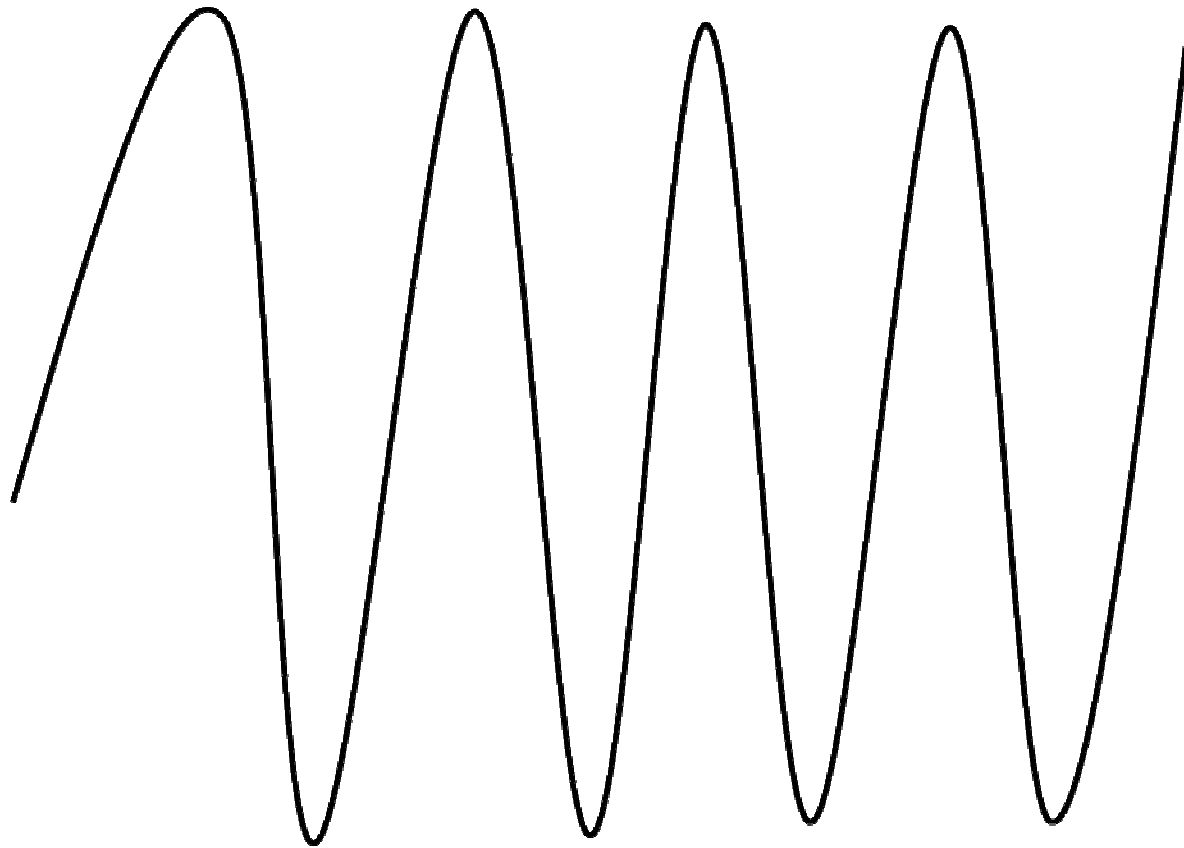
- Body is 60 – 70% water
- Signs of dehydration – fatigue, irritable, poor concentration, sore muscles, headache, dry lips
- Thirst confused with hunger
- Filtered water is best
- Juice and soda are not water
- Artificial sweeteners can be neurotoxic

Macronutrients



- Protein
- Fat
- Carbohydrates
 - ▣ Simple - Complex carbohydrates - Fiber

Glycemic Control



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Glycemic Index

HI GI Foods

- **Baked potato**
- **Cheerios**
- **Cornflakes**
- **French fries**
- **Ice cream**
- **Table sugar**
- **Watermelon**
- **White bread**

Medium GI Foods

- **Bananas**
- **Brown rice**
- **Popcorn**
- **Raisins**
- **Whole wheat bread**

Low GI Foods

- **Apples**
- **Lentils**
- **Oatmeal**
- **Plain yogurt**
- **Sweet potato**

Poor Digestion



- ❑ Constipation / diarrhea / gas / bloating / chronic stomach aches / heartburn
- ❑ Low hydrochloric acid, enzymes
- ❑ Inflammation in GI tract, Leaky gut
- ❑ Dysbiosis
- ❑ Poor digestion leads to downward spiral of more nutrient deficiencies and more food intolerances

Adverse Food Reactions



- Very common in this population
- Allergies - IgE
- Intolerances – these reactions are often delayed making them difficult to identify
- Gluten, Dairy, Eggs, Soy, Corn, Sugar, Artificial Colors, Preservatives and Sweeteners

Diagnosing Adverse Food Reactions

- Elimination / Challenge
- Blood Tests
- NAET

See articles on BNH website:

1. Are Foods Causing Your Symptoms?
2. Finding Solutions to Your Allergy Problem

Nutritional Deficiencies

- Protein
- Fats – Omega 3
 - 80% of population deficient
 - Fish Oil
- Carbohydrates – simple vs. complex
- Vitamins
 - B-12, folic acid, b-vitamins
- Minerals
 - Iron, magnesium, chromium, trace minerals

Basic Supplementation

- High-quality multivitamin-mineral supplement
 - ▣ Includes B-complex, vit E, calcium/magnesium
 - ▣ Above RDA, no colors or dyes, no fillers
- Omega-3 oils
 - ▣ fish oil 500 – 2000 mg of EPA and DHA
 - ▣ Liquid, chewable or capsules
- Specific needs

Specific Needs Supplementation

- Amino Acids and Herbs – directly influence brain chemistry to help with focus, attention, energy, depression, anxiety
- Sleep aids – to help with insomnia and sleep quality
- Digestive aids - enzymes
- Probiotics – good bacteria, antifungals
- Antimicrobials – fight chronic infection
- Nutrients – to correct deficiencies

Basic Dietary Recommendations

- Water
- Whole Foods
 - ▣ Whole grains, nuts and seeds, fresh fruits and vegetables, unprocessed meats, healthy fats
- Glycemic Control
 - ▣ Protein with every meal and snack
 - ▣ Low Glycemic Index
 - ▣ Eat every 2 – 3 hours
- Avoid reactive foods
- Supplementation

Environment



- Sleep
- TV / Electronics
- Nature
- Lighting / Noise
- Physical comfort and accommodation
- School
- Family

Sleep Deprivation



- Even low levels of sleep deprivation can bring on symptoms that look a lot like the psychiatric disorders that kids are labeled with

Sleep Needs

| Age | Hours |
|---------------------|---|
| Infant to 6 months | 16 - 20 |
| 6 months to 2 years | Roughly 15 |
| 2 to 6 years | 10 - 12 |
| 7 – 13 | 9 – 11 |
| 14 – 18 | 9 – 10 varies greatly day by day, altered circadian rhythms |

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Homeopathy

- Gentle, effective natural medicine
- Usually given in small pellets under the tongue
- Uses small amounts of substances that in large amounts would create the symptoms
- Very helpful adjunct to biochemical therapies

Resources: *Beyond Flat Earth Medicine*,
DooleyMD,

Ritalin Free Kids, Judyth Reichenberg-Ullman
and Robert Ullman

Lab work



- Blood work
 - CBC, CMP, Ferritin, Thyroid, Vit D
- Heavy Metals
 - Mercury, lead, aluminum, arsenic
- Immunity / Infection
 - PANDAS – antibodies against strep attack brain
 - Dysbiosis – comprehensive digestive stool analysis
- Food Allergies / Intolerances
 - IgG ELISA 96 Foods

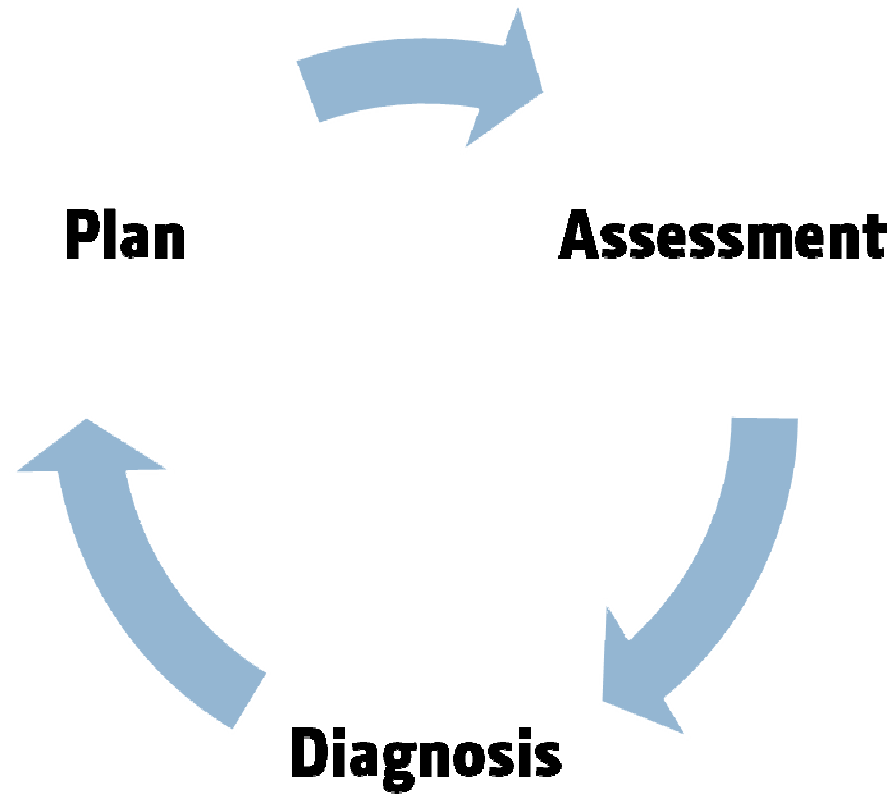
Parents – Help Yourself First



Overwhelmed – GET HELP

- ▣ Recognizing their own diagnosis
 - ADHD, Hormone, Thyroid, Fatigue, Food Allergies
- ▣ Family systems need to change
 - Routines, home environment, values, technology
- ▣ Parenting styles
 - Parenting classes

3 step process



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Reliable Resources

Please Don't Label My Child

Scott M. Shannon, MD and Emily Heckman

Healing the New Childhood Epidemics

Kenneth Bock, MD and Cameron Stauth

Ritalin Free Kids

Judyth Reichenberg-Ullman, ND & Robert
Ullman, ND

www.boisenaturalhealth.com



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