Title: F.Y.I.: NATURAL TREATMENTS FOR KIDS WITH ADD/ADHD, By: Singer D, Chiropractic Journal, April 1, 2000, Vol. 14, Issue 7
Database: CINAHL Plus with Full Text

F.Y.I.: NATURAL TREATMENTS FOR KIDS WITH ADD/ADHD

F.Y.I.: Natural treatments for kids with ADD/ADHD

"Just say no" to drugging our children. Saying no is much easier for parents today than ever before. There are many existing natural alternatives that can reverse the symptoms of Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD) instead of prescribing drugs. The problem is, some parents don't know about these alternatives. They do know about Ritalin.

In "Arch General Psychiatry," Vol. 52, June 1995, it is stated that: "Cocaine, which is one of the most reinforcing and addictive of the abused drugs has pharmacological actions that are very similar to methylphenidate hydrochloride (Ritalin), which is the most commonly prescribed psychotropic medication for children in the U.S."

Some parents don't know that today they have a choice. Our job isn't limited to educating parents about the potential risks associated with Ritalin, but also about the choices available to them, choices they can control. Research and clinical observations stand back from medical treatment and provide favorable evidence for natural alternative treatments.

Food allergies have often been linked to behavioral disorders, which means, changes in diet alone can prove beneficial. Parents need to be informed so they can help their children naturally.

Dr. Benjamin Feingold was the first to popularize a special diet for children with hyperactivity and aggressive behavior. The diet prohibits the intake of salicylates (found in artificial colors and flavors, aspirin, grapes, tomatoes, red and green peppers) and replaces them with mineral soups, whole grains, raw vegetables and fresh fruit. These changes have been shown to have significant effects on behavior.

A study published in the May 9, 1992 issue of "The Lancet," by J. Eggar, M.D., reported that 76 children with behavioral disorders were placed on elimination diets removing wheat, milk, chocolate, eggs, oranges and sugars from their diets. Behavior improvements (reduced hyperactivity) were noted in 62 children. The study noted that vitamins A, B, C, D, E, as well as calcium, magnesium, chromium and zinc are recommended in order to increase levels of behavioral improvement.

Chiropractic has also been a proven treatment for ADD/ADHD. Twenty-four children were tested in an independent research project conducted by the Psychoeducational & Guidance Service of Texas A&M University. Twelve children received chiropractic care and twelve received medical care.
The outcome proved children receiving chiropractic care improved more than children treated with drugs in areas such as verbal output, reading and comprehension, attitude and self-esteem, coordination and emotional maturity.

Providing parents with the information they need will point them in the right direction to help their children naturally:

1. Inform parents about their choices, that they don't have to put their children on Ritalin.
2. Suggest the problem may be a food allergy and tell them about problem-causing foods to eliminate from their children's diets.
3. Show them how chiropractic can potentially improve learning disorders.
4. Remind them about the importance of positive reinforcement -- essential to any child's well-being -- including encouragement and praise for accomplishments.

It is up to all chiropractors to get this message across to each one of their patients who have children diagnosed with attention disorders.

Use your practice as a vehicle to reduce the number of children taking potentially harmful, unnecessary drugs. Hold ADD/ADHD workshops, launch a children's campaign. Do whatever it takes to increase awareness in your community.

Article copyright The Chiropractic Journal.

~~~~~~~~

By David Singer

This publication is protected by US and international copyright laws and its content may not be copied without the copyright holder's express written permission except for the print or download capabilities of the retrieval software used for access. This content is intended solely for the use of the individual user. Source: Chiropractic Journal, Apr2000; 14(7) Item Number: 2000037313