

## ADHD, ADD, and Hyperactivity

### My Observation and Research

My personal observation and research has led me to make the hypothesis that ADHD, ADD, and hyperactivity are only symptoms of dietary imbalances. Certainly, genetic predisposition comes into play, and neither diet nor most any other thing will alter the personality that God has given a person. The exception to this is drugs. Drugs can and will alter personality. However, I believe that altering a personality through drugs is dangerous and defeats the purpose of allowing a person to flourish in his God-given attributes. I believe it is possible for a person to retain his uniqueness and still have acceptable and "normal" behavior patterns.

### Neurotransmitter Activity

In some of the population, neurotransmitter activity is more intense than in the rest of the population. This means that the messages that are transmitted across the synapse are more frequent and there is more volume. Let me explain. For a person to be able to think, a process of neural conduction must occur. Our central nervous system, which includes the brain, operates by sending electrical messages through a nerve fiber to the appropriate part of the body to carry out an action or a thought. These electrical messages travel down a nerve fiber until they reach a place where one nerve fiber ends and another nerve fiber begins. There is a space between the ending of one nerve fiber and the beginning of another nerve fiber. This space is called a synapse. For the message to jump across this space and continue to travel down the nerve fiber, there must be a conductive material present to allow for this transfer. The conductive materials are called neurotransmitters. The neurotransmitter fills the synapse and the message is able to continue onto its destination. Neurotransmitters actually control the message "traffic." They either allow or do not allow message traffic. Neurotransmitters control the volume and intensity of the message flow. Some of the neurotransmitters are norepinephrine, serotonin, dopamine, and acetylcholine. Without these substances, thought and action would not be possible. The presence or the absence, overabundance or the insufficient quantity of these substances affect thought and action.

### A Certain Percentage of the Population

There is a certain percentage of the population that is born with the capability of accelerated and intensified neurotransmitter activity. These people have the potential of being classified as geniuses or have a high IQ (intelligence quota). These same people, if they are not carefully watching the factors that affect neurotransmitter production, can also be labeled ADHD, ADD, or hyperactive.

### An Example

Thomas A. Edison is one example of someone that was ADHD. His teachers said that he would never make it in the world. He was too easily distracted and his mind was always going in too many directions at once. Thomas Edison was the inventor of the light bulb and many other useful things that helped propel our world into the technological age. Thomas was able to be the genius that he was because God had given him an accelerated and intensified neurotransmitter ability. As we look at the child prodigies, geniuses, and people with high IQs, they almost always have in common this increased neurological activity. They also have in common the tendency to be ADHD, ADD, or hyperactive. This is a genetic predisposition that should not be altered through drugs. This is a genetic predisposition that should be groomed and maximized to allow these people to be all that God has created them to be.

### Groom These Personalities into Success

How do we go about grooming this genetic predisposition? How do we keep this disposition from turning into behavior that is unacceptable? People that have this disposition can be difficult to live with, deal with, work with. What are the keys to unlock the genius in a person like this, while at the same time minimizing if not eliminating the negative behaviors that are possible with this personality? I will address these questions now.

### The Neurotransmitters

Each of the neurotransmitters that we produce perform a different function. Some make us "wired" so that we have the ability to think and act very quickly. Some give us the ability to access information stored in our brain cells and process the information. Other neurotransmitters allow us to be calm, serene, yet alert. They all work together to keep us balanced, sharp, and adaptive to all that is happening around us. When one neurotransmitter is produced in higher quantities, we will display behavior based on that neurotransmitter's primary function. Let's be specific to ADHD, ADD, and hyperactivity.

### Information Overload



The person who is classified with ADHD, ADD, or hyperactivity tends to produce more of the neurotransmitter called norepinephrine. This neurotransmitter causes a person to act and act very quickly. These people are able to process much more incoming data to the central nervous system. They see more, hear more, and perceive more than the rest of the population. This large amount of incoming data can be overwhelming to a person. It can cause them to be easily distracted or easily frustrated. Imagine a large amount of information being received from all your senses, coming into your brain at incredible speeds. Then you have to process and make sense of all this data. It can be quite overwhelming, and the response to this can take many different forms. They can fidget. They can mouth-off. They can try to withdraw from all the incoming data and shut themselves off from the flow. They might have a difficult time focusing on specific information. They will often times feel wild inside. They might feel driven to actions that they would not normally take. They can be uncontrolled and they can feel helpless to stop the feeling of this loss of control. They can feel loose and detached from reality. They can feel intense and hyper. All these feelings result in actions that we consider socially unacceptable.

### **Drug Therapy?**

Drugs will help control this neurotransmitter activity in certain cases, however at a very high cost. The drugs used to treat ADHD, ADD, and hyperactivity are normally amphetamine Schedule II controlled substances. In other words they are the same class of drugs as the street drugs such as "speed." Let me mention just a few of the side effects of these drugs besides the obvious effect of addiction. The 1999 Physician's Desk Reference lists these additional side effects. I will quote it for the most commonly used drug, Ritalin, although drugs such as Adderall have many similar side effects: suppression of growth (i.e., weight gain, and/or height), exacerbation of behavior disturbance and thought disorder, a lowered convulsive threshold (seizures more likely to occur—especially in individuals prone to seizures), visual disturbances, nervousness, insomnia, hypersensitivity (including skin rash, fever, dermatitis), anorexia, nausea, dizziness, palpitations, headache, drowsiness, changes in blood pressure and pulse, heart pain, heart irregularities, and abdominal pain. There are rare reports of Tourette's syndrome (multiple motor tics [sniffing, blinking, frowning, shoulder shrugging, head thrusting], and phonic tics [grunts, barks, hisses, throat-clearing, etc.]). Although a definite causal relationship has not been established, liver abnormalities ranging from increased enzymes to coma, inflammation and or occlusion (closure) of the cerebral (brain) arteries, and leukopenia (a lowering of white blood cells) have been reported.

### **There is a Better Way**

It is not necessary to have to use these potent drugs to curtail ADHD, ADD, and hyperactivity. What we must do about this is attempt to control the production of neurotransmitters a NATURAL way. There are certain dietary principles that directly affect the production of neurotransmitters and very specifically norepinephrine (the neurotransmitter we are most concerned with in ADHD, ADD, and hyperactivity).

### **Enter Hypoglycemia**

Hypoglycemia is a condition of low blood sugar. It has been my experience that people who suffer with ADHD, ADD, and hyperactivity all experience **Hypoglycemia**. In fact, I personally believe that often times ADHD, ADD, and hyperactivity are a result of hypoglycemia in these genetically predisposed people that I have discussed (see discussion above). In other words I believe that ADHD, ADD, and hyperactivity are not primary disorders (a disorder that occurs on its own and is not occurring because of something else) but a symptom of hypoglycemia in those individuals created for the capacity of increased neurotransmitter activity. When analyzing the diets of those with ADHD, ADD, and hyperactivity this hypothesis is supported.

### **What Happens When Blood Sugar Levels Fall**

When blood sugar levels begin to fall off, the central nervous system and brain will be unable to function optimally. Blood glucose (sugar) is the only fuel that the central nervous system (including the brain) can use. The other organs in the body can burn fatty acids, but not the central nervous system. If a person is running low on blood sugar, he will not be able to think as clearly or to focus or pay attention. If the person does not eat immediately (when his sugar is dropping off), then an interesting thing will happen in his body. The adrenal system will produce a hormone (norepinephrine) to raise the blood sugar levels. There is stored sugar in the body but only this certain hormone can cause the release of sugar into the bloodstream. The body is very interested in raising the blood sugar levels because when the blood sugar drops too low, a coma will ensue. Comas are extremely dangerous and many times fatal. Therefore as a protective measure, the body itself will raise the blood sugar even though the person hasn't eaten a thing. This is good—the body raises the blood sugar to prevent coma, but it is at a high cost. Norepinephrine (the hormone that will bring up the sugar levels) will cause behavior to be intense. Understand that norepinephrine is a fight or flight hormone. It will make a person feel that there is a battle to be fought, or a battle from which he must run. Usually there is no battle, therefore the individual will have all kinds of pent-up "battle" energy and nothing to do with it. It will be worked out in some fashion, one way or another. It can result in picking a fight (making a battle), obnoxious behavior, uncontrolled energetic activities, very intense behavior, and anxiety.

### **Make the Connection**

Did you note that the hormone that causes the release of sugar into the blood stream is also one of the neurotransmitters that I mentioned earlier? Neurotransmitters control the message traffic. If norepinephrine is high the message traffic is greatly increased. With so much input into the brain it can cause a person to respond in ways that may be considered socially unacceptable. What if we could control the production of norepinephrine in such a way that a person could have the right amount of this hormone that would enable them



think clearly, think quickly, think accurately, think appropriately, and think at a high intelligence level without going too far into behaviors that are erratic? Yes, yes, this is my intention and my goal. To unlock the incredible potential of these people without going so far as to make them uncontrollable. Is it possible? I believe so.

### **The Two Extremes**

We have two extremes in ADHD, ADD, and hyperactivity when associated with hypoglycemia.

- 1) When the blood sugar is falling and before norepinephrine kicks in—a person will be rude, angry, obstinate, quick to strike out, or they will just plain out cry.
- 2) When norepinephrine is released (usually in a very large quantity)—a person will feel wild with pent-up energy, looking for a battle where there is none. Result of no place to spend battle energy—inappropriate behavior.

### **Finish This and Read On**

You must understand hypoglycemia to get the full picture. Already you have a good idea. But you need to read in more detail. Because I have already written a lengthy article on hypoglycemia, I would ask that you link to it. The link is at the bottom of this article. You probably feel that you have already been reading a book, but please finish reading the rest of this article and then link over to hypoglycemia. This will give you a fuller understanding. Make sure to return to the Plan for Healing for ADHD, ADD, and Hyperactivity (below) because it will be complete in my recommendations including the necessary things to control hypoglycemia.

### **The Plan in a Nutshell**

If you or your child has ADHD, ADD, or hyperactivity, this is what we do. We control hypoglycemia. We add the nutrients necessary to make and control neurotransmitters. We avoid the foods that cause an overproduction of the neurotransmitters that throw a person into the classic ADHD, ADD, and hyperactivity behavior.

### **How Long Until I See Results?**

In one to two months you should see significant improvement by following the Plan for Healing without taking adjunct drug therapy. If you or your child will be taking Ritalin, Adderall, or any other drug therapy while you are applying the Plan for Healing, improvement may very well be masked, as these drugs will begin to actually produce the condition we are trying to correct. If you are interested in stopping the drug therapy, you must withdraw gradually as these drugs are addictive. See the following paragraph for withdrawal information. If you choose to employ the Plan for Healing and are currently on a drug and desire to withdraw, begin the Plan for Healing now and begin withdrawal now. Withdrawal will take approximately six weeks on the gradual and safe withdrawal method. Start the clock after withdrawal is complete to watch for significant improvement in one to two months.

### **How Do I Withdraw?**

You may consult with your physician for withdrawal recommendations. If you are taking ADHD drugs as well as other drugs (for blood pressure or other conditions) you must consult with your physician. If you choose to not consult with a physician and are not taking other prescription drugs, you may withdraw by taking 25% less of your daily dose for two weeks. Then take 50% less of your original daily dose for the following two weeks, then 75% less of your original daily dose for the next two weeks and then no dose at all. This is a very gradual and safe withdrawal plan.

### **Plan for Healing**

- Eat efficient protein 6 times daily (breakfast, mid-morning snack, lunch, mid-afternoon snack, dinner, and before-bed snack).

You **MUST** eat these 6 times even if you don't feel hungry. Timing is critical. Let's say it is 8 a.m. You have been up for an hour and are still not hungry. It doesn't matter: you must eat anyway. Otherwise, you will suddenly crash and everyone will pay! If you eat breakfast at 8 a.m. and lunch at 12 noon, that means at 10 a.m. you are eating again whether you want to or not. I cannot overemphasize the importance of eating 6 times daily. It is perhaps the most critical of all the things you could do. If you are applying this advice to a child, coordinate with his teacher in school and make sure that he is given the opportunity to eat his snack.

Efficient proteins are: eggs, meat (beef, pork, venison, lamb, buffalo, elk, rabbit, etc.), poultry (chicken, turkey, pheasant, dove, duck, goose, etc.), fish (of any kind), and seafood. Every meal (breakfast, lunch, and dinner), you should eat a palm-size portion. Imagine your hand without fingers and thumb, and that is your palm. The serving should be as big as your palm, and as thick as your palm. If the serving is for your child, the serving should be as big and thick as your child's palm. Every snack (mid-morning, mid-afternoon, dinner, and before bed) you should eat  $\frac{1}{2}$  a palm-size portion.

These proteins will help regulate blood sugar, keeping crashes from occurring (and subsequent sugar surges from release of liver glycogen). These proteins are also essential in the making of neurotransmitters.

- Eat  $\frac{1}{4}$  cup of legumes 6 separate times in the day (at each of your meals and snacks). Legumes are beans such as pinto, kidney, garbanzo, Great Northern, navy, lentils, etc.



black, brown, white, red, black-eyed peas, yellow-eyed peas, pigeon peas, green split peas, yellow split peas, refried beans (without the added lard), hummus (ground chickpeas), etc. Serving size is for an adult. If a child is under 100 lbs., do 2 tablespoons legumes per serving.

These legumes will bind with the bile carrying already-used neurotransmitters and hormones, discarding it in the form of a bowel movement. This prevents recirculation of the neurotransmitters (and thus no excess build-up of them).

You may substitute bean flour (i.e., garbanzo bean flour, white bean flour, etc.) for your legume servings. 2 tablespoons flour is equivalent to  $\frac{1}{4}$  cup (4 tablespoons) legumes.

- Eat 3 servings of vegetables daily with your meals or snacks. (Remember that corn is not a vegetable.) The vegetables can come from the frozen or fresh state, or from One serving =  $\frac{1}{2}$  cup, unless it is salad, then one serving = 1  $\frac{1}{2}$  cups. The vegetables can be raw, steamed or cooked. Consider tomatoes a vegetable. Again, serving size an adult. A child should halve the amount. A very small child (under 50 pounds) can quarter the serving size.

Vegetables provide vitamins and minerals, as well as insoluble fiber.

- Drink  $\frac{1}{2}$  gallon water daily. The water must be purified to remove the chlorine. A simple Brita or Pur filter will do. If your water contains fluoride, you must use a reverse-osmosis or distillation system to remove that carcinogen (cancer-causing agent).
- Sleep/rest 8 hours in a twenty-four hour period or a total of 56 per week. The hours do not have to be consecutive. Children should sleep more. 10 hours/night (or 70/wk) ideal. If the child is young, more sleep is needed.

Eliminate the following:

- Sweets (cakes, pies, cookies, doughnuts, candy, ice cream, Jell-O, pudding, muffins, sweetened breads [pumpkin bread, zucchini bread] etc.)
- Natural sweeteners (honey, jam, jelly, syrup [even 100% pure maple syrup], molasses, etc.). Sweets and sweeteners always cause a huge rise and fall of blood sugar, with subsequent rush and low ebb of neurotransmitters. They are a major cause of ADHD, ADD, and hyperactivity.
- Artificial and "natural-artificial" sweeteners (Splenda, Stevia, Sweet N Low, Equal, NutraSweet, aspartame, xylitol, mannitol, agave nectar, etc.). These substances are foreign to the body, and must be cleared out. The liver cleans the blood, but it is a static filter (unmoving). It will only filter as quickly as the blood is flowing through it. Enter foreign particle; your body must clear it; norepinephrine (also called adrenalin) is released to increase blood pressure so that blood flows faster through the liver; foreign particle cleared quickly. So to avoid the excess norepinephrine, we must avoid these.
- Sweetened beverages (lemonade, Kool-Aid, hot chocolate, punch, Gatorade, etc.).
- Sodas (diet or regular, caffeine free or not). These always contain some form of sweetener, which will cause major swings in blood sugar (and thus in neurotransmitter production).
- Fruit juice. The sugar is too concentrated. It will cause a blood-sugar (and neurotransmitter) reaction.
- Fruit. Again, too much sugar in too small a package. Do not worry about the nutrients you may miss by not eating fruit. Your vegetables are much richer sources of nutrients while containing as much as ten times less sugar. The choice is obvious—choose the low-sugar, more nutrient-rich option, your vegetables.
- Caffeine (coffee; black, green, orange pekoe teas; Anacin, Excedrin, etc.). This includes decaffeinated beverages, because decaffeinated does not equal caffeine-free. Like artificial and natural-artificial sweeteners, caffeine is a foreign substance that must be cleared by the liver. Blood pressure is increased by norepinephrine in order to clear caffeine. So eliminate caffeine to reduce excess production of norepinephrine.
- Fragrances or perfumes (this includes scented laundry products, soaps, shampoos, scented candles, aroma therapy, essential oils, etc.). The same explanation as caffeine and artificial sweeteners apply. When you smell a scent, the fragrance molecules pass into your bloodstream and must be cleared by your liver.

I realize that it is not possible to live a life totally separated from all smells, but your household should be fragrance-free, so you have a place that is a safe-haven from neurotransmitter-inducing perfumes.

There are many resources for fragrance-free products. Your grocery store may have the items in their health food section, or you can purchase from a health-store, or online.

- Milk (cow's or goat's milk. But other dairy will be allowed). Milk is not a good beverage choice for anyone, no matter their health situation.
- Gum (regular or artificially sweetened). The constant motion of chewing is facilitated by norepinephrine. If you stop the chewing, you stop the demand for constant production.
- Tea (of any kind, even if it's herbal)
- Some supplements—B-complex is the major offender. It stimulates the production of norepinephrine.
- Alcohol



