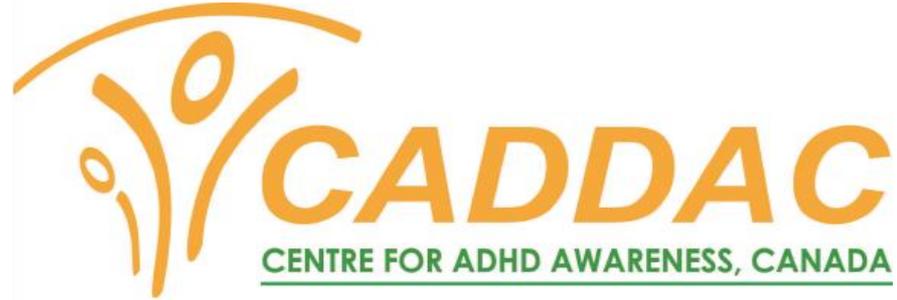


The Centre for ADHD Awareness, Canada

Is a national not-for-profit organization providing leadership in education and advocacy for ADHD organizations and individuals with ADHD across Canada.



My Child Has Just Been Diagnosed with ADHD – Now What?

WHAT DO I DO FIRST?

Educate Yourself About ADHD

- This can occur prior to the diagnosis; it will also help confirm the diagnosis in your mind.
- Learn the difference between ADHD facts and myths.
- Understand that ADHD is a complex disorder that presents with a wide variety of impairments and coexisting disorders.
- Access up-to-date, medically backed, information on general ADHD symptoms and impairments including:
 - all the ways ADHD impairs attention,
 - hyperactivity and impulsivity,
 - learning,
 - self and emotional regulation, and
 - executive functioning.





Where do I find this Information?

Reputable Web sites – Google

Canadian

- CADDAC – web site, webinars, educational videos
- CADDRA – geared to medical professionals
- Canadian Pediatric Society + ADHD
- TotallyADHD – for adults

US

- Dr. Russel Barkley – web site, videos, books
- Dr. Thomas E. Brown – web site, videos, books
- CHADD – US focused information
- ADDA – US adult information

Core Beliefs that You Will Need to Accept About ADHD

ADHD is here to stay.

- Most often ADHD is a life long disorder; 80% of children still have ADHD as adolescents; 60+% of adults still have significant impairing symptoms.

ADHD need not prevent your child from doing well in life.

- Those with ADHD can complete post-secondary education, succeed at a career and have a good family life experience. BUT, IT WILL TAKE UNDERSTANDING & HARD WORK.

ADHD cannot be trained out of your child.

- However, you can be taught behavioural strategies and how to implement accommodations, executive functioning and social skill training in the home.

Parenting a child with ADHD requires training and more effort.

- ADHD is not caused by bad parenting, but will require specialized and more consistent parenting.

ADHD is a family affair.

- ADHD is a highly heritable disorder; chances are, a parent or sibling will also have ADHD. **Everyone needs to be diagnosed and treated. An undiagnosed and untreated parent will undermine appropriate parenting strategies.**



Educate Others About ADHD

Other Adults

- All significant adults in the child's life should be educated about ADHD for consistency.
- Inform them about reputable web sites and online education sessions such as CADDAC's educational videos and webinars.
- Caution them about randomly searching the Internet as they will access disreputable web sites.
- Teach them how to vet web sites and ADHD research.
- Teach them how to read and vet media reports on ADHD.

Siblings

- Your other children should be informed about their sibling's ADHD – use CADDAC's resources, books and videos.



Educate Your Child About ADHD

The Child or Adolescent

- Your child needs to be informed about their ADHD in a positive and constructive way.
- Otherwise, they will be informed by others in a non-constructive way.
- Use CADDAC animated videos or books.

Key Messages

- Everyone has strengths and weaknesses – you are great at ... but not...
- ADHD is nothing to be ashamed of.
- You are just as smart as other kids.
- Your parents and teachers are here to help you become more successful.



EVALUATING ADHD WEBSITES, RESEARCH AND MEDIA

Websites

Questions to Ask Yourself

- Is the web site's hosting organization or individual clearly stated?
- Are they a reputable ADHD organization or ADHD expert? Is the site linked to by other reputable experts or organizations?
- Are they a medical organization, or are they recognized by medical organizations or government web sites?
- Are they trying to discredit ADHD as a legitimate disorder and for what reason?
- Are they trying to sell you a product or a quick fix for ADHD?
- What is their level of expertise in ADHD?



Research

Questions to Ask Yourself

- Are you reading the actual study or a media release or article on the study? Be cautious of sensationalism.
- Has this study been published in a reputable medical journal?
- How large is the study?
- Is this the first study of it's kind or has the study been duplicated with similar results?
- Does the study use proper methodology?
- Is it is blinded or double blinded study? Does the placebo effect come into play?
- Are the results anecdotal or extracted from hard data?
- Is the conclusion reached a correlation or causation and is this made clear? Think about the chicken and the egg.



Media

Remember that media's goal is to get the most eyes possible on their article.

Questions to ask Yourself

- Does the article seem biased?
- Is the information stated in a sensational way?
- Is the article trying to sell you on an idea, approach or product rather than just reporting on it?
- Is this an advertorial?
- Is the journalist trying to be overly balanced? Are they reporting on both sides of a debate, by not stating what 95% of experts believe ... - similar to climate change?
- Is the article an opinion piece?
- If so, would the platform publish it if depression was substituted for ADHD?
- Is the content Canadian? Are the quoted experts Canadian?



YOUR CHILD'S COMPREHENSIVE PROFILE

Why does Your Child Need a Comprehensive Profile?

- 50 % of children with ADHD have a coexisting disorder such as a LD, anxiety, depression, TS, ODD, substance abuse etc.
- This increases as age increases.
- ADHD also occurs with many other disorders such as: Autism, Tourette Syndrome, Bipolar, and FASD.
- If coexisting disorders, either physical or mental, coexist with ADHD all disorders need to be taken into account and treated or treatment will fail or not be optimized.



ADHD rarely occurs by itself!

With permission of Dr. Rosemary Tannock

Comorbid mental health conditions		Comorbid learning disabilities	
Anxiety/mood disorders	25%-48%	Oral language disorders	8%-30%
Severe tics/Tourette's disorder	11%	Reading disorder	15%-40%
Oppositional defiant disorder (Aggression)	40%-60%	Mathematics Disorder	10%-25%
Conduct Disorder (Aggression)	14%-20%	Written language expression	65%?
Bipolar Disorder (Aggression)	Rare (0.2%)	Developmental Coordination Disorder	40% - 60%

Carroll et al (2005) J Child Psychol Psychiat 46:524-532; Jensen et al (2001) JAACAP 40:147-158; Kessler et al (2005) Am J Psychiatry 163:716-723; Reich et al (2005) Twin Res Hum Genet 8:459-466



What is a Comprehensive Profile?

- It is a full understanding of your child's strengths and needs.
- Other disorders may require additional testing, but within the assessment ensure that your child has been screened for;
 - other physical medical problems including eyesight, hearing, thyroid etc.;
 - possible coexisting mental health disorders with a family history of these disorders taken; and
 - learning disabilities and executive functioning impairments.

Why Would You Consider a Psychoeducational Assessment?

Possible Reasons are:

- your child is struggling academically or behaviourally at school above what is expected with ADHD;
- impairments indicate a possible learning disability may also exist;
- your child's behaviour indicates extreme frustration or avoidance when asked to do specific learning tasks;
- other disorders have already been assessed and the findings do not explain the impairments you see;
- you want to know your child's learning profile, their learning strengths and weaknesses; or
- the school has requested one – question why.





Psychoeducational Evaluation and Neuropsychological Testing

Both are used to assess the child's learning strengths and weaknesses.

Psychoeducational Testing

- Assesses the child's cognitive (i.e. intellectual) abilities, academic achievement levels, and general emotional and behavioral issues

Neuropsychological Testing

- This is more in-depth – looks at processing, memory, visual-spatial, language, executive functioning.

This testing can include an ADHD assessment.

Prior to testing understand what is being tested!

Tips for Parents When Accessing Psychoeducational Testing

- The child should be a minimum of 7 years in age.
- This testing costs between \$2500 to \$3500.
- You do not need psychoeducational testing for an ADHD assessment.
- Confirm that the psychologist is also an expert in ADHD and knowledgeable on school advocacy.
- Always ask about the testers qualifications; unless the person is a registered psychologist they cannot make a diagnosis.
- Psychometrists may be supervised by a psychologist who is registered and can diagnose – varies per province.
- Ask if a comprehensive list of recommendations will be included in the report.
- Accommodation requests need to be tied to impairments.
- Remember that the person who is paying for the testing (parents or the school) dictates what testing is done and who owns the report.



Language Used in PsychEd Reports

- You should always receive a face to face explanation of the report. Ask for terminology to be explained.
- The language used in these reports can be helpful or harmful to students requesting special education services.
- The word recommend equals suggest in the school's interpretation and gives them permission to ignore the recommendation.
- It is better stated as, "It is **essential** that the student receive **(needs or requirements)... to be able to successfully access the curriculum**".
- Parents may ask for the school report to be edited if the content is too personal or the language is an issue.
- Remember that educators are not trained in reading these reports, you may need to explain the findings.



Executive Function (EF) Assessments

- EF weaknesses are only one of several ADHD weaknesses.
- Overall those with ADHD perform less well on EF measures¹ – however not all children with ADHD display deficits on data driven EF measures.²
- There are two major classes of assessment tools – (data) performance-based tests and rating scale measures.⁵
- Impairment on one does not translate into impairment on another.³
- These tests measure different aspects of Executive Functioning.⁴
- Performance-based tests measure executive functioning in a highly structured environment often an optimal setting.⁴
- Rating measures of executive function occur in daily unstructured environments which require executive control.⁵

1. Toplak et al (2005)
2. Nigg et al (2005)
3. Biederman et al (2008)
4. Toplak et al (2013)
5. Topla et all 2017)



Problems With EF Testing

Performance based

- Few if any of the standardized tests (performance based) accurately quantify the nature of the cognitive or academic impairments that characterize ADHD.¹
- Neuropsychological tests of executive function have low ecological validity for those with ADHD.
 - Less than one third of adolescents and adults with ADHD, although functionally impaired by their ADHD, show impairment levels in test data alone within standardized psycho-educational assessments.²
 - Only half of children with ADHD show significant impairment in specific EF functions on performance based tests.³

1. CADDAC (2015)
2. Barkley et al (2011)
3. Willcutt et al (2005)



Why is This Important to Know?

Performance based tests:

- Occur in a highly structured optimum environment, 1:1, with specific and immediate feedback and prompts.
- They are a one time level of performance.
- Low levels may indicate potential weaknesses in processing.
- Average results may indicate that highly structured environments may increase functioning.
- **If impaired in daily life functioning, the conclusion should be that this child could benefit from a highly structured environment with additional supports.**
- Most often the opposite occurs; schools use data driven results to show that the student is not impaired enough for support and bar them from an IEP and accommodations.



DO I TELL THE SCHOOL?

Do I tell the School?

- Yes, the school needs to know in order to better support your child.
- A student would require some form of recognition of a learning need, weakness or disability (be an academic risk) to receive additional services.
- However, choose wisely when sharing medical documents with the school; you may wish to keep some family information private.
- Ensure that you share the whole child's profile including their strengths and accomplishments.



Fear of Labeling

- Parents and the student themselves often fear labelling as a special needs student.
- They fear that receiving these services will label a student in the eyes of uneducated peers.

However,

- If a student is struggling academically, socially or behaviourally they have already been labeled in the minds of their peers, educators and parents of their peers.
- The incorrect labels, of “stupid, lazy, bad” are more stigmatizing than the correct medical label.
- Using the correct medical label will build awareness and understanding, help the child fight existing stigma, own their profile and help teach the child how to advocate for themselves.



BECOMING YOUR CHILD'S ADVOCATE

Advocating for Your Child

- Know that advocacy is a necessary part of your child's treatment plan.
- Listen to and then weight advise from experts in ADHD, but do not give up your power.
- After you educate yourself on ADHD understand that you still know your child best.
- Know that you above all will have your child's best interest at heart;
 - others will have time constraints,
 - or divided loyalties no matter how well meaning.
- No one will a be better advocate for your child once you are educated and prepared.



First Steps in Becoming an Advocate

- Become knowledgeable on your province's health care and education systems; access the CADDAC Provincial Report Card.
- Know what the hierarchy and titles are of your school board and Special Education (SE) systems and search for allies.
- Educate yourself on your rights and your child's rights within the education law – use CADDAC webinars.
- Educate yourself on your province's Human Rights Guidelines.
- Get organized! You will need to become your child's case manager, the keeper and distributor of reports to whom you decide.
- Understand your child's strengths and needs – each child will have a unique profile.
- Prioritize your concerns and “asks” – be specific.



Advocacy Rules

- Informed, calm, organized parents who know the system and their rights are the most formidable.
- “Be assertive, not aggressive. Note: an assertive person clearly states a point of view, but takes into account other points of view as well, then works for the right outcome cooperatively.” Georgina Rayner
- Practice what you are going to say, communicate clearly.
- Approach this in a business like manner- keep emotions under check, even when difficult – keep egos out of it.
- All correspondence should be in written format. Use letters or e-mails and then print and file them.
- Keep everything in two binders, one for school and one for health reports. Take these with you to meetings.
- If a face to face meeting happens take notes (or have someone with you to do so) and follow-up with an e-mail summarizing the meeting and decisions.
- Finish all correspondence on what you are expecting to happen next and when you expect further communication.



Important Tips

- Do not automatically sign agreements before doing your research no matter who pressures you – you can always ask to take them home first.
- If you agree with the proposal, after consideration, sign so implementation of a program or IEP can occur.
- Do not sign blanket disclosure agreements for medical information.
- Always be in the room for conference calls between your doctor and the school.
- If resources or accommodations are being put in place always follow-up after a reasonable amount of time to discuss their implementation and success or failure.
- If they have failed the next step is to discuss alternative options and then evaluate their success.



INDIVIDUALIZED EDUCATION PLANS

IEPS, SEPS, IPPS, SSPS, ISSPS

Individualized Education Plans

IEPs, SEPs, IPPs, SSPs, ISSPs

- Know that as a parent you have the right to be involved in the development of your child's individualized education plan. Use the CADDAC educational charts for assistance.
- You have final say on the placement of your child – do your home work and investigate and tour any offered placements.
- Review the plan in detail; is it individualized to your child or a cut and paste of common accommodations?
- Does it include detailed information on classroom accommodations and teaching strategies that will assist the child meet their goals or focus primarily on what the child needs to accomplish?



Special Education Terms to be Aware of?

An education program is either modified or accommodated. Accommodations can be in teaching, assessment or environment.

Modification: This generally refers to the modification of the student's curriculum generally reduced from their expected grade level, but some provinces use this term to mean modification in the classroom.

Accommodation/Adaptation: Changes to the environment, teaching process or process used to evaluate a student's performance meant to reduce the effect of the disability. There is no change in curriculum or expectations of students.





Review of CADDAC Charts

1. [Elementary Chart](#)
2. [High School Chart](#)
3. [Teaching Strategies for Typical ADHD and Executive Functioning Impairments](#)
4. [Instructions for medical professionals](#)

Found on the CADDAC web site, under Understanding ADHD, in Education, [Classroom Accommodations](#)

TEACHING STRATEGIES

For Typical ADHD & Executive Functioning Impairments

Specific Learning/Classroom Presentation of ADHD/EF Impairments	Teaching Strategies /Accommodations
<p>1. Difficulty Sustaining Attention and/or Easily Distracted</p>	<ul style="list-style-type: none"> • Reduce visual and auditory external stimuli • Keep visual distractions at the front of the class to a minimum • Cue student before giving directions • Ask student to repeat instructions to confirm comprehension • Attempt to actively involve student in lesson – cue and use prompts to encourage and set up opportunities to participate • Give frequent, specific, immediate feedback • Dramatize information • Reward attention and timely accomplishments • Break activities and lessons into small units • Teach self- monitoring of their own attention – stop and ask themselves if they have been listening – prompts can assist • Change teaching style frequently to capture the student’s attention • Use physical proximity and agreed upon touch to redirect attention • Use earphones, study carrels, quiet places, preferential seating • Reduce noise stimuli with the use of a FM system, tennis balls on the legs of chair • Allow for use of headsets with music when working • Allow the use of chewing gum, sour candies or straws to chew on as many as they may aid concentration
<p>2. Difficulty Following and Holding Directions in Mind</p>	<ul style="list-style-type: none"> • Ensure the student has heard you and you have their attention before giving directions • Use visual, non-verbal, gesturing cues to alert student that important instructions are coming • Use a multi-sensory approach with both visual & oral instructions • Rephrase and repeat directions allowing time for processing • Encourage the student to ask questions to clarify their understanding



ADHD Symptoms, Impairments and Accommodations in the Elementary School Environment

DSM-5 Symptom	Possible Resulting Impairments in Elementary School	Possible Accommodations
Inattention		
Fails to give close attention to details OR makes careless mistakes	<ul style="list-style-type: none"> <input type="checkbox"/> Difficulties with including details such as name and date <input type="checkbox"/> Difficulty picking up details and nuances in questions and assignments, misinterprets questions <input type="checkbox"/> Rarely checks for errors, proof reads or edits <input type="checkbox"/> Poor quality of work – inaccurate, careless mistakes <input type="checkbox"/> Poor time management so doesn't leave time to complete details or check for mistakes 	<ul style="list-style-type: none"> <input type="checkbox"/> Allow to write exams on computer with spellcheck software <input type="checkbox"/> Education staff to review assignments, check details, assist with time management & due dates, do not deduct marks unless reviewed and reminders given <input type="checkbox"/> Flexibility in due dates – with opportunity to complete details & correct mistakes <input type="checkbox"/> Allow clarification of questions on an exam or test and clarification of an assignment
Difficulty sustaining attention	<ul style="list-style-type: none"> <input type="checkbox"/> Difficulties remaining focused during class, conversations, or reading lengthy material <input type="checkbox"/> Day-dreaming or mind-wandering during teaching, instructions, working or reading <input type="checkbox"/> Unable to refocus after mind wanders <input type="checkbox"/> Difficulty focusing on & completing large amounts of written work <input type="checkbox"/> Starts on assignment then loses focus <input type="checkbox"/> Gaps in learning due to inability to stay focused during teaching 	<ul style="list-style-type: none"> <input type="checkbox"/> Preferential seating away from distractions and close to other student who models on task behaviour <input type="checkbox"/> Use agreed on prompts to refocus on work or listening <input type="checkbox"/> Check that you have their attention before giving instructions <input type="checkbox"/> Review instructions and assignments with student when others working to ensure understanding <input type="checkbox"/> Provide assignments in written or online format so student/ parent/tutor can refer back at any time <input type="checkbox"/> Allow student to receive notes & copies of presentations, allow use of a note-taker <input type="checkbox"/> Use of computer for tests or exams <input type="checkbox"/> Allow testing/exams to be completed over several shorter sessions rather than one long session <input type="checkbox"/> Do not assign several tests and assignments within a day or short period
Difficulties listening when spoken to directly	<ul style="list-style-type: none"> <input type="checkbox"/> Mind often wanders when discussing something with peers <input type="checkbox"/> Often misses social cues or key words during one-on- 	<ul style="list-style-type: none"> <input type="checkbox"/> Check that you have their attention when speaking to them <input type="checkbox"/> Gently prompt to redirect attention

ADHD Symptoms, Impairments and Accommodations in the High School Environment

DSM-5 Symptom	Possible Resulting Impairments in High School	Possible Accommodations
Inattention		
Fails to give close attention to details OR makes careless mistakes	<input type="checkbox"/> Difficulties with including details such as name and date and misses spelling mistakes <input type="checkbox"/> Misses details in test questions and assignments <input type="checkbox"/> Rarely checks for errors, proof reads or edits <input type="checkbox"/> Poor quality of work – inaccurate, careless mistakes <input type="checkbox"/> Poor time management so doesn't leave time to complete details or check for mistakes	<input type="checkbox"/> Allow to write exams on computer with spellcheck software or do not deduct marks <input type="checkbox"/> Work with education staff to review assignment, check details, assist with time management & due dates <input type="checkbox"/> Flexibility in due dates – with opportunity to complete details & correct mistakes <input type="checkbox"/> Allow clarification of questions on an exam or test and clarification of an assignment
Difficulty sustaining attention	<input type="checkbox"/> Difficulties remaining focused during class, conversations, or when reading lengthy material <input type="checkbox"/> Day-dreaming or mind-wandering during lectures or reading text books etc. <input type="checkbox"/> Difficulty focusing on & completing large amounts of written work (essays, reports etc.) <input type="checkbox"/> Gaps in learning due to inability to stay focused during class etc.	<input type="checkbox"/> Allow student to audiotape lectures, use audiotaped textbooks, receive notes & copies of PowerPoint presentations <input type="checkbox"/> Allow use of a note-taker <input type="checkbox"/> Use of a computer for tests or exams <input type="checkbox"/> Allow testing/exams to be completed over several shorter sessions rather than one long session <input type="checkbox"/> No more than one exam per day
Difficulties listening when spoken to directly	<input type="checkbox"/> Mind often wanders when discussing something with peers <input type="checkbox"/> Often misses social cues or key words during one-on-one or small group interactions	<input type="checkbox"/> Provide notes from class discussions & presentations <input type="checkbox"/> Work with educational staff or mentor to learn strategies for keeping mind on conversations, watching for social cues <input type="checkbox"/> Allow clarification of instructions of an assignment
Difficulties following through on instructions AND fails to finish	<input type="checkbox"/> Begins but unable to remain focused to complete assignment or task, easily side-tracked <input type="checkbox"/> Moves from one incomplete assignment to another	<input type="checkbox"/> Work with staff to chunk & review progress on assignments <input type="checkbox"/> Allow clarification of questions on an exam or test and clarification of an assignment
Difficulty organizing tasks & activities	<input type="checkbox"/> Unable to chunk assignments into manageable pieces – easily overwhelmed <input type="checkbox"/> Difficulty organizing thoughts	<input type="checkbox"/> Ability to access 'prompt' sheets with outline of steps, formulas etc. <input type="checkbox"/> Allow alternative methods of assessment

STUDENT'S RIGHTS

What Human Rights Commissions are Telling Us

Alberta

- Examples of discrimination covered by the AHR Act: not providing K-12 or post-secondary students with disabilities with the type or amount of support sufficient to meet their needs without causing undue hardship to the institution
- Students who require accommodation should provide enough medical information to facilitate accommodation. In most cases, the student will provide medical information from their family doctor. In some cases, it will be necessary to consult an expert in the area of the specific disability, such as a chartered educational psychologist for learning disabilities; a psychiatrist for psychiatric disabilities...

Ontario

- Where there is an inconsistency between the Code and the *Education Act*, the Code will prevail
- The definition of disability in the *Code*, and as interpreted in human rights case law, is broader than the Ministry of Education exceptionality categories. For example, human rights jurisprudence has explicitly recognized ADHD as a disability requiring accommodation under the Code.
- Ministry of Education could be potentially liable for discrimination where its definition of exceptionalities prevented or delayed a student from receiving required accommodations.

Alberta Human Rights Commission [Duty to accommodate students with disabilities in post-secondary educational institutions](#)

Ontario Human Rights Commission [Policy on accessible education for students with disabilities](#)



School Attendance

- Students with ADHD have an automatic right to attend class for the same amount of time as their typical peers. They are not required to earn these rights!
- The only time a shortened day would be an option is to allow for a student's slower integration into a program and this should only be a temporary option.
- Shortened days are not an option if the sole beneficiary is a school with inadequate staff, resources or if the school lacks a plan to deal with the student's needs.
- The school needs to find a way for the student to remain at school for the entire day. It is not a matter of if the student can attend for the entire day.



School Exclusion

- A school exclusion is when a child is asked not to attend school, or asked to leave early or arrive late on a regular basis.
- Unlike suspensions or expulsions, “exclusions” have no time limit.
- There is little oversight from school boards, and the ON education ministry doesn’t track how often principals use this power.
- A recent survey of parents of students with intellectual disabilities, ARCH Disability Law Centre found that a quarter of parents reported being told not to bring their child to school, while more than half (54 %) said their child had to leave school early on a regular basis.



Programming

- Make sure it is not just a warehousing or recreation program.
- Make sure that the programming is appropriate for the child's needs and potential.
- Is it best for the student or easiest for the school?
- Most schools have standard programs they expect students to adapt to rather than developing a program for the student.
- We may see a bright child who can profit from supported integration and program accommodation. The school may see a pupil whose program can be modified to the point where no support is necessary (resource conservation).
- We do not repeat grades – the same experience over again will not improve learning.



Suspensions

Suspension for “disability-related” behavior is unacceptable! Principals have to take mitigating factors into consideration.

Questions to ask:

- How will the suspension help the child correct their behavior?
- Does the child see the suspension as a reward?
- Does the student have a good understanding of why they were suspended?
- Do the parents feel the suspension will favourably impact the child’s behavior in the future?
- Is the suspension of a student with ADHD “a failure to accommodate” under Human Rights?
- How will the suspension impact the student academically?
- How are the suspensions impacting the student’s self-esteem?



TREATMENT OPTIONS AND DECISIONS

ADHD Treatment

- Treatment must always be multimodal and never medication alone. Medication is an individual case by case decision.
- Psychoeducation should always be the first step.

The order and implementation of these treatments varies depending on the individual's profile and needs.

- Life style changes (aerobic exercise, sleep, healthy diet) parenting strategies and home and school accommodations and strategies are generally the first step.
- If attention regulation is a significant symptom medication should be considered; few other strategies can significantly assist with this impairment.
- Other treatment options: mindfulness, tutoring for EF weaknesses, CBT and coaching for older adolescents.



MEDICATION

The Medication Dilemma

- This is an extremely stressful decision for parents.
- Misinformation and therefore stigma remains a factor.
- This is the most common topic leading to discord between parents, other than the diagnosis itself.
- Medication can become a power struggle between parents and ultimately between parents and the child.
- One parent can sabotage the treatment.
- This discord can be one of the reasons why medication is often stopped after the first sign of side effects.
- Education of care givers and the child is the key to accessing and continuing the best multimodal treatment regime, but difficult to access.



Information to Consider When Reviewing Medication as a Treatment Option

- Untreated ADHD has serious side effects as well.
- Consider the level of your child's impairment. Are there safety issues to consider if you wait to try medication?
- Has academic impairment occurred for some time resulting in learning gaps?
- Also consider impairments other than academic such as, family relationships, friendships and sports or hobbies.
- Have other treatments and strategies been tried?
- Is self medication occurring?



Side Effects

- All medications including over the counter medications have common as well as rare life threatening side effects.
- The important thing is to be aware of which side effects are expected to be short term, when they become significant enough to consider changing medications or dose and which are the side effects that require monitoring and an urgent call to the doctor.
- If the child is too "wired", irritable or too serious during the time medication is working, the dose may be too high or a different medication may need to be tried.
- Common side effects are seen on CADDAC medication chart.
- Serious but very, very rare side effects of all ADHD medications are: agitation, psychosis, suicidal ideation, arrhythmias and sudden cardiac death.



Finding the Right Medication

Things the Physician Reviews when Choosing a Medication:

- the length of symptom control required along with early or late hour coverage;
- if immediate symptom control is required;
- what the symptom profile is including comorbidities;
- physical medical problems such as blood pressure, cardiac issues or possible medication interactions;
- is the cost prohibitive;
- does the child have problems swallowing pills;
- is there a diversion or abuse potential;
- the family history on ADHD medications;

There is no way of knowing which medication will be the most effective with the least number of side effects without a trial.

The rule of thumb is “start low” and “go slow” so it may take some time to find the optimal medication.



Alternative Treatments

- To date, other than medication, life style changes, and therapies discussed earlier there is no scientific evidence that indicates a long term benefit to using alternative treatments.
- Very, very slight, possible benefits of Omega 3 for primarily inattentive ADHD and reading disorders have been found in small studies.
- To-date neurofeedback and brain training including Cogmed have not shown any long term positive effects.
- Some natural products may have a stimulant effect, so be aware that using them in combination with medication may be dangerous. Always discuss all medications even when “natural” with your doctor.
- People with ADHD self medicate with caffeinated beverages, cigarettes and street drugs. Non treated ADHD increases their chance of dependency..



RESOURCES

CADDAC Child and Adolescent Resources

- Three part animated video series [Me and My ADHD](#)

A series of animated videos to help children understand ADHD

Part 1: That's Me, I Have ADHD! – What it's like to have ADHD

Part 2: When My ADHD Gets Me Into Trouble – Why ADHD can sometimes make it more difficult to do the right thing

Part 3: My ADHD at School – A look at ADHD and school work, executive functioning, treatment options and anxiety

- [Adolescent and Adult Awareness videos](#)
- [A 5 part Adolescent ADHD Educational video series](#)





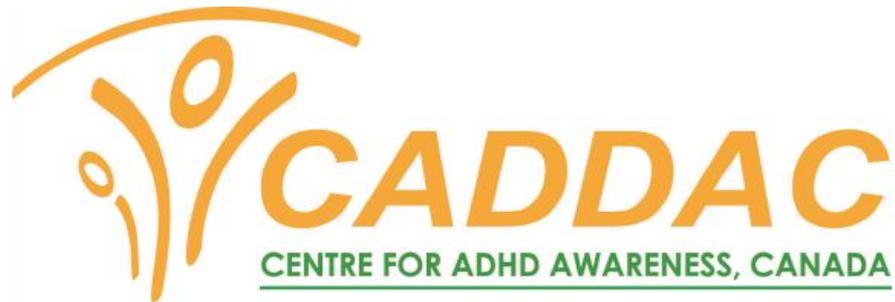
Parent Educational Resources

- [CADDAC web site](#)
 - under **Getting Started and Understanding ADHD**
- [You Tube Awareness and Educational Videos](#)
- [An Early Childhood ADHD Guide and webinar](#)
- [Upcoming Educational Events](#)
- [Past Webinars](#)
- [Medication Information](#)
- [Canadian Medication Chart – Dr. Vincent](#)
- [Managing Side Effects- Dr. Vincent](#)
- [CADDRA videos on medication for parents](#)
- Coming this spring, a transition to post-secondary guide for adolescents and their parents

Education Resources

- [Classroom Presentations](#)
- [Classroom Impairments/Accommodations Charts](#) to assist with IEP development
- [Provincial ADHD Special Education Report Card](#)
- [Ontario Memorandum](#)
- [The Ontario Human Rights Commission Policy, Accessible education for students with disabilities](#)
- [Post-Secondary ADHD](#)
- [School Advocacy Webinars](#)
- [IEPs and Sample IEPs](#)





THANKS FOR LISTENING

QUESTIONS???