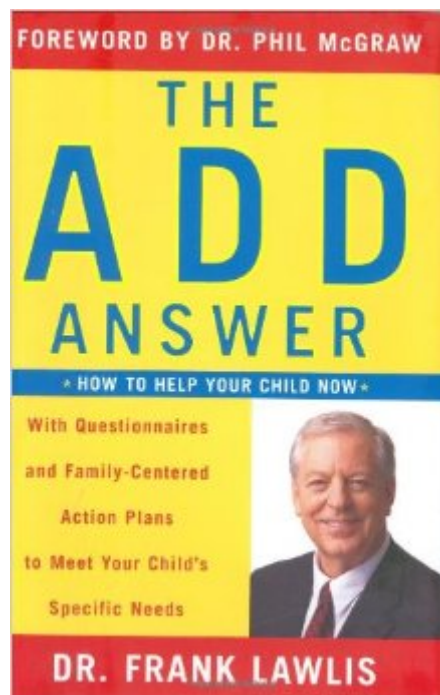


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# The ADD Answer: How To Help Your Child Now--With Questionnaires And Family-Centered Action Plans To Meet Your Child's Specific Needs



## Synopsis

Every year, 17 million new cases of attention deficit disorder, or ADD, are diagnosed in children. But medications designed to treat the disorder don't work for many children and often leave families frustrated and searching for more options. In *The ADD Answer*, Dr. Frank Lawlis draws upon his thirty-five years of experience as a clinical and research psychologist to show parents how they can reclaim their central role in healing their children with comprehensive step-by-step advice on dealing with the problems of ADD. His approach blends the latest medical, nutritional, and psychological treatments that can increase brain function with expert insight into the emotional and spiritual support kids need. Including assessment tests geared to help parents understand their child's particular needs and practical information on proven treatment options, *The ADD Answer* explores:

- The role of nutrition in treating the disorder
- The positive effects of counseling and goal setting
- Advances in the field of biofeedback
- The importance of sleep, and much more

An inspiring and essential guide, *The ADD Answer* will help every family facing the challenges of ADD create a more loving, healthy environment necessary for their child to thrive.

## Book Information

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## Customer Reviews

I have a 14 yo son with ADHD and I've read too many books on the subject. I took my son off all meds a year ago because the cure was becoming worse than the diagnosis and realized that the meds were masking his emotional problems even though he went to Psychiatrists and

Psychologists, Pediatric Neurological Behavioralists-the list seemed eternal. One thing I learned very quickly is that the Dr.s never really understood. They knew-they saw-they treated, but that is not living with it. Dr. Lawlis brings in his own experience with disabilities and gives a compassionate understanding to the frustration parents and children themselves feel, and offers insight and solutions. As for the "Snake Oil" comment, again, it's easy for Dr.s to poopoo when you tell them that you think sugar adversely affects their behavior, or that you see a change after you give them dyed foods, but as a parent, you know your child and know the subtleties to their character that back up your opinions. Even if it isn't scientifically proven, is there anything to be hurt by trying to take additives out of their diet? Is there anything wrong with trying everything you can for the sake of helping your child? For the pharmaceutical companies there is. For a few dollars I think any added perspective on the situation is worthwhile. You really have nothing to lose in reading it, and everything to gain. The book costs no more than a copy of Adderall/Ritalin/Depakote/ad nauseum...

I'm not sure (but not surprised) why this is getting such hostile responses. My son has been managed effectively through many of the techniques described here. I can't believe that these ideas are that controversial, but it's much easier to shove a pill down your kids throat and hope for the best. Is the negativity an attempt to quell your own guilt? A child will likely improve with stimulant medication because - guess what??- It's stimulating parts of the brain that regulate attention and impulse control. but what are the long-term effects of this? We do not have much longitudinal data (following people long term) to accurately gauge the effects. Ever seen a long-term meth user? It's not pretty and Ritalin is in the amphetamine family. Granted, Ritalin users often take much smaller doses, but often takes it long term. I have known several kids that if I were their parent, I would medicate them, as their quality of life (school, home, and social) was significantly effected. However, for a mild/mod case, such as my son, I have found these strategies very effective. Most important to him: FOOD COLOR, sleep, & structure. For those that do not believe in the food color connection, we could do a little test: I could feed my son several packets of Go-gurts and send him to your house for the night. I would find you in the fetal position the next morning. Food color is PETROLEUM-BASED, people - why is this controversial???? Should this be in any of our bodies? Why has the diagnosis of ADHD exploded? The gene pool has not changed that much - points to environmental factors to me. Anyway, I highly recommend this book, as well as "The Gift of Adhd" by Lara Honos-Webb. Good luck and remember that children with this disorder would not choose these problems and need our help and willingness to help them find the keys to managing it.

Dr. Lawliss notes in "The ADD Answer" that we should not put teachers, doctors, or Dr. Lawliss himself above our parental observations and intuition. There are some unproven methods in this book, but there is also a ton of insight on family dynamics and treating the environment of the child. Learn from this book and then you decide how or if to apply the methods. I have been putting teachers on a pedestal, believing they know more about child behavior. No more of this - they know more about children in general, but I know my own child best, and being that I am willing to honest with myself and my child I can effectively use what is pertinent to our situation from this book.

There are many great ideas presented in this book about dealing with your add child, BUT the chapter on meds is completely off base. Let me preface the following with MY opinion (I am not an MD or an expert) that children with ADD need a team approach in helping them deal with the condition (if you choose to call it one) and there is a place for meds for many kids, BUT it is only a piece of the puzzle. Parents, teachers, family members, Md's, and behavioral specialists are all crucial. I happen to work indirectly with many of the world thought leaders and experts on ADD (ie. Joseph Beiderman, Mass General Hospital, Boston MA/ Harvard Medical School, ... look up his credentials). First Dr. Frank Lawlis is not an MD, this means he has not been to medical school- that is not to say he isn't a great psychologist, just that he HAS NOT and DOES NOT write prescriptions for these meds and has NO first hand experience with directly managing these meds himself. In this book there are many things that are completely false regarding ADD meds. For example he states that they only work for about 50% of kids. FALSE Let me cite 3 credible sources that disputes this (notice in the book that he does not talk about HIS credible source)<sup>1</sup>. "approx 70% of patients respond to the first stimulant agent administered with resulting improvement in their ADHD symptoms." - Practical Considerations in Stimulant Drug Selection for the ADHD Patient- Efficacy, Potency and Titration Beiderman, Today's Therapeutic Trends, 02'2. "Improvement occurred in 65-75% of 5,899 patients randomized to stimulants." - Practice Parameter for the Use of Stimulant Medication in the Treatment of Children, Adolescents, and Adults, Journal of the American Academy of Child and Adolescent Psychiatry Feb02'3. "At least 80% of children will respond to one of the stimulants if they are tried in a systemic way." Clinical Practice Guideline: Treatment of the School-Aged Child with ADHD, Published in American Acedemy of Pediatrics, Oct 01'. All of these quotes are credible and are opinions based on evidence-based medicine from the experts. Lawlis also states that there has been little research in children and that most studies have been done on adults and rats/mice. This is Completely False! The Journal noted above, Journal of the American Academy of Child and Adolescent Psychiatry (that was a review of "161 randomized controlled trials

that have been published encompassing 5 preschool, 150 school-age, 7 Adolescent, and 9 adult studies" Where does Dr. Lawlis get his information?The review noted above by the American Acedemy of Pediatrics, identified for analysis 2405 citations, 92 reports, and 78 different studies. This is American Acedemy of Pediatrics- They are only interested in children and adolescents! Not Rats, Mice, and Adults.These are the most credible Medical Journals published. These are not the biased trials sponsored by big pharma. The information in these Journals is taken very seriously by Pediatricians and Child Psychiatrists, and is heavily relied upon by these professionals.Lastly, he also states that these drugs are identical to cocaine in their affect on the brain. This is not true, they have similarities, but by NO-Means identical. Yes it is true that stimulant medications can be abused and can also be addictive, but some of the newer formulations of these meds have lessened their abuse and addictive potential by altering the speed at which the drug is released into the bloodstream thereby somewhat flattening the curve (Cocaine use produces a curve that is almost straight up-this is what gives the "high") The most common way for these drugs to be abused is by crushing them and snorting them (which allows for fast absorption and steep curve), and some of the newer meds are crush resistant and/or cannot be turned into a fine enough substance to be snorted. There has also been data published that shows a DECREASE not increase in drug abuse for patients who have taken stimulants. It is believed that kids who are treated (drug treatment and otherwise) are less likely to associate with kids who are failing academically/socially and who are more likely to be using drugs. (This is not to say that high all high achievers abstain from using OR that ALL children who are failing ARE using) It is just a point that kids who are treated are more likely to be focused on school and their responsibilities and are less likely to be involved in drug use. Kids who are failing in school academically/socially are often looked at as outcasts and are often looked down upon by peers, teachers, and family, and this can cause a child to look for an escape... sometimes drugs. Children who Do benefit from stimulant medication sometimes have more self-esteem because of their success, and certainly less scrutiny from peers, teachers etc.Lastly, Lawlis tells a story about a man who died from long-term stimulant medication. I am not going to say that this did not happen, but I will say that stimulants have been used since the 1950's, and the medical community agrees that they are safe when managed properly. The medical community and FDA have pulled MANY medications that were deemed unsafe from the markets (many times against the will of BIG Pharma) and the stimulants would not have remained on the market for OVER 50 YEARS, if stories like this were common or the least bit likely.I am not at all stating that stimulant meds are the answer because they are not, but they can be a small piece of the puzzle that is helping these kids with ADD. The book is full of great ideas and approaches to ADD, but he is

not accurate about the stimulant medications. Parents who see value in them should not feel ashamed and or frightened by what he says because most of it is just not accurate. Good luck and I hope this was helpful.

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