

Hyperactive Kids Exhaust Parents, Baffle Doctors

BY MARJORIE MEGIVERN

Ten-year-old Teddy Edison gets off the Brunswick County school bus every afternoon talking and running, and keeps it up until bedtime.

Maintaining a constant chatter through supper, he then watches television while repeatedly asking questions about what he sees. Homework doesn't get done, because he can't concentrate on it.

The Edisons are exhausted by the time they get Teddy into bed. Elliott has been with the youngster since he got home from school, while Helen began supervising him immediately on her arrival from work at 5:30 p.m.

They seldom get any rest, because they can't leave Teddy with anyone except grandparents, and his excessive activity puts a strain on the whole family.

Teddy was diagnosed a hyperactive child at age four by a physician who observed his behavior and suggested testing. The family, including older brothers who are "normal," have lived with it ever since.

His name and that of his parents are fictitious, but the situation is real, a Brunswick County case history. The story is typical of three percent of the childhood population afflicted with this mysterious condition.

Trish Brown, a staff psychologist with the Brunswick County Mental Health Center, said "hyperactivity" is a layman's term meaning physically overactive.

"Mental health professionals call it attention deficit disorder, (ADD) with hyperactivity," she said.

Brown is presently conducting an eight-week course at the mental health center for parents of hyperactive children that she calls educational rather than therapeutic.

To begin with, diagnosis of this malady, which occurs six times more often in boys than girls, is hard to distinguish from normal childhood behavior.

An article in *Drug Therapy* by Dr. Michael Jellinek, assistant professor of pediatric psychiatry at Harvard Medical says, "The truly hyperactive child has little or no control over his actions and is not deliberately antagonizing his parents."

However, Jellinek went on, every child who has problems with concentration at home or school is not necessarily hyperactive. They may

suffer emotional problems or learning disabilities.

Finding the truth involves parents, teachers and a mental health professional, Brown said.

"I look at the child's motor activity and his ability to focus attention on teachers and parents," Brown said. "Then I do a complete evaluation of his development and history. Was he colicky as a baby, was he in and out of the crib, falling down a lot, needing 20,000 reminders to do something?"

The onset of symptoms is another clue, she said. "If a child demonstrated hyperactive behavior before the age of two, that's a good indication of ADD," she explained. "Sixty to seventy percent of hyperactive children displayed ADD symptoms that early."

The kinds of behavior she listed include: irritability, social immaturity, easily angered, clumsiness, impulsiveness, increased activity, unpredictability, restlessness and distractibility.

"There have been many theories about the cause of this condition," Brown said, "but we just don't know. Some believe it's genetic, others say it's neurological, and still others say that it's caused by environmental trauma, such as the family stress of divorce."

If an evaluation points to an abnormality in the child's developing nervous system, medication is a likely treatment.

The drug most often used is an amphetamine, a stimulant that has the opposite effect on hyperactive children. "This medication calms them down enough to teach them other ways to cope," Brown said.

Teddy has taken the amphetamine Ritalin off and on for the past six years. His mother says, "It helps some, but the effects just last four hours. He takes it when he gets up in the morning, and again at school about noon. He can't take any after he comes home, because it keeps him awake at night."

The boy doesn't like taking the medicine, she said, and sometimes at school tries to throw it away. "We have to watch him carefully. I think he enjoys the attention he gets with his behavior."

Both the Edisons took Brown's course for parents last year and said other treatment methods suggested there were good.

"But they were so time-

consuming!" Helen said. "For instance, we were supposed to give our child at least thirty minutes of special time every day. Since we work, that's hard to do, because we'd have to give our other children that much time, too."

Brown said she tries in her workshops to show parents how to cope with the child's strengths and

weaknesses, and at the end of each class she gives them some "homework" to try for the following week.

Jellinek's article pointed out that nonmedical treatment is a team effort of parents, teacher and doctor. Parents are to help the child's self-esteem by setting realistic goals for

behavior; and enforcing them. What is the outcome for ADD hyperactive kids? According to Jellinek, some outgrow the problem as their ability to concentrate and control their behavior catches up with what is appropriate at their age. Meanwhile, Brown offers her free eight-hour course three times a year, and says parents who believe they

have children with ADD should get an evaluation. This, as well as counseling and therapy, is available to them at the mental health center, she said.

Brown has been employed in the county two years. A graduate of East Carolina University, she has a master's degree in clinical psychology, awarded in 1983.



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Events Aimed

At Home Owners

Two upcoming events sponsored by the Brunswick County Extension Service should interest homeowners.

Jan. 13 is the agency's annual tree day, in which seedlings of seven species of trees will be offered at no charge beginning at 9 a.m. These include dogwoods, red maples, sugar maples, bald cypress, red cedar, improved loblolly pine and willow oak.

Some species will be available only in limited quantities.

Then, on Tuesday, Feb. 24, at 1 p.m., landscaping tips and techniques will be discussed in a workshop at the public assembly building at the county complex.

The session is geared to newcomers and others who are building a new home as well as someone revamping an existing landscape.

More information is available from the extension office.

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