

Indian Academy of Pediatrics (IAP)



## GUIDELINES FOR PARENTS

# Care of an Inattentive/ Hyperactive Child



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### 10 FAQs on CARE OF AN INATTENTIVE/HYPERACTIVE CHILD

1. What is attention deficit hyperactive disorder (ADHD)?
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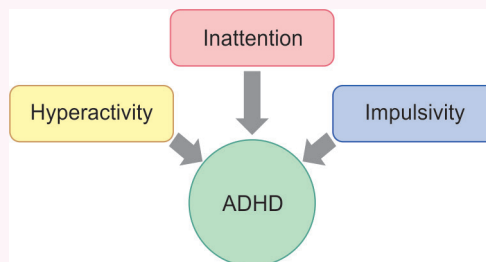
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# Care of an Inattentive/Hyperactive Child

Q1

## What is attention deficit hyperactive disorder (ADHD)?

It is a combination of hyperactivity, impulsivity, and inattention in a child. This problem behavior must be observed in at least two different places such as home, school, play, and neighborhood. The behavior must be inappropriate for the age of the child, present in the child since an early age (<12 years) and must cause significant dysfunction in the child's day-to-day life (Fig. 1).



**Fig. 1:** Characteristics of attention deficit hyperactive disorder.  
(ADHD: attention deficit hyperactive disorder)

### Q2a

#### How to differentiate between a simple “energetic” child or a hyperactive child?

If a child shows the following features “*in excess*” expected as per the age of the child and is affecting the appropriate functioning of the child, he can be a hyperactive child. Early evaluation by a specialist is warranted. The features of hyperactivity are:

- Fidgety (restless or nervous) movements of hands and feet or cannot stay still.
- Leaving seat in classroom or in other situations in which remaining seated is expected.
- Running or climbing about excessively in situations where it is inappropriate.
- Difficulty in abiding by the rules of the play activities.
- He is often “on the go” or often acts as if “driven by a motor”.
- Talking excessively.

### Q2b

#### What is meant by impulsivity?

The literal meaning of the word impulsivity is the tendency to do things suddenly without careful thought or planning. Certain examples are as follows:

- Blurting out the answer even before the question is completed.
- Often have difficulty awaiting turn.
- Often interrupts or intrudes into others.
- Butts into conversation or games.

Q2c

### How do I understand that my child is inattentive?

A child shows the following features in multiple places such as school, home, play, or neighborhood, he might be inattentive.

- Fails to give close attention to details or makes careless mistakes in schoolwork or day-to-day work.
- Difficulty in sustaining attention in tasks or play activities.
- Often do not listen when spoken directly.
- Does not follow through on instructions frequently and fails to finish schoolwork, chores, or duties in the workplace.
- Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework).
- Often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books, or tools).
- It is often easily distracted by extraneous stimuli.
- It is often forgetful in daily activities.

Q3

### But, my child can concentrate well if he wants to. How can the child be inattentive/hyperactive?

Often the parents believe that it is the lack of interest of the child in studies or other activities that affect their performance. However, it is of utmost importance to understand that this naughtiness could be a neurobehavioral disorder like attention deficit hyperactivity disorder (ADHD) and the child needs help rather than scolding or increasing strictness at home. So, whenever a child demonstrates hyperactivity, inattention, or impulsivity in two or more settings (school, home, and play) and is affecting the functioning or performance of the child, it is a matter of concern. In such a scenario, one must seek medical help.

  
**Q4****What should I do if I suspect inattentive/hyperactive?**

Once you suspect, you are already ahead of others. Denial poses such a stumbling block for early evaluation and management of a child. You must take your concerns to an expert like a child specialist, developmental pediatrician, child neurologist, or a child psychiatrist. The specialist would evaluate the child and manage the child appropriately.

  
**Q5****Can the child have other problems with his inattentiveness/hyperactivity?**

Yes, in about 60–70% of children with ADHD additional problems may be encountered during disease. These are commonly autism spectrum disorder (ASD), learning disability (LD), Tic disorder, anxiety disorder, conduct disorder (CD), oppositional defiant disorder (ODD), depression, and bipolar disorder.

Q6

**Do the features of ADHD become better with age? Can ADHD be cured? Can the child become normal?**

There are age-related changes with ADHD. It depends on the predominant clinical feature of each child. Hyperactivity improves with age gradually; however, impulsivity becomes problematic mainly in adolescence. Inattention is common in school-age children. This natural history can vary among individuals.

The features of ADHD can be due to some medical etiologies such as anemia, sensory deficits, metabolic or genetic disorders, toxic, and stressors in the family. Hence, these children need to be worked up by a specialist. The doctor will identify the treatable causes and advise on treatment. The therapy essentially consists of behavior therapy and/or medicines, if required.

Q7

**How can ADHD be diagnosed?**

The first and foremost point in diagnosis is the clinical evaluation by the specialist by taking a good clinical history and examination. The features of hyperactivity and inattention can be secondary to many medical reasons. Your doctor would rule out any medical condition explaining the features of ADHD, and then a final diagnosis can be made by the standard questionnaire-based criteria [link to Diagnostic and Statistical Manual of Mental Disorders (DSM 5)].

Q8

### Has my child got this disorder because of us?

Most definitely not! No parent would harm or do it deliberately to their kid. Parental contribution, if any, can arise from a lack of understanding that this is a problem and your child needs help. Many parents just believe that they were also like this in their childhood, and hence do not consider that they need to meet a doctor for their kids' inappropriate behavior.

Another point in this neurobehavioral disorder is that it could have a genetic etiology. That means it could be due to a disorder that might have to do with genes. Your doctor might guide you further on this.

Q9

### Can he go to school normally as others?

Any child with the neurodevelopmental disorder can lead a normal life as other children. It is a deadly myth that "these things cannot get better" or "the child has XYZ disorder and he is doomed". Timely and regular interventions can make a significant difference.





**Q10**

**Do not you think medicines for a bit of inattentive/hyperactive a bit too much?**

Behavioral therapy is the first and foremost thing that helps and makes a difference in a child’s life. Medications would help them to work in synchrony with behavioral therapy for optimum results. Combined therapy helps the best under expert hands.

Careful researches have conclusively proven that a combination of expert behavioral approach and expertly introduced and monitored medication helps the best.

So, to summarize, let us go through the Do’s and Don’ts:

**What to DO with Inattentive/Hyperactive child?**

- Suspect early
- Access early and appropriate healthcare
- Start early intervention
- Stay positive and have patience
- Expect good results
- Regular follow-up

**What NOT to do with an inattentive/hyperactive child?**

- *Do not* blame or scold the child
- *Do not* blame the parents
- *Do not* think the child cannot get better
- *Do not* interrupt child’s remedy schedule

*Note:* Please remember in these conditions, “your doctor truly knows best”! Best wishes!!