

# ADD Attention Deficit Disorder or Deficient Diet?

Health and Nutrition  
By Donna Smith, C.C.N.

“Does your little Johnny (or Mary) remind you of the Energizer bunny? (He keeps going and going and going.) Does he throw violent temper tantrums, have a short attention span, show an inability to sit still, have a hostile attitude and display impulsive behavior? Maybe Johnny is just being a kid - or maybe he's suffering from what is today referred to as Attention Deficit Disorder (ADD).

ADD is a new term for an old problem, one which is also known as hyperactivity. ‘Hyperactive’ children have probably been around as long as parenthood has, but how to deal with such children is a matter of deep controversy these days. One reason ADD is controversial is because its ‘symptoms’ describe every child at some time or other. In fact, as many as 60 percent of all parents will, at some time, suspect their child is hyperactive.”

Is ADD a genuine psychological malady, normal behavior for some children, a reaction to environmental toxins, a deficient diet, or a combination of all of these? “To find the answer, let's take a closer look at this problem, which affects three percent of the children in America, according to some estimates. Scientists are claiming they have recently discovered adults can have ADD, too.

Mothers of hyperactive children report that the child was restless even in the womb, and that the child eats and sleeps poorly, resists cuddling and was destructive as soon as he had the power to touch, climb and walk. The hyperactive child never seems to run out of

energy. Such a child is often impatient, irritable and easily upset. More boys than girls show the symptoms.

Such children can be so upsetting to parents and teachers that many are willing to resort to drugs to calm the child down. Ritalin, the drug most commonly prescribed for ADD, is controversial and, some claim, grossly abused. In some states, teachers are lobbying for freedom to put children on Ritalin without consulting parents. According to some estimates, as many as 25 percent of the children are on Ritalin in some schools. Ritalin may make things easier for parents and teachers, but what is it doing to the child?

Ritalin is an amphetamine - a powerfully addictive stimulant - which for some reason slows hyperactive children down. Side-effects of Ritalin use include insomnia, lost appetite and weight and stunted growth. According to some, Ritalin simply turns children into zombies - or, as Dr. Ray Wunderlich, a pediatrician from St. Petersburg, Florida, puts it "...a piece of wood with no emotions.”

Is Ritalin really necessary? Studies on hyperactive children have shown a strong link between sugar, food additives and hyperactivity. So many success stories have been reported by changing the hyperactive child's diet that the effectiveness of dietary control of hyperactivity is well-established.

Many children consume incredible amounts of sugar and caffeine, which could contribute to blood sugar problems and consequent hostile behavior. Prepackaged foods, the mainstay of many American households, could also contribute to behavioral problems by not providing a child

with the nutrients his body needs. (Without sufficient nutrients, the mind and body cannot function properly.) Studies demonstrate that hyperactive children placed on low-sugar diets, low in refined foods, become less aggressive than those who continue with high-sugar diets. Nutrients from supplements and plants that nourish the body also may be helpful.

Although an adult with so-called ADD is not likely to run around the house shouting at and hitting people, some adult symptoms are similar to those in children. These include short attention span, short temper, difficulty sitting still and irritability. Adults, too, could benefit from a nutritious diet with elimination of excess sugar, caffeine, food additives and other environmental chemicals.

It appears that some of the qualities in hyperactive kids that teachers and parents find exasperating may actually turn out to serve the children as well as the adults - such as individualism, the ability to be a self-starter and dislike of close supervision. A study by a group of New York psychiatrists report that 84 percent of kids labeled as having ADD had no more adult problems than the control group; most grew out of their hyperactivity. Furthermore, 20 percent of the hyperactive kids grew up to be self-employed, while only five percent in the control group did.”

A recent issue of *Sunshine Connection* (Vol. 18, No. 8, Page 11), published the above article by Karen Edmonds. Through my own clinical nutrition practice, I have observed the symptoms of ADD leave after several weeks of:

1. changing a child's diet to wholesome foods based on the U.S. Department of Agriculture (USDA) “Food Guide Pyramid” (which has now replaced the traditional Basic Four Food Groups),
2. reduction or elimination of refined and processed foods, and
3. providing the required food supplements (vitamins/minerals) necessary to reestablish proper nutrient levels.

The USDA has determined that the basic four food groups upon which most of us were raised does not provide an adequate diet. Parents often think their children are receiving sufficient nutrients from their diet, however, without professional assessment from a “nutritional analysis” of blood, urine, and hair chemistry, how would a parent truly know? Often blood sugar levels are low and this contributes to irritable, even hostile, behavior. When a child's food intake at breakfast and lunch does not meet their individual biochemical requirements, blood

sugar levels fall, often around 2:30 to 3:30 p.m., and this effects brain function. Teachers have reported behavioral changes in children noticeable within an hour of being dismissed from school, though behavior up to that time of day was normal. This was the case for nine-year-old Christopher, whose mother brought him in for a nutritional assessment as she suspected that her son's diet may be contributing to his behavioral changes. Christopher exhibited normal behavior throughout the day until around 2:30 p.m., when he would become restless, lack mental focus and become disruptive to the class by throwing erasers at the children and teacher.

Whether you suspect your child suffers from ADD or your child has been diagnosed as having ADD, providing all three of the above steps in either case would be worth the effort. An understanding of the process to provide the above steps may be helpful in getting started. Your clinical nutritionist will first assess your child's biochemical individuality and nutritional status through analysis of blood, urine, hair, etc., schedule personal education program appointments (P.E.P sessions) for coaching in a wholesome diet based upon the USDA Food Guide Pyramid and, when indicated, recommend food supplements formulated for clinical use to reestablish sufficient nutrient levels.

Like the automobile which requires quality fuel, oil, coolant and other lubricants to function properly, the human body also requires quality fuel, etc., in the form of sufficient nutrients, pure water, fresh air, sunshine, exercise and rest to function properly. The brain, like any other part of the body, cannot function properly if it does not receive the quality and quantity of fuel it needs to operate. Before you suspect that something is “wrong” with your child, try observing your child's diet and environmental influences and ask yourself if perhaps there is something here you might do differently that could have a positive effect on your child's health and behavior.

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DR. DONNA F. SMITH  
AdvancedClinicalNutrition.com  
Wichita Falls, TX 76705  
(940) 761-4045

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# Ritalin linked to cancer

## Don't stop using drug, scientists advise parents

Lauran Neergaard

The Associated Press

WASHINGTON — Government scientists have uncovered a sign that the widely used children's drug Ritalin might cause cancer in mice. But they said Friday that parents should not stop giving their children the drug used to treat hyperactivity based on such weak findings.

"We felt physicians and parents should know this and have a right to know this," explained Dr. Murray Lumpkin, the Food and Drug Administration's deputy drug director. "But it's not enough of a signal that we think kids should be taken off the drug."

Ritalin is widely prescribed to treat Attention Deficit Hyperactivity Disorder, or ADHD, a neurological condition that leaves children and teen-agers restless, easily distracted and sometimes aggressive. As many as 2.5 million children are thought to have ADHD. It is more common in boys than girls and sometimes persists to adulthood.

Ritalin has been sold for 40 years, but it came on the market before drug makers were required to test for carcinogenicity. The National Toxicology Program, a branch of the National Institutes of Health, routinely tests such older drugs for possible risks.

Mice were fed high doses of methylphenidate — up to 30 times the typical human dose — for two years. Four of the male mice who got the highest doses developed cancerous liver tumors called hepatoblastomas, when no more than one of the extremely rare tumors should have formed, the study found.

When the FDA obtained the study, it made Ritalin manufacturer Ciba Geigy Corp. add the mouse findings to the drug's label and notify doctors about the potential — though questionable — risk.

Ciba mailed letters Thursday to 100,000 doctors who prescribe methylphenidate.

"While we and FDA consider these findings of sufficient significance to justify informing clinicians . . . and studying them further, we both continue to believe Ritalin is a safe and effective drug," wrote Ciba Vice President Dr. Joyce Moscaritola.

The FDA agreed. "People are not mice," Lumpkin told The Associated Press Friday.

And the FDA has evidence that Ritalin is not carcinogenic:

■ A federal database that tracks cancer showed no increase in hepatoblastomas over 20 years. This extremely rare cancer typically strikes children under age 4, but Ritalin is not supposed to be prescribed to anyone under age 6.

■ Neither rats nor female mice developed increased cancer after receiving Ritalin.

■ And mice develop liver tumors easily from a variety of drugs. Several drugs that cause cancer in mice, such as phenobarbital, are sold anyway.

The FDA is about to try to prove whether Ritalin really poses any risk. It will feed the drug to additional rodents, as well as check additional human cancer records.

Meanwhile, Ciba's Moscaritola said any concerned parents should consult a doctor.

Stopping Ritalin could cause the ADHD symptoms to immediately recur.

"Do we really need to wait till these scientists prove that Ritalin causes cancer in humans? For thousands of years, humans have raised their children without Ritalin. What has really changed in the last 60 years? Your child's diet! Children now consume more foodless food (foods that have insufficient nutrients and more additives) than ever before. Your child's diet is one of the most significant factor affecting his or her mind/brain. Take the challenge! Have your child follow a professionally designed nutritional program for three months and prove it to yourself and your child. Remember, with a diet there are no negative side effects to be concerned with now or connected with long-term use. There are many health benefits and peace of mind. Can you say that about Ritalin? ADD is truly A Deficient Diet. Ask for the Wichita Falls Parent Newsmagazine Article on ADD."

---Donna F. Smith C.C.N.

DR. DONNA F. SMITH  
AdvancedClinicalNutrition.com  
Wichita Falls, TX 76508  
(940) 761-4045