



# Is My Child Hyperactive?

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Ask any parents if they think their child is hyperactive, and they will probably respond with a resounding “Yes!” Children are supposed to be active, but that doesn’t mean they are “hyperactive.” However, more and more children are being diagnosed as having Attention Deficit Hyperactivity Disorder (ADHD). It is estimated that 3 to 5 percent of the population has ADHD, which is about 2 million children nationwide.

ADHD involves a persistent pattern of hyperactivity and impulsivity and/or inattention. Usually children with serious ADHD are identified by teachers when they enter preschool, while the more mild ADHD children are not suspected as having a problem until 3rd or 4th grade. Children ages four and older can be successfully tested and diagnosed for ADHD. There are three different types of ADHD: ADHD–Primarily Inattentive, ADHD–Primarily Hyperactive/Impulsive, ADHD–Combined type.

If you observe the following behaviors in your preschool or school-age child over a six-month period, you may wish to begin the evaluation process. If your child meets the criteria for Hyperactivity-Impulsivity, but not Inattentive, then he or she would be ADHD–Primarily Hyperactive/Impulsive. The same goes for the ADHD–Primarily Inattentive. And, if he or she meets the criteria (six of each) for both Hyperactive/Impulsive and Inattentive, then he or she would be ADHD–Combined type.

## Hyperactivity-Impulsivity (at least six of the following):

### Hyperactivity

1. Often fidgets with hands or feet or squirms in seat.
2. Often gets up from seat when remaining in seat is expected.
3. Often runs about or climbs when and where it is not appropriate (adolescents or adults may feel very restless).

4. Often has trouble playing or enjoying leisure activities quietly.
5. Is often “on the go” or often acts as if “driven by a motor.”
6. Often talks excessively.

### Impulsivity

1. Often blurts out answers before questions have been finished.
2. Often has trouble waiting one’s turn.
3. Often interrupts or intrudes on others (e.g., butts into conversations or games).

### Inattention

#### (at least six of the following):

1. Often does not give close attention to details or makes careless mistakes in schoolwork, work, or other activities.
2. Often has trouble keeping attention on tasks or play activities.
3. Often does not seem to listen when spoken to directly.
4. Often does not follow instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions).
5. Often has trouble organizing activities.
6. Often avoids, dislikes, or doesn’t want to do things that take a lot of mental effort for a long period of time (such as schoolwork or homework).
7. Often loses things needed for tasks and activities (e.g. toys, school assignments, pencils, books, or tools).
8. Is often easily distracted.
9. Is often forgetful in daily activities.

Only qualified, experienced professionals should conduct an evaluation. Behavior problems in children can also be caused by other things such as stressful life situations and learning disabilities. Inexperienced or unqualified “experts” can misdiagnose the problem. A questionnaire filled out by parents and teachers is not enough for an ADHD diagnosis—careful observations and assessments of the child must also be conducted.

There is no single cause of ADHD. It is defined by symptoms, not by its cause. There are a large number of biological or neurological events that singly or in combination can cause a person to be unable to pay attention and to be overactive. ADHD is not caused by poor parenting skills, nor is it caused by eating too much sugar. While children will often have a reaction to certain foods consumed, this intolerance does not cause ADHD and following a specific diet has not proven to alter ADHD symptoms.

How do you locate qualified professionals for evaluation? Start with your own local doctor. The local pediatrician will do some preliminary screening to rule out physical problems that can cause attention problems. Standard vision and hearing tests are in order and referrals to specialists may be needed. If no physical causes are found, the pediatrician may refer you to a more specialized physician, such as a developmental pediatrician (a pediatrician specializing in how children develop mentally and physically), a child psychiatrist, a pediatric neurologist, or a behavioral pediatrician (a pediatrician specializing in childhood behavior).

If your pediatrician diagnoses your child as ADHD and recommends medication without going through the above referral process, you will want to insist that further testing and consultation be done before accepting that diagnosis.

You will want to assemble a team to assess your child’s difficulty and needs. Your child’s team may consist of from two to five or six professionals. Depending on your child’s needs, the team may include:

- Developmental pediatrician
- Child psychologist
- Learning disabilities specialist
- Neurologist
- Physical therapist
- Speech therapist
- Social workers
- Behavioral pediatrician
- Classroom teacher

## References

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