

Editorial ▶ ADHD: A Parent's Perspective

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Hello, my name is Marc, and my son, Seth, has ADHD.

I know your first reaction; you think I have failed as a parent. I am okay with your opinions; only time will judge my actions. I used to think the same way as you before the fall of 2011.

I like to say that Seth would not stop moving before he was born. I can recall nights that my wife would complain that it felt

like there was a soccer game going on inside her. To me it looked like a scene out of *Aliens!*

When he was born all he wanted was to be held and moving. At the age of five months, he was crawling, and by nine months, he had already mastered walking. He was a gross motor kid from day one. While other parents were able to put their kids down and come back to find them in the same place, that was never an option in my house.

As Seth matured, his gross motor expertise continued to improve. By the age of four he was climbing trees in our backyard and on anything he could find, pretty much anywhere. If there is something to jump off of, climb onto, hang or swing from, or bounce on, Seth will find it. He has a great imagination for creating activities and games outside in the backyard and recently has taken up doing tricks with his bike on a ramp I fashioned.

Two years ago, in the fall of 2011, Seth entered first grade at a traditional public school. Before I delve into that wild ride, let me tell you about our educational experience prior to that. Seth was at a local pre-school, and the teachers worked with him to encourage and ensure his success. We always knew that it was difficult for him to sustain attention, and the teachers enabled him to stand up when working to “get the ants out his pants.” His kindergarten teacher was most helpful in this regard, but in hindsight, this was not productive for first grade. We did not truly understand the level of his difficulties due to the flexibility provided.

It became quite obvious that first grade would be a challenge within the first few weeks of school. Seth's teacher was communicating with us from early on through email, phone calls, and in-person meetings. While other children were able to concentrate on their work, Seth would hum, sing, move around, twirl his hair, and do anything other than his work. He took minutes to transfer activities and get started while others went right to work. We did what any good parent of a young child these days does, we went online.

One of the first steps we learned about after wading through the thousands of books and websites about “curing” a child with ADHD was eliminating food colorings and preservatives from the diet. I was honestly very skeptical, but kudos to my wife; she took charge, and we noticed the difference almost immediately. She scoured the internet, followed recommendations from reputable organizations, and removed all red, yellow, and blue colors. Did you know that marshmallows contain blue coloring? I was astounded at the amount of foods that contain these chemicals. The next step was removing foods with preservatives. While preservatives help keep food fresher for longer, many of the most common preservatives have been linked to ADHD in children.^{1,2} After we made these changes, Seth had fewer behavior problems in school and was getting his work done in a timely manner. But the problems persisted.

Before we get further into this conversation, yes, as a behavioral optometrist I got my son in for an examination. It was deemed that he in fact needed vision therapy, which started immediately. This was done under the supervision of Paul Harris who had joined the faculty at Southern College of Optometry months before. There was no way that I was going to treat my own child and that he would actually listen to what I was saying!

When we received this email from Seth's teacher, we knew we had to go further in trying to help him find success.

*Hello Mr. & Mrs. Taub,
I just wanted you to know I received your email about Seth going to visual therapy. Seth has a lot of trouble staying on task to complete projects or assignments. Right now, he is twirling around and humming. I gave an assignment 25 minutes ago and he has nothing but a drawing on his paper. Please continue to talk to him about the importance of completing his work and staying on task. Thank you in advance!*

Our next step was to seek the assistance of a child psychologist. She administered an IQ test to Seth over several hours. Seth scored in the superior range. The psychologist told us that she thought Seth would have scored much higher if he could have stayed on task. At first, we were entirely opposed to medication. We had heard stories of children becoming like zombies after trying ADHD medication. We were concerned about the long-term effects. Also, we were concerned about whether medication would change the essential Seth – an enthusiastic, imaginative, sensitive, empathic boy who endears himself to many of the kids and adults in his life. After talking with the psychologist and Seth's pediatrician, we

realized that the only way really to address Seth's issues was to try medication.

We started with the lowest dose of the medication Vyvanse. The effect was immediate. After he adjusted to the medication, the reports of disruptive behavior in class stopped. Seth started to get 100 percent on his spelling test each week. He was able to complete his work in a timely manner each day, and his teacher told us he was right on track. The essential Seth is still with us – just as talkative and enthusiastic as ever! After almost two years, I am positive that this was the right decision for Seth. We take each school year as it comes though and will do what we feel is necessary to guarantee Seth's success.

In case you were wondering, after about 25 sessions of vision therapy with two of my most trusted residents, Drs. Eric Weigel and Jen Itoni, under the guidance of Paul Harris, Seth has made tremendous strides. He wears his low plus glasses in school every day, and at his last evaluation, which

was in fact just last week, he completed the King-Devick easily and rocked his Groffman Tracings!

So, after all the soul-searching and worrying about the stigma of ADHD, whether there is any such thing, whether we should medicate, and whether we were good parents, the bottom line is: Yes, there is a disorder known as ADHD, and yes, medication can help. Should it be the first line of defense? No. It must be considered as part of the overall treatment plan that includes vision therapy, dietary control, and behavior modification. For my family, this is the start of a lifetime journey, not the end!

References

1. Wallis C. Hyper Kids? Cut Out Preservatives. Time Magazine September 6, 2007. <http://bit.ly/HyperKids>. Last Accessed April 1, 2013.
2. Goodwin J. Study: Healthy eating may help children with ADHD. USA Today. January 9, 2012. <http://bit.ly/ADHDdear> Last Accessed April 1, 2013.

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The College of Optometrists in Vision Development Annual Meeting Travel Grant is offered to encourage and support optometry student and resident participation at the meeting. The grants are provided through the Wold SAFE Fund.

COVD members donate to this fund to support student attendance at the meeting. The number and amount of the grants given are based on monies available in the fund each year. This year the grants have been increased to \$300 each. While we don't yet know the total number of grants available this year, we are able to fund at least 23 grants.

To be eligible to receive a grant, an optometry student or resident must:

- Be a COVD member (if not already a member, join for free)
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- Submit an application **and** current copy of your CV. Be sure to include any posters or papers you are presenting at the 2013 Annual Meeting.
- After your application is received, you will be given the title of an article to summarize.

Grant recipients will be selected based on a review of their CV and article summary.

The 2013 COVD Annual Meeting is October 8-12, in Orlando, Florida. Deadline for submission of applications is 11:59 pm on July 22, 2013. You will be given the title of an article to summarize on or before July 26, 2013. The article summary and submission of your CV is due 11:59 pm on August 22, 2013. Decisions will be made on or before August 30, 2013.

Applications are available on the COVD website or by emailing julie@covd.org.