

Alternative Solutions to ADHD and Learning Disability Symptoms

Excerpts from:

What's Food Got To Do With It?
101 Natural Remedies for Learning Disabilities

by Pat Wyman, M.A. and Sandra Hills, N.D.

Available at: www.HowtoLearn.com/add-adhd.html

Introduction

Each year, thousands more children are added to the ever-growing list of "learning disabled" children. In addition, current statistics reveal that over 5% of school children (about 3.5 million) have received the newest, most talked about problem-child label -- Attention Deficit Hyperactivity Disorder (ADHD). What is even more startling: millions of these children are prescribed mind-altering, stimulant drugs like Ritalin or Dexedrine as a panacea for behavior problems or to help them "learn."

Sadly, studies on the ability of these drugs to truly increase learning, tell us that academic improvement is often short lived. Although students become more compliant and follow the rules better, many also suffer from serious side effects and the challenge of drug abuse issues.

We believe that no human being, in the name of behavior and learning, should have to endure the kind of side effects parents, teachers and physicians have observed repeatedly in children taking these drugs. Many children become robotic, spacey, listless, anxious and emotionless. They often lose their appetite, lose too much weight; develop nausea, stomach aches, headaches, facial tics, insomnia, and depressive states. Some children even become suicidal. A major authoritative listing on all drugs, The Physicians Desk Reference, lists more than 25 adverse reactions from the use of Ritalin.

In addition to the side effects, another big danger is the abuse potential of these drugs. Comments made by a Drug Enforcement Administration (DEA) representative during the Conference of "Stimulant Use In The Treatment of ADHD" in San Antonio, Texas in December, 1996, shows "that there has been a 1,000% increase in drug abuse injury reports involving methylphenidate (Ritalin) for children in the 10-14 year age group. This now equals or exceeds reports for the same age group involving cocaine.

Of further note, is the fact that the DEA lists Ritalin and Dexedrine as Schedule II drugs. Drugs are scheduled into five classes based on their abuse potential. Schedule I drugs are heroin and LSD. Ritalin and Dexedrine are in the same classification as opium and morphine, both addictive drugs. Many newspaper headlines and television news shows are calling attention to the fact that children without prescriptions, are actually stealing these stimulant drugs from school medicine cabinets, just for the induced high they get from their use.

What's more, in 1996, the manufacturer of Ritalin, Ciba Geigy Corporation, mailed over 100,000 warning letters to physicians who prescribe Ritalin. The letters notified them of the results of a study by the National Toxicology Program in which mice developed elevated levels of a non-cancerous liver tumor called hepatocellular adenoma after being fed large amounts of Ritalin.

It is more than shocking also, that during the 1980's, the dramatic rise in Ritalin prescriptions coincided directly with Stephen Breuning's, M.D., fraudulent but significantly influential work "proving" that stimulant drugs such as Ritalin were solutions for hyperactivity. Although much of his work was fabricated and Dr. Breuning received a prison sentence for this fraud, thousands of parents and medical doctors are still influenced by his work and the number of stimulant prescriptions for children continues to rise.

In December, 1994, an article by Antonia Black, appeared in the Redbook magazine called "The Drugging of America's Children." It stated that although the Physician's Desk Reference warns doctors not to prescribe Ritalin for children under six years old, over 200,000 prescriptions for Ritalin and other stimulant drugs were prescribed for children age 5 and under in 1993.

In response, Dr. Fred Baughman, a pediatric neurologist, asked a revealing and important question in the May 12, 1993, Correspondence section of the American Medical Association Journal. "What is the danger of having these children believe they have something wrong with their brains that makes it impossible for them to control themselves without a pill? What is the danger of having the most important adults in their lives, their parents and teachers, believe this as well?"

After careful examination of the entire issue we felt it important that we all ask exactly what price is too much to pay so that our children can concentrate and focus? Is it possible that other factors are creating the rise in the number of children given this ADHD label? Could it be that certain factors in our children's lifestyles actually contribute to the symptoms of a "learning disability?" Are there safer and more humane alternatives to drugging millions of children just so they can attend school? Are there other ways to achieve what we think is best for children which are more natural and time-honored?

As the parent of a son diagnosed with ADHD I have experienced first hand, the complete confusion and emotional exhaustion of finding the best answers to help my son. I knew from the beginning of his childhood that my son had special needs that might not be met in the traditional school setting. It was only after years of research, attending endless parent teacher meetings to request special accommodations for my son and even briefly filling his prescription for a stimulant drug that I knew there had to be a better way for all of us.

Throughout the years I have individually tutored hundreds of students whose parents shed tears of despair and helplessness because their children also could not fit into classrooms set up for "normal" children. When they received reports that their children could not learn through the traditional methods in the classroom (i.e., talk in turn, sit in seat, work on tasks within time limits) most of these parents began to believe that their children were definitely not "normal."

What they did not know initially, however, was that their children actually had very special creative abilities, but simply could not make the behavioral concessions necessary to reveal these abilities in the regular classroom. The result was that often, their children were placed in resource special education (RSP) programs because of poor academic performance. These parents were literally worn down from lack of success and not knowing where to turn. Drugs seemed like the only choice.

Dr. Hills and I wrote this book for parents, grandparents and teachers. We want to provide the kind of answers that do not require drugs and offer instead, solutions that may even allow your children to shed their learning disability label. We have spent many years learning how to help children develop their natural, innate learning abilities (without the use of drugs) and we want to pass these methods onto you.

What you will read is about compromises, changes and faith. You will learn about the compromises and changes you can make in your child's diet. Our hope is that you develop faith along the way. The faith to believe that your child is capable. Capable of learning, capable of making good decisions and capable of growing into an adult with radiant health, solid dignity and a sense of purpose.

Health and your child's wellness mean much more than having a child who can remain quiet long enough so the adults in his or her life can get something done. Health and wellness allow your child to be curious, vibrant, fully engaged in the task of new learning and able to live peacefully with the others in your family and school.

This book will open your eyes to the new information and possibilities that exist in the field of health and nutrition as they relate to your child's abilities to learn. There are documented medical studies that show dramatic changes in children's behavior and learning capabilities from such things as small adjustments in diet or the addition of certain supplements. One recent study has found vitamin B6 to be more effective than Ritalin at calming hyperactive children.

As you look for them, and develop a new mind-set, you will discover the things in your child's daily life that have the ability to masquerade as learning disability symptoms. You will learn how the lack of even minute amounts of minerals, vitamins and amino acids can create brain and body imbalances in your child. When brain functions are impaired, symptoms like memory loss, lack of concentration, and hyperactivity can result. Food sensitivities, allergies and intolerances will be the first place to begin your search. You will begin to notice that even your child's handwriting will change when specific foods to which your child is sensitive, are removed from his or her diet. Finding the hidden triggers that add to or create the appearance of learning problems in your child will open up a whole new realm of possibilities and can even result in your child's "disability" label being removed.

The medical community is now recognizing the direct links between diet and health. It takes many years of high fat, high sugar, low fiber diets to create a diseased body and incredible work to undo the damage. The changes being prescribed include diet, nutritional supplements, exercise and more responsible eating patterns. The good news is that you have a child who is still growing, and it is possible to implement those changes now.

Healthy eating and the proper use of supplements can significantly affect children's ability to learn now. All our major medical schools have established new research and treatment programs to allow patients to take control of their lives and learn preventive techniques that create health, rather than simply rely on drugs that focus on lessening the symptoms of poor health habits.

Most importantly, with this new knowledge, you and your child will discover a new sense of purpose in your lives. You can both take charge and create new solutions for yourselves and your family. These new paths will create health and wellness, and renewed faith in your child's natural abilities to learn.

Our book begins with the true story of a young man by the name of Brandon. Follow him throughout the book and discover the kinds of brain and body imbalances which caused him to be placed in a special education program for what appeared to be his inability to learn in math, reading and language. You will rejoice as you see him progress from "learning disabled" to normal functioning in the regular classroom following adjustments in his diet, needed supplementation and the love and caring of his family. We invite you to read on to Chapter 1...

--- Pat Wyman, M.A.

Chapter 1 - What's Food Got to Do With It?

Nutrition and learning disabilities are linked...

Brandon is an extremely active 12 year old. He eats doughnuts and frosted cereal for breakfast every day, and goes to school feeling great. After a while though, he gets tired and irritable and doesn't want to be there.

Brandon usually has the school lunch of pizza, coke and cookies, and hangs out with his friends at the local fast food place after school. All his teachers say he is very bright, but just can't concentrate on his work. Some days he seems attentive, but most days he doesn't finish his work, talks too much with his friends, and generally does poor quality work. When he comes home, it is a major problem to get him to do homework and he tells his parents that he just does not like to read. Besides, when he does read, he makes so many mistakes he can't even remember the information from page to page. He wonders why he should even go to school... Case histories like Brandon's and the latest medical research in the area of nutrition make it very clear that nutrition can be both the cause of the symptoms and the remedy for many learning disabilities. In fact, when certain changes in a child's diet are made and the proper supplements added, medical research has shown that I.Q. and other test scores have risen, memory abilities are enhanced and the overall ability to learn and remember improve dramatically.

Brandon is not truly learning disabled, but his symptoms made him appear that way in school and at home. In fact, he was placed into some special resource classes because many academic tests showed scores more than two years below his grade level. What neither his parents nor teachers knew at that time, however, was that Brandon actually had several food sensitivities and food allergies. In addition, he was lacking certain minerals and amino acids which contributed to his problems in school. The combination of these problems affected Brandon's ability to pay attention and often caused him to be over-active, sometimes "spacey", forgetful and irritable.

Once Brandon's hidden food allergies and nutrient deficiencies were discovered and treated, Brandon was able to return to his regular classes and experience academic success. He regained his self-esteem and went on to high school to do very well. As you read on, you will discover the true causes of Brandon's academic and behavioral problems and what the remedies are that improved his ability to learn.

The information in this book will help you determine exactly what part of your child's eating habits may be reducing his or her ability to learn. Once you have identified what your child needs, you will discover many natural sources to help your child maximize his or her brain power and make the job of learning and recalling new information a joyous event again.

Learning requires optimum health and brain function; if a child is eating the wrong foods or those foods which are deficient in the proper nutrients, his or her ability to learn will be compromised. The food and food supplements (vitamins, minerals and amino acids) you give to your child play a major role in whether he or she is successful in school and in life.

Making the connection between learning and nutrition is absolutely essential to understanding why millions of children each year (just like Brandon) are being burdened with the "learning disabled" label, when in fact, they are vitamin, mineral and amino acid deficient, hypersensitive to what they eat or drink or filled with metal toxins.

Take the inventory: *“Is This My Child?”* [**Available in “What’s Food Got To Do With It?”**] to determine if your child's learning disabilities may be related to or caused by allergens, toxic metals or nutritional factors.

Visit www.HowtoLearn.com/add-adhd.html for more information about **“What’s Food Got To Do With It?” 101 Natural Remedies for Learning Disabilities**