

Article published March, 2009  
in Dr. Jacqueline Fields' Newsletter of

*The Healing Gardens Health Center*

## ***UNDERSTANDING AND TREATING LEARNING AND BRAIN DISORDERS***

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**A**s if our families don't have enough challenges to deal with! Now we have a parade of news stories telling us that families across America are experiencing an epidemic of ADD and ADHD. So what's going on? How will we know if one of our children is affected? And if so, what can we do about it?

By necessity I've developed expertise with these issues, because my 15 year old daughter was diagnosed with ADHD in the second grade. My husband and I were in denial about her symptoms and it took time to admit that she, and we as a family, needed help. So let me share some of the insights we've learned along the way.

ADD was first identified as a clinical syndrome in the 1930s by Dr. Charles Bradley, who called it *hyperkinesis*. By the 1960s the name for this condition became *Minimal Brain Dysfunction*. Now the disorder is called Attention Deficit Disorder (with or without hyperactivity).

It's no wonder that ADD/ADHD is getting the attention it is, because its incidence has reached epidemic proportions. In some urban environments as many as 1 in 4 school age boys are diagnosed and medicated for ADD or ADHD.

Dr. Scott Shannon, a popular northern Colorado child psychiatrist, lecturer and author of the excellent book "Please Don't Label My Child," reports that government studies indicate that, *if current statistical trends are allowed to continue*, within one generation fully half of all children in the USA will be on some form of psychiatric medication for brain related disorders. While this is horrific to consider, it is statistically true.

Those statistics motivated me to open my practice of Brain Integration Treatment 3.5 years ago, as did the successful Brain Integration of my daughter (which enabled me stop giving her Concerta as her ADHD symptoms began to disappear). Nearly 400 personal clients later I can definitively report that most children and adults with typical learning, behavioral, emotional and brain disorders can experience successful resolutions of their problems without having to subject themselves to dangerous medications.

But how do you know if your child has ADD or ADHD? My website at [www.OpenPathways.org](http://www.OpenPathways.org) has a list of many of the most common symptoms, such as: short attention span, pervasively distractible, poor math or reading skills, impatience or restlessness, accident prone, difficulty knowing right from left, easily frustrated, missing social cues, trouble keeping things organized, and poor self-esteem.

Interestingly, this list includes some traits that most of us would say we have experienced at one time or another. This suggests what the best doctors, psychiatrists, and therapists say as well: ADD/ADHD and other related “disorders” do not exist as neat “packages.” These disorders exist as *a broad continuum of symptoms and behaviors* which, because they may reveal themselves to a greater or lesser degree in various people, can make diagnosing them tricky.

For example, if you have trouble remembering people’s names you technically have a brain related sensory processing problem. Perhaps not a serious one, but it is an indication that your brain is not operating as well as it was designed. Or maybe you’re not good at finishing projects or you’re not proficient at math. These too are “brain functionality” problems. But they don’t necessarily mean you have ADD/ADHD.

The point here is that symptoms of ADD and ADHD, as well as Dyslexia and a number of other learning and brain disorders, exist on a *continuum*. It is the *degree of severity, persistency* and *pervasiveness* of these problems in different areas of a child’s or adult’s life that determines where they are along that spectrum.

Diagnosis of root causes can often be difficult. Some children can display severe ADHD symptoms such as hyperactivity and inattentiveness simply because their brains react poorly to a diet high in sugar, additives, caffeine and highly processed foods. Or maybe their brain is lacking critical nutritional components. Or perhaps the cause for the problematic behavior is environmentally based, involving emotional reactivity to very high stress situations like a divorce or dysfunctional family dynamics. Or maybe the (correctable) “hard wiring” in their brain is blocked or misrouted.

Many qualified healthcare disciplines can help families facing learning and brain disorders, including nutritionists, physical therapists, vision therapists, Homeopaths, psychotherapists, and many more. You can go to [www.LearningSolutionsNetwork.org](http://www.LearningSolutionsNetwork.org) to see a growing list of practitioners and disciplines who are leaders in helping families find solutions to the learning and brain disorders they face. The community calendar on this site has lots of leads as well.

You can also go to my [www.OpenPathways.org](http://www.OpenPathways.org) website to discover articles and solutions (ranging from nutrition to the Nurtured Heart Approach parenting philosophy, to Brain Integration) that can help parents understand and resolve many learning and brain related disorders.

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