

# Attention Deficit Disorder/ Hyperactive Disorder (ADHD)

## Definition:

ADHD is the most commonly diagnosed behavioral disorder in children, characterized by inattentive, hyperactive, restless behavior. In a school environment, the child may be antisocial, appear disorganized and have trouble concentrating. Symptoms must exist for at least 6 months for a positive diagnosis to be made.

The positive side of this condition is that these children are very creative and imaginative and grow up to be passionate, highly emotional, energetic adults. There is a fine line between adapting to the child's behavior, providing him / her with extra attention while nurturing the child's positive characteristics and talents and reaching a point where the behavior is disruptive to a household, or simply unacceptable behavior in society. Our lifestyle in North America demands the easiest, most convenient choices (how ideal it would be if we could have packaged children guaranteed to contain the perfect personalities and never stepping out of line). Even in the school system there is less tolerance for behaviors, which do not conform to the mainstream. Society has conditioned us to expect the picture perfect lifestyle and we seek to change anything that does not fit into it.

All of us know of individuals in their 40's and 50's who were absolute 'terrors' growing up as children -- many of these individuals as adults are spirited pioneers, with vast life experience and a zest for life, often on the cutting edge of their careers. If these are examples of individuals who exhibited hyperactive behavior and were not medicated.... what would they have been like if they were on medication for a portion of their lives?

## Aetiology:

males are 5 to 10 times more affected than females.  
typical age of diagnosis is 6 years, although diagnosis has also been made in adult years.  
blue eyed blonds or green-eyed redheads, Anglo Saxon heritage.  
family history of diabetes, obesity, alcoholism and allergies.  
premature births or complications at birth are frequent.  
exposure to alcohol, nicotine and cocaine at birth are common.

## Rule out other hidden causes of hyperactive behavior:

- Low Iron: Iron deficiencies may cause behavior changes, even if blood tests conclude the child is not anaemic.
- Hypoglycemia: levels of glucose in the blood directly influence the functioning of brain and nerve cells. The American College of Allergists state that 80% of people with food sensitivities have hypoglycemia; thus many children with ADD and food/ environmental sensitivities may also be dealing with blood sugar fluctuations. Protein snacks throughout the day and before bed will help stabilize the blood sugar levels; small meals every few hours are ideal. Cubes of chicken, raw organic unsalted nuts or nut butters are some choices.
- Visual or auditory impairments, learning disabilities or neuro psychological imbalances may contribute to behavioral problems.
- Assess thyroid function for possible overactive / under active thyroid.

- **Candida overgrowth:** ADHD children may be more susceptible to Candida overgrowth as a result of other related health problems, frequently prescribed antibiotics, sub optimal organ functioning (such as liver, thyroid or adrenal glands) and poor diet.
- **Parasites** are a common occurrence in children. Parasites attach to the walls of the intestines and feed off of the blood of their host. If left untreated a parasite can rob a child of iron and other essential nutrients, leading to pronounced changes in behavior and digestive function. Pinworms, Roundworms, Hookworms and Tapeworms have all been linked with sleep problems, rectal itching, headaches, and lack of appetite, abdominal pain, depression, attention problems and cyclical hyperactivity. The book "Guess What Came to Dinner" by Ann Louise Gittleman provides more documentation and discusses holistic treatment.
- **Other possible underlying health conditions include:** Fetal Alcohol Syndrome, head injuries, cysts, tumors, chronic ear infections, Mononucleosis, Epstein Barr Syndrome, learning disabilities and neuro psychological imbalances should also be ruled out.
- **Environmental chemicals and toxins:** Children are most at risk for toxic exposure. Children eat, drink and breathe more for their body weight, than adults do, thus they take in a larger proportionate dose of what chemicals are out there. Children can be viewed as the canaries of our time, most at risk to suffer the effects of our industrialized and chemical laden society. Infants and toddlers, with their detoxification organs still developing and small bodies, are subject to larger doses of pollution per pound of body weight than compared to an adult. Numerous chemicals found in the average home, kitchen, garage and classroom can adversely affect the brain, leading to behavioral changes.
- **Heavy metal toxicity:** Children are more sensitive to lead, aluminum, manganese, copper, cadmium and mercury. These toxins can affect the development of the brain and nervous system. Hair analysis is a good assessment for heavy metal toxicity.
- **Lead:** High amounts of lead can be found in radiators, gas, leaded windows, ceramics, pottery tiles, battery reprocessing, chalk, eye cosmetics, the restoration of old homes, old leaded paint, vinyl miniblinds (the plastic in blinds deteriorate, lead dust forms on the surface) candy wrappers and leaded crystal.

**Action:** Take steps to detoxify the environment; choose biodegradable cleaners, ensure proper ventilation, open doors and windows throughout the home. To control amounts of outdoor chemicals being tracked into your home, insist that shoes are taken off at the door. Investigate the ingredients in bug repellants as many bug sprays contain DEET a chemical linked to confusion, sleepiness and seizures. Solvents found in mothballs, pesticides, auto care products, gasoline, formaldehyde, toluene, methyl chloride, carbon tetrachloride, mineral spirits, petroleum distillates, trichloroethane hydrofluoric acid and ammonium bi fluoride are all central nervous system toxins.

**Allopathic medication and their long-term side effects:** The drugs commonly used to treat these disorders range from stimulant drugs to tranquilizers.

Animal studies done with Amphetamines (stimulants) show long-term side effects causing constriction of blood vessels in the brain and a decrease in the output of growth hormone.

- **Cylert (Pemoline):** Insomnia, liver failure (may lead to death), hepatitis, jaundice, convulsive seizures, hallucinations, headache, mild depression, dizziness, irritability, headache,

drowsiness, nausea, stomachache, may cause involuntary movements in the arms and legs, appetite suppression, nosebleeds, and uncontrollable vocal outbursts. 1,2

➤ **Ritalin (Methylphenidate):** A mild central nervous stimulant, the first studies on children and Ritalin began in 1937. Rated as a Schedule II drug (an addictive substance). It is not recommended for children under 6 years of age. Adverse reactions include loss of appetite, insomnia, stomach pain, weight loss, delirium, seizures, racing heart beat, nervousness, irritability, attacks of Tourette's syndrome and stunted growth in children when taken long term. Ritalin is a popular street drug in Vancouver, ranking fourth in use behind marijuana, cocaine and heroin. Ritalin has also been used to treat narcolepsy (the uncontrollable urge to sleep). This drug should not be prescribed for an individual experiencing anxiety, tension or agitation for it may aggravate the symptoms. 1,2

In the 1970s the US Drug Enforcement Agency classified Ritalin as a highly addictive, a controlled substance with a high potential for abuse, which may cause severe psychological and physical dependency. Ritalin has been classed as a Schedule II drug, grouped in same category as morphine, cocaine, methadone and methamphetamine (a chemical whose street drug name is 'speed'). In comparison, Valium, a highly addictive sleeping pill is classified as only a Schedule IV drug.

Ritalin is a central nervous system stimulant, an amphetamine-like drug, resembling cocaine chemically. Both inhibit the reuptake of dopamine in the same brain receptors, causing more dopamine to be available in synapses between brain cells. One of the differences between coke and Ritalin is that cocaine is cleared from the brain faster than Ritalin, thus Ritalin provides the same effect as cocaine, yet it doesn't wear off as fast.

➤ **Dexadrine (Dextroamphetamine):** side effects similar to Ritalin, more potent and addictive. Excessive restlessness, insomnia, loss of appetite, stunted growth, constipation, tremors, uncontrollable twitching or jerking. Withdrawal symptoms are possible leading to depression, fatigue and dependency. Heavy abuse of Dexadrine may lead to hyperactivity, personality and schizophrenic like thoughts and behavior. An inactive ingredient in Dexadrine is Tartrazine, a yellow food coloring, which causes severe allergic reactions in sensitive individuals. 1,2

### **Nutrition:**

Because many children with hyperactivity have sensitivities to the very foods which they eat every day, parents may never be alerted to the relationship between certain foods and changes in behavior. Food sensitivities often go undetected by conventional allergy tests. Blood tests and skin patch tests, which may pinpoint full blown highly allergic materials, may not identify sensitivities which occur hours or even days after the tests have been carried out. An effective way to determine individual sensitivities is to follow an elimination diet for a minimum of 10 days or until the child shows improvement (sometimes 1-3 months on a 'clean' diet are needed to note behavior changes). Vega testing may also be of use to identify allergic triggers.

**Other Culprits:** Foods which were once considered 'good' foods (such as corn, wheat, milk products, butter, margarine, oranges, yeast -containing foods and sugar) are now allergic triggers for many individuals, perhaps because they comprise so many foods and have been treated with sprays and other technological advances (fertilizers, genetic mutations...).

**Products to Eliminate Completely from the child's environment and diet due to the high levels of preservatives, colorings and sugar:** Antacids, cough drops, perfume, throat lozenges, commercial toothpaste (especially containing fluoride), bacon, butter, candy, catsup, chocolate, colored cheese, corn, ham, hot dogs, luncheon meat, milk, mustard, pork, salami, salt, soft drinks, soy sauce, sausage, tea, wheat products. 5

The Feingold Association has linked hyperactivity and hypoglycemia with reactions to food additives and natural salicylates. Salicylates are found in aspirin, apples, pears, peaches, tomatoes, grapes and oranges. Elimination of these products from the diet has proved successful in some cases. (See the end of this handout for the address and more information on the Feingold Association and Diet.)

Reactions to preservatives, dyes, colorings and pesticides are another concern. Chemical byproducts cause reactions in children; the liver and other organs are immature and incapable of dealing with toxins. Instead of labeling a child with ADHD as defective, perhaps a more appropriate assumption about children diagnosed with ADHD is that these children are simply an expression to what is occurring to our world in a global sense. The use of artificial coloring, flavoring and additives has skyrocketed and our bodies are simply not equipped to handle the load of extra chemicals. The August 1990 edition of the Alive Magazine stated that in the last 30 years food additives have increased 1000%! By this statement alone, it is no wonder sensitive children are reacting more to our world.

**Become an expert label reader** and do additional research! Current government regulations around food labeling requirements are inconsistent, incomplete or misleading; there is not always a mention of additives. When was the last time you saw all (or any) of the ingredients listed on a commercial brand of hand lotion or toothpaste?

The Journal of Orthomolecular Medicine Vol. 9 No. 4 1994 has listed many food additives and their side effects:

**Tartrazine (Yellow dye No. 5, FD&C):** derived from coal tar, primarily used by the soft drink industry, tartrazine is chemically similar to aspirin and other foods with salicylates. Reactions include asthma, rhinitis, rashes, nasal congestion, changes in mental behavior, adverse reactions seen most commonly in subjects who are also sensitive to acetylsalicylic acid. 3

**Sunset Yellow:** coloring agents in breads, sauces, gravies, cola drinks and caramels.

**Benzoates:** jams, soft drinks, salad dressing. Reactions are directly linked to hyperactivity.

**Sulfites:** found in dried fruits, biscuit dough, cider, syrup, and fruit juices.

**Nitrates/ Nitrites:** bacon, ham, cured meats, corn beef, cheeses. May cause headaches.

**MSG:** savory foods, snacks, soups, sauces, meat products. Causes neuro excitatory effects on the brain. 3

**Saccharine:** sweetening tablets.

**Aspartame:** reduces brain tryptophan levels (linked with aggressive, violent behavior).

**Tryptophan**

is a precursor for serotonin, low levels of tryptophan equate with low levels of serotonin in the brain 3. Artificial sweeteners have been linked to seizures, memory loss, hyperactivity and neurological damage.

**Fluoride:** potential to cause damage to the central nervous system, molted teeth and growth problems.

Red and Orange beverages and medicine are full of artificial coloring. Avoid these colored snacks. Most food colors are derived from petroleum sources. Most synthetic

foods are banned or restricted in other countries.

Environmental Conditions: mold, chemical sprays, factory pollution, school bus odors, weed killers, herbicides, commercial play dough, felt pens, chemicals in new rugs, paint, dust and pollens. Eliminate as many as possible from the child's world.

*As there may be numerous triggers for a child, it is a parent's role to become a sleuth.*

Possible Dairy Allergy: drastic mood swings, cravings, childhood history of colic, ear infections, asthma, constipation, diarrhea, bed-wetting, strep throat, dark lower eyelids, and constant clearing of throat.

Clues to possible allergies:

- red earlobes and cheeks
- dark blue, black or red circles around the eyes
- itching burning eyes
- nose rubbing, sneezing
- children who are tired all the time
- fidgety with lapses in concentration
- changes in behavior after eating
- sniffing, recurrent yeast infections,
- changes in handwriting or drawing after foods

Reactions to food additives: eczema, rashes, flaking dermatitis, irritable bowel syndrome, nausea, vomiting, diarrhea rhinitis, migraines, bronchial spasms, hyperactivity and other behavioral disorders (Feingold Association of the US: Vol. 20 No. 9)

Begin a daily **diet and symptom diary**, tracking the time of eating and identifying the foods eaten. Also include any noticeable changes in your child's behavior and the approximate time. Pay particular attention to restlessness, tearfulness, moodiness, destructive behavior, and sleep disturbances. Allergic reactions may manifest in the body minutes after consuming a food but reactions may occur even a few hours up to a few days after the food has been ingested.

**What to eat??**

It is best to eat organic foods whenever possible. Drink lots of water (Consuming 1 glass of water per 20 pounds of body weight) and avoid soft drinks, if your child enjoys sweets, try using Stevia powder instead of sugar. A diet high in vegetables (raw or lightly steamed), fresh fruits, almonds, wheat germ and fish and turkey (high in tryptophan) avoiding red meats. Include whole grains (quinoa, brown rice, amaranth, millet) and legumes in the diet daily. Avoid all processed and packaged foods.

**Digestive Health Program:**

- Identify and address underlying general health concerns and assess digestive function
- Remove food sensitivities, exposure to damaging chemicals, pesticides and drugs
- Focus on healthy nutrition providing nutrients needed for optimal immune and nervous system functioning
- Support optimal digestion: healthy bacteria, adequate digestive enzymes and hydrochloric acid
- Repair damaged tissues in digestive tract

**Nutrition:**

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- Use healthy oils: Extra virgin olive oil or coconut oil for cooking and light stir frying
- High quality protein in small amounts throughout the day. Legumes, chicken, fish, nut butters, preferably organic and preservative free. Fish limit intake to 2 times weekly, emphasize smaller salmon, sardines, herring and smaller fresh tuna
- Avoid: deli meats, wieners and deep fried meats. Fresh water fish and large predatory fish are best avoided and likely to contain a high mercury and PCB content (this group includes large salmon, shark, pike, pickerel, canned tuna)
- High Fiber foods: support the growth of healthy gut bacteria, ensure good elimination, decrease stool transit time and prevent absorption of toxins: oat bran, psyllium, flax seeds and ground flax meal, legumes, apples, raw vegetables, jerusalem artichoke flour are excellent choices.
- Fruits and Vegetables: emphasize organic
- Whole grains such as millet, brown rice, amaranth and whole oatmeal such as Scottish oats are excellent forms of fiber, contain large amounts of B vitamins and help to regulate blood sugar levels.
- Avoid junk food, anything brightly colored and packaged processed foods

### Supplements:

Vitamins: Double check labels to ensure that there are absolutely no sweeteners or coloring added, call the manufacturers to be sure. Ask about the fillers and binders used.

- Essential Fatty Acids (EFA): needed for the formation of cell membranes, involved in immune system and brain function. Supplement with omega 3 fatty acids, (which can convert into DHA in the body) Best oils are those containing Alpha Linoic Acid, an omega 3 fatty acid, which converts to DHA (docosa hexaenoic acid) one of the thinnest oils in the body. Sources of ALA include: Canola, soy and flax oil or DHA containing products found in fish oil (salmon, tuna, sardines). Omega 6 fatty acids containing Gamma linolic acid are also needed for brain and immune function: Sources include evening primrose oil, borage, black currant oil and Udo's Oil (which contains a blend of both omega 3 and 6). These oils can be added to food after it has been cooked, or mixed into nut butters, salad dressing, into cereal or drizzled on toast.
- Calcium and Magnesium: should always be taken together. Food allergy, stimulants, caffeine, nicotine and amphetamines can all lower calcium levels in the body. Calcium has a similar structure to lead and they occupy the same spaces in the body, if one is calcium deficient one is also more likely to have higher amounts of lead in the body. Magnesium is required to convert omega 3 to DHA, and has a calming effect to the body, relaxing to nerves and muscles.
- Vitamin B Complex: Necessary for stress management and a healthy nervous system. People with ADHD require higher levels of B1, B2, B3, B5 and B6,
  - Lecithin, Phosphatidyl choline and Phosphatidyl serine: support nerve function, are components of cell membranes, improves memory and cognitive function.
  - Vitamin C, Chromium, Selenium, Iron, L' Glutamine are also useful and sometimes relevant supplements.
  - Bach Flower Remedies: works to balance emotions and attitudes of an individual.

Catnip (*Nepeta cataria*) a gentle nerve relaxant for restlessness, hysteria and hyperactivity. Valerian (*Valeriana officinalis*) a non toxic, non addictive tranquillizer, gently sedating for

excitability and anxiety.

Wood Betony (*Stachys betonica*) an herb with mild sedative properties, helpful for memory loss, weak digestion, nightmares and anxiety.

Skullcap (*Scutallaria lateriflora*): relaxing nervine, antispasmodic, calming for tics and restless leg syndrome.

Chamomile (*Chamomilla recutita*) a mild sedative, used for physical stress, hyperactivity, insomnia.

St. John's Wort (*Hypericum perforatum*) sedative herb with antidepressant properties.

Passion Flower (*Passiflora incarnata*): soothing for constant mental activity, overactive brain, limb twitching, anxiety and sleeplessness.

Lemon Balm (*Melissa officinalis*) nervousness, depression, fidgeting.

California Poppy (*Eschscholtzia californica*) an herb with weak benzodiazepine activity, yet non-addictive.

Rosemary (*Rosmarinus officinalis*) hyperactivity, limb tremors, giddiness, helps to focus concentration

Siberian Ginseng (*Eleutherococcus senticosus*) adaptogenic herb, immune system support, stimulates cognitive processes, offer resistance from the negative effects of stress, helps to improve concentration

Gingko biloba (*Gingko biloba*) antioxidant to the brain, used to enhance learning and improve cognitive performance, increase brain dopamine activity, protection from excess stress hormones.

Become creative in the administration of herbs. Chamomile and St. John's Wort will be tasty mixed with lemon and mint. Consider mixing herbal teas with a little honey or use stevia (a natural sweetener, see below) and chilled as a cool drink or make into popsicles; incorporate herbs into daily cooking, such as soups, stir fries and stews. The more herbs are used commonly in daily life, the more one may be inclined to resort to them before considering more harmful alternatives. The more familiar a child becomes with the herbs, the more willing they may be to take them.

Try Stevia instead of sugar and honey: Stevia rebaudiana is a small shrub which grows in Paraguay and Brazil and the herb is approximately 10 to 15 times sweeter than common table sugar without causing blood sugar fluctuations and aggravating hyperactivity 4. A liquid extract of the herb is also available and is typically 100 to 300 times sweeter than table sugar. Stevia can be used safely and effectively in baking, cooking, on cereals and in juice and tea. For more reading information see the bibliography at the end of this article.

**Self-esteem:** Focus on supporting your child's self esteem:

Reward the desired behavior through verbal praise, smiles, hugs, and expressions of approval, encouragement and affection. Children with ADHD need to hear good things said about them to help support an already fragile self-esteem. Create space for the child to make some choices in his/her life, this helps to validate the child's feelings and gives them some control over their lives.

Often with ADHD the hyperactive behavior is unconsciously rewarded. There is generally so much energy focused on the child's extreme hyperactive reactions that there is little energy left to interact positively when the child is cooperative and calm. Provide reinforcement for the desired behavior.

**Where to Begin?**

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1. Build a Support Network: through family members and friends, seek out a physician supportive of researching alternatives for your child.
2. Read books on treating ADHD with holistic measures. Places to check are health food stores, libraries, support groups listed at the end of this information also have recommended reading lists available.
3. Have the child tested for heavy metal toxicity, especially lead, cadmium and copper. Check for the possibility of pinworms, test for iron deficiency anaemia and hypoglycemia.
4. Eliminate foods, which may be causing possible allergies, begin with the food the child craves most, as it may be the most reactive. Plan an appropriate time to begin dietary modifications, holidays, visiting or traveling may not be the best time.  
Begin reading labels and begin to eliminate sugar, white flour, chocolate, and foods with artificial coloring and additives, corn, peas, soft drinks, wheat, peanuts and packages foods. Keep a diet diary of food choices and note any behavioral changes.
5. If the problems seem to be occurring only at school and not at home, check out the environment at the school. Fluorescent lighting, chalk dust, cleaning agents, noise, allergies to hamsters or guinea pigs. Make appointments with the teacher and principle and stay in touch weekly.
6. Begin incorporating vitamin supplements and herbs into the child's diet and daily life. It may feel a bit overwhelming to put together a program without outside advice. A consultation with a Medical Herbalist would be helpful to design a personalized program (covering dietary suggestions, herbal tincture, herbal tea and vitamins) for your child, while also shedding light on possible environmental triggers further contributing to behavioral problems.
7. Don't give up, perseverance is of key importance and if may take time to notice the maximum effects lifestyle changes and nutritional supplements. Think of the dietary changes as a long-term lifestyle change, not a temporary regime. If you feel lost or overwhelmed trying to find health professionals able to provide you with additional tools and direction -do not give up, there is information and support available

### **ADHD Support Groups and Organizations**

**FEINGOLD Association of America:** Handbook, food list, newsletter and associated materials.

P.O. Box 6550, Alexandria, VA 22306 Ph. (703) 768-FAUS

**Health Action Network Society:** Hyperactivity Information package for a nominal fee.

Literature and articles on holistic approaches. # 202- 5262 Rumble St., Burnaby, B.C. V5J 2B6  
Ph. (604) 435-0512

**Attention Deficit/Hyperactive Disorder Certificate Program:** Langara College Continuing Studies,

100 West 49<sup>th</sup> Avenue, Vancouver BC, V6Y 2Z6 ph (604) 323-5984

[www.langaracollege.ca](http://www.langaracollege.ca)

**Canadian Association for Health Advancement:** 7535 Kingsway, Burnaby, B.C. V3N 3B5 Ph. (604) 521- 1728

**Learning Disability Association of Canada:** 323 Chapple St., Ottawa, Ontario K1N 7Z2 Ph. (613) 238- 5721 Fax: 235- 5391

**Learning Disability Association of British Columbia:** Reading list and catalogue

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**Sensory Motor Training:** Brain Gym: whole brain learning through simple movements and activities, designed to better motivate, entice, reinforce and 'stamp in' learning, ideal for children and adults. Address for local practitioners, reading material and courses: Educational Kinesiology Foundation, c/o Dr. Paul and Gail Dennison P.O. Box 5002, Glendale, California. 91221 Ph. (818) 846- 9721

Some useful web sites:

ADD/ADHD Online Newsletter <http://www.nlci.com>

Asthma and Allergy Foundation <http://pslgroup.com/dg/6doa.htm>

Sidney Baker website <http://www.sbakermid.com>

William Crook [www.candida-yeast.com](http://www.candida-yeast.com)

Center for Science in Public Interest [www.cspinet.org](http://www.cspinet.org)

Feingold Association <http://www.feingold.org/>

Foundation for Integrated Medicine, Leo Gallard [www.mdheal.org](http://www.mdheal.org)

Environmentally Clean Living Unit <http://www.eclu.org/links.htm>

Parents of Allergic Children <http://www.parentsofallergicchildren.org/>

Pubmed ADHD and Fatty Acid [www.ncbi.nlm.nih.gov/PubMed](http://www.ncbi.nlm.nih.gov/PubMed)

Homesafe lead site [www.leadpro.com](http://www.leadpro.com)

General lead information [www.ParentsPlace.com](http://www.ParentsPlace.com)

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3. Allergies A - Z, Myron Lipkowitz M.D. and Tova Navarra R.N., Facts On File Books, 1997.
4. Stevia Rebaudiana: Nature's Sweet Secret, David Richard, Vital Health Publishing, 1998.
5. Prescription for Nutritional Healing, 2nd. Edition, James and Phyllis Balch, Avery Publishing Group, 1997.

Healing the Hyperactive Brain: Michael Lyon, MD

ADHD Alternatives: A Natural Approach to Treating ADHD: Aviva and Tracy Romm

Is Ritalin Necessary? The Ritalin Report: Billie Sahley, Ph D

The Hyperactivity Hoax: Sidney Walker III, MD

The Impossible Child: Doris Ramp

Kids are What They Eat: Betty and Si Kamet

Healthier Children: Barbara Kagan

Freedom from Allergy Cookbook: Ronald Greenberg

Solving the Puzzle of Your Hard to Raise Child: Dr. William Crook

Why Can't My Child Behave: Jane Heresy

Safe Shoppers Bible: David Steinman

Leaky Gut Syndrome: Elizabeth Lipski

The Myth of the ADD Child: Thomas Armstrong

7 Habits of Highly Effective Families: Stephen Covey

Phosphatidylserine: Parris Kidd MD