

# How To Become An Expert Parent in ADHD

(In 60 minutes or Less)

Dr. Paul Soper MD FRCPC  
Child & Adolescent Psychiatrist  
Glenrose ADHD Clinic

# Introduction

- Child and Adolescent Psychiatrist
  - 80% Glenrose Complex ADHD Clinic (Difficult to Treat ADHD)
  - 20% Rural Care (Peace River, High Prairie, Fairview, High Level - Telehealth F/U)





# The Family

# Objectives

- Because you will always be there I would like to Help You become an expert in the follow areas:
  - Assessment of ADHD
  - Treatment of ADHD
  - Follow up of ADHD

# Disclosure

- This presentation is not intended to replace medical consultation with your child's physician.
- All medical decisions should be discussed with the treating physician.

# What is ADHD? The Official Answer

# DSM 5 Symptoms of Inattention in ADHD

- 1. Frequently makes Careless Mistakes**
- 2. Difficult sustaining attention in activities**
- 3. Doesn't listen**
- 4. No follow-through**
- 5. Avoids/dislikes task requiring sustained mental effort**
- 6. Can't organize**
- 7. Loses important items**
- 8. Easily distractible**
- 9. Forgetful in daily activities**

# DSM 5 Symptoms of Hyperactivity-Impulsivity in ADHD

1. **Squirms and fidgets**
2. **Can't stay seated**
3. **Runs/climbs excessively**
4. **Cant play/work quietly**
5. **“On the go”/”driven by a motor”**
6. **Talks excessively**
7. **Blurts out answers**
8. **Cant wait turn**
9. **Intrudes/interrupts others**



# Complexity of ADHD Diagnosis

1. Careless Mistakes
2. Difficult sustaining attention in activity
3. Doesn't listen
4. No follow-through
5. Avoids activities that require sustained attention
6. Can't organize
7. Loses important items
8. Easily distractible
9. Forgetful in daily activities

1. Squirms and fidgets
2. Cant stay seated
3. Runs/climbs excessively
4. Cant play/work quietly
5. "On the go"/"driven by the need to move" excessively
7. Blurts out answers
8. Cant wait turn
9. Intrudes/interrupts others

THERE ARE OVER 1000 DIFFERENT WAYS TO QUALIFY FOR AN ADHD DIAGNOSIS

# What is ADHD?

## The Unofficial Answer

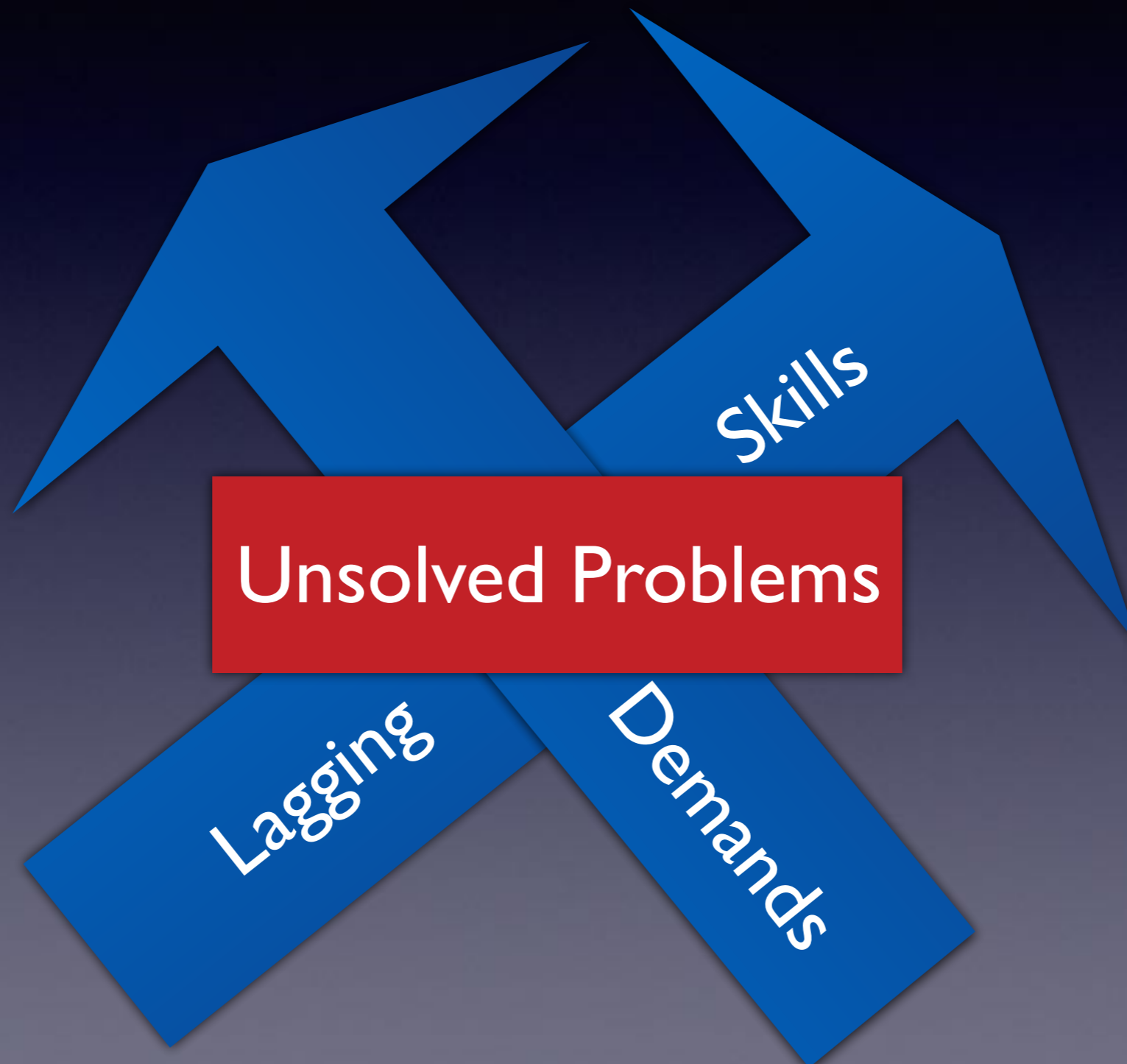
- “How do you know my kid has ADHD?”
- Dr. Soper says “Depends on what you mean by know...”
  - ADHD is a clinical (non-laboratory) diagnosis that can be reached through many paths (Looks like a duck...). There are over 1000 ways to reach meet criteria for the disorder..
  - There are no tests/imaging.
  - I am not 100% correct. This is about probabilities.

# Assessment

## The Bottom Line

- “What is ADHD?”
- Dr. Soper says
  - “A delay in development of parts of the brain” (some eventually arrive).
  - “A Ferrari with bad breaks”
  - “A weakness that can be helped by a pill”

# My Perspective



# Treatment - CADDRA

(and every other guideline on earth)

- Basically involves these Elements:
  - Parental Education
  - Parent Training
  - Lifestyle Optimization (Sleep, Diet, Exercise)
  - Medication

# Treatment - Dr. Soper

## Lifestyle Strategies

- Sleep - Average Sleep Per Age
  - If child wakes on their own/with little difficulty without sleepiness during day they are probably fine.
- Diet - Omega 3s; Food Coloring
- Exercise - 1 hr outdoor before school. It lasts about 4-6 hours.

# Stimulants

RITALIN	duration	DEXEDRINE
Ritalin (must swallow)	4hrs	Dexedrine (must swallow)
Ritalin SR (must swallow)	4-6hrs	Dexedrine SP (must swallow)
Biphentin (Sprinkle)	6-10hrs	Adderall XR (Sprinkle)
Concerta (must swallow)	8-14hrs	Vyvanse (Dissolves)
Foquest (Sprinkle)	up to 16 hrs	

# Treatment - Dr. Soper

Stimulants		Strattera/Intuniv
45 minute	ONSET	2-6 weeks
4-14 hours	DURATION	24 hours
0.9-0.95	EFFECT SIZE	0.65
5-10%	SIDE EFFECTS	4-8%
worse/same	ANXIETY	better/same
worse/same	TICS	same/improved
yes	HOLIDAYS	no
cheap ones	Covered	no
\$30-150/mth	Cost	\$90-150/mth



# Questions Parents Ask: Treatment

- “So this would be an experiment on my child...”
- Dr. Soper says “Yes.”
  - 85% will have a good response to Ritalin or Dexedrine. (15% will not!!!)
  - Pick one and there is a 43% chance it is not the ideal med. (15% + (33% of 85%))

# Questions Parents Ask: Treatment

- “Does my child need meds?”
- Dr. Soper says “Depends on what you mean by need?”
- “Most families find that the benefits outweigh the costs/side effects.”

# Questions Parents Ask: Treatment

- “How long will my child remain on the medication?”
- Dr. Soper says “As long as the costs outweigh the benefits...This is what I really hope the meds help with...”

# Development

ADHD  
Child

Better Focus  
Better Grades  
Less Hyper  
Less Impulsive

Emotionally  
Healthy  
Adult

1. ~~What~~ What Do Children
2. ~~EMPIRICAL~~ ADHD need?
3. CONNECTION

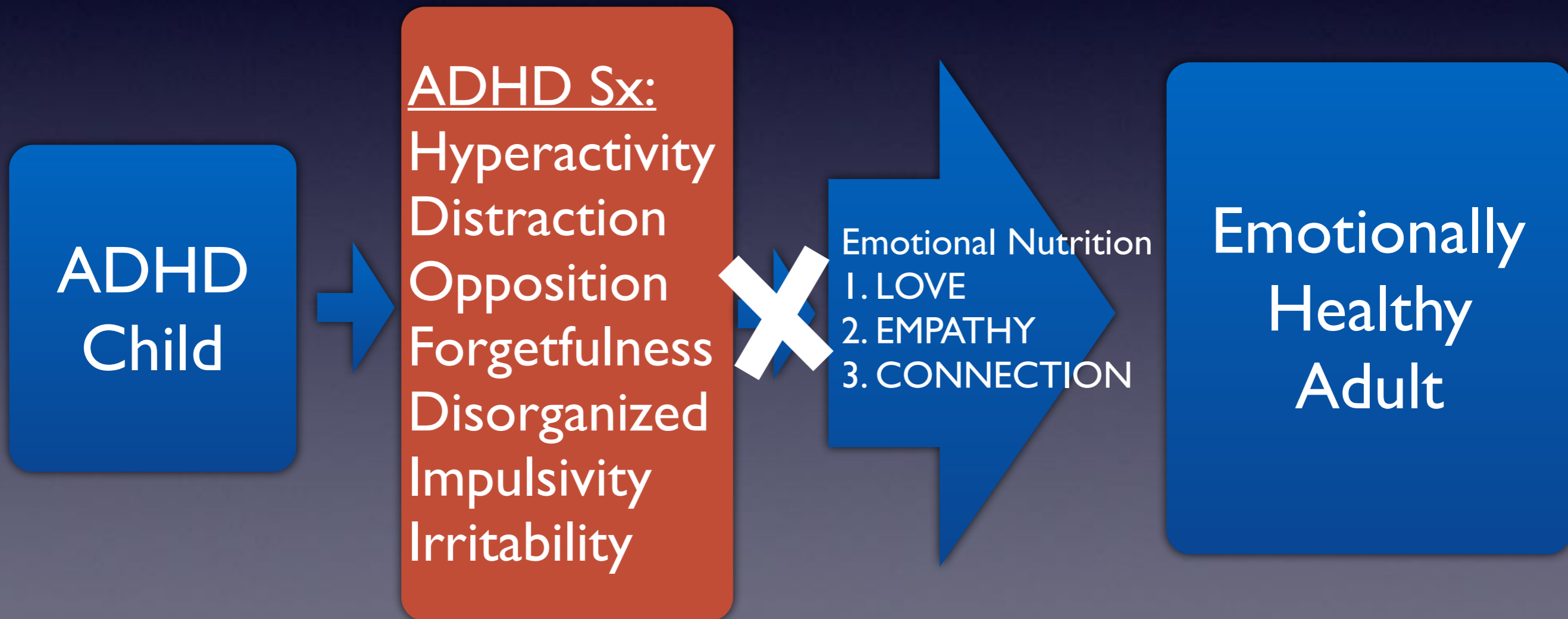
# Development

ADHD  
Child

Emotional Nutrition  
1. LOVE  
2. EMPATHY  
3. CONNECTION

Emotionally  
Healthy  
Adult

# Development



# What do You Do?

- Look at your perspective
  - All treatments weigh:
    - The ability of the ADHD child to access Emotional Nutrition
- VS
- Any side effects or costs



# What Do You Do?

- All treatments (Meds, Therapy, Diets...) should be helping that child to access:
  - Love
  - Empathy
  - Connection

# Questions Parents Ask: Treatment

- “Will this harm my child in the long run?”
- Dr. Soper says “Maybe. He might be an inch shorter. Otherwise, studies suggest there are reduced rates of depression/anxiety, conduct disorder/ODD, and repeating a grade.”
- “These are some of the best studied treatments in all of medicine...”

# Treatment - Side Effects

- 1cm/yr for 1st two years ON AVERAGE
  - Normalizes after this
- Decreased Appetite (25-35%)
  - Wt loss and Abdominal pain too
- Problems Falling Asleep (10-20%)
- Irritability (2-10%)

# Questions Parents Ask: Treatment

- Parents say:
  - “I’ve heard some many bad things about Ritalin...”
- Dr. Soper says
  - “Did watch the news last night...”

# Questions Parents Ask: Treatment

- “I’ve heard this will turn my kid into a cocaine/meth/crack addict.”
- Dr. Soper says, “No. There is no difference in addiction rates.”

# Questions Parents Ask: Treatment

- “This all overwhelming. I don’t know what to do.”
- Dr. Soper says, “Here’s your options...”
  1. Do nothing. Go home. Think; read; talk it over with your partner.
  2. Try the non-medication stuff.
  3. Start the med now or call me later to start the med

# Questions Parents Ask: Treatment

- “I’m not going to start meds.”
- Dr. Soper says “That’s fine. I get worried when parents don’t have reservations about starting meds. You have to keep in mind the risk of not treating.”

# Questions Parents Ask: Treatment

- “The meds don’t work.”
- “My child is worse...”
- Dr. Soper says, “When don’t they work?” or “When are they worse?”
- Need to check for rebound.



# Questions Parents Ask: Treatment

- “My child is not sleeping.”
  1. Google Sleep Hygiene Kids
  2. Change Med (Decreased Duration vs Different Med)
  3. Melatonin (1-15 mg/night)
  4. Talk to your doctor about other sleep options

# Questions Parents Ask: Treatment

- “My child is not eating/gaining wt”
  1. Increase intake in morning and evening.
  2. Increase calorie content of food.
  3. Increase frequency of food/snacks.
  4. Supplement with shakes, pediasure...

# Questions Parents Ask: Treatment

- “My child is more irritable/moody/sad/angry/wild/crazy...”
- Dr. Soper says “Can you wait a week? If not, stop it and we will try something else.”

# Questions Parents Ask: Stealing and Lying

- There are very few problems in children's mental health with which we cannot help a lot.
- Lying and Stealing are two that we usually don't help much. :(

# Questions Parents Ask: Follow up

- “The meds don’t seem to work anymore. It worked well for the last 8-12 months and gradually it doesn’t seem to be working.”
- Dr. Soper says “Increase it.”

# Questions Parents Ask: Cannabis Oil

- There are no well controlled studies and very few case studies. Period.
- We are in the process of a rather large uncontrolled societal experiment.
- Doctors are scientists who care. (Most are not making much/any money from pharmaceutical industry). I know most of your doctors.

# Questions Parents Ask: How Can My Kid See You?

- Bottom Line: They Can't :(.
- The ADHD clinic at the Glenrose is temporarily closed and sadly I'm not sure when it will open.
- However, I'm not the best. For the bulk of ADHD, pediatricians are better (as long as parents are experts).

# Conclusions

- In the end, I hope I've conveyed the following:
  - ADHD is not as scary/complex as it sometimes seems.
  - Parents can be experts in ADHD. (You can also ask your pediatricians/family doctors to call me for advice).