

ADD (attention deficit disorder) and **ADHD** (attention deficit hyperactivity disorder) are very common disorders in children. Although these disorders may seem similar in different children, they are not at all the same. By no means can attention deficit disorders in children be standardized and approached indiscriminately.

Each case of ADHD in every child requires a totally fresh individualized approach. In order for us to be effective in any given situation, we need to recognize the variety of potential causes.

We will need to look at the child attentively and perceive what transpires in the overall image: is the child thin, tall, small headed, of pale appearance; or is the child plump, large, full blooded with a rather large head? What is the constitutional tendency, which center is most dominant? We also need to consider the child's age: is it a preschooler, a school age child, or an adolescent? Every age group would call for a different approach in managing the problem.

There is another very important aspect that belongs to observation: **interested, keen observation by itself serves as a powerful healing force.** Modern people usually perceive and process things intellectually and do not ascribe much significance to the intent that is always present when we give our undivided attention to persons and objects of our observation. This intent is a force of its own, and children would immediately feel this vector of attention as a warm field gently engulfing their being. Children need this attention. This is the beginning of the healing process.

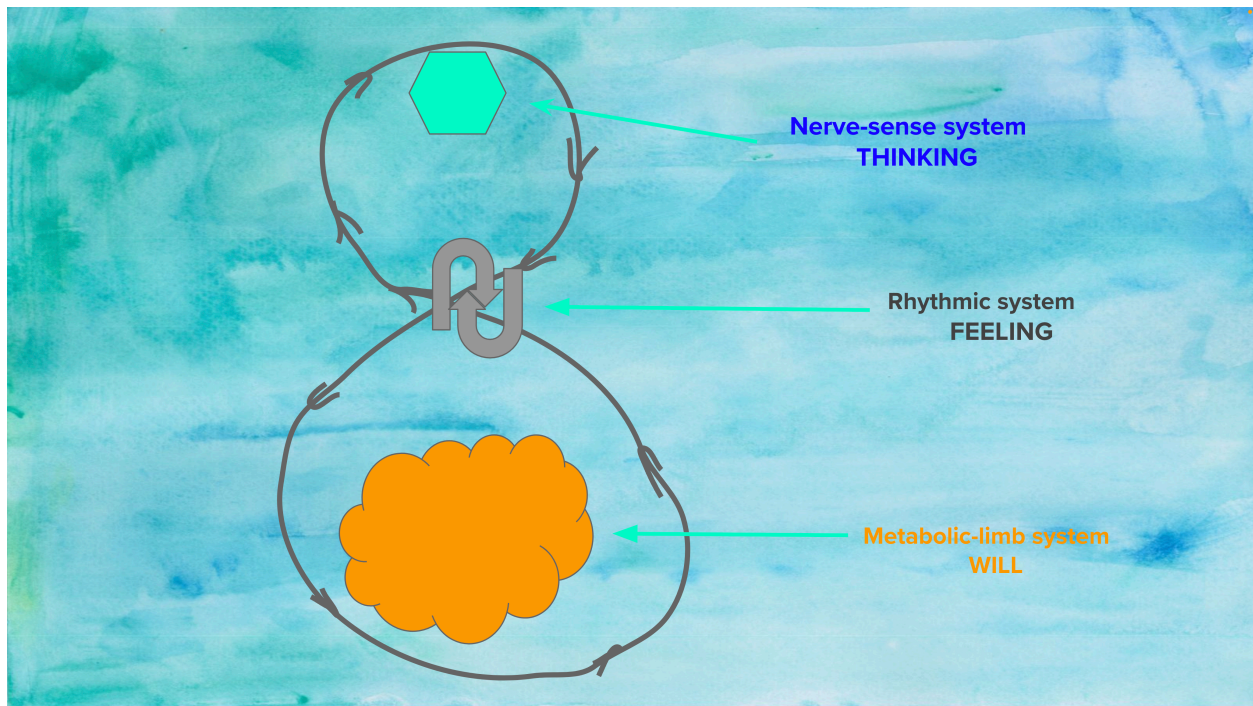
The first impression we receive is most likely the right one. More often than not, a child diagnosed with the attention deficit hyperactivity disorder is unable to maintain the focus of attention exactly due to his/her hyperactivity: the metabolic-limb pole is not coordinated with the nerve-sense pole, sensory impressions do not reach deep enough into the metabolic system*. The moving center is overactive because the forces of metabolism and movement remain ungoverned by the nerve-sense system. In this situation, the rhythmic system is also inactive in providing proper connection between both poles. Special attention should also be given to the rhythmic organization of daily life: sleep-wakefulness cycles, meal times, peak of energy/activity, physical and mental activity.

There could be several scenarios for this imbalance:

- In a preschooler (approx. before age 7), the forces of growth work mostly in the direction of the formation of a child's physical organs; before age of seven or so, these forces should be allowed to do what they are needed for - proper development of the body and its organs. Any intense intellectual activity will divert these formative forces from their main task and cause physical symptoms and behavioral issues: fatigue, attention and focus problems, headaches, irritability, etc. A child of this age should be allowed to move, play, and live fully in the body without inhibitions. If a child has a natural interest to a certain activity, this interest should be observed and supported.
- In a school age child (approx. from age 7 to 14), attention problems are most likely to manifest and often are caused by disconnection between activities of the nerve-sense center and the metabolic-limb center. These two opposite poles (see diagram below) **must work as a dynamic unity**, otherwise they do not perform as a coherent whole but resemble a broken and misaligned mechanism. What does it mean? It means there is a need to strengthen the nerve-sense center's activity by doing the attention exercises, implementing a balanced special diet, supporting healthy rhythms of physical and intellectual activity, and implementing natural medicines to achieve these objectives. The following situation is also possible: overburdened thinking center works at the expense of metabolic-limb system and therefore causes problems with healthy distribution of energies and substances. In this case, the metabolic-limb center should be strengthened by organizing healthy nutrition, reestablishing normal rhythmic cycles, avoiding excessive use of electronic devices (especially at night before bedtime), spending time outdoors engaging in healthy physical activity.
- in adolescents, attention deficits and behavioral problems are most likely to be caused by profound hormonal and physiological changes: these issues should be addressed individually and managed in accordance with a child's constitutional makeup and specific circumstances.

Main points to consider in managing these problems are:

- Rhythm;
- Diet;
- Balanced activity;
- Remedies.



* Please refer to video lecture #2 of the educational series *From troubled to healthy: pathways to children's well-being*.