

**CAB Conference Call
March 26, 2015
12:00 EST
Meeting Minutes**

Participants:

Andrea	Jacobi Medical Center
Carlos	San Juan Research Hospital
Claire	Harvard University
Delia	University of Miami
Exzavia	Children's Diagnostic and Treatment Center
Jennifer	University of Colorado, Denver
Julie	Harvard University
Julie	Westat
Julie	University of Alabama, Birmingham
Kay	Ann and Robert Lurie's Children's Hospital
Kim	Texas Children's Hospital
Kimberly	Rutgers New Jersey Medical School
Lauren	Ann and Robert Lurie's Children's Hospital
Laurie	FSTRF
Leslie	Texas Children's Hospital
Lesley	Texas Children's Hospital
Mary Anne	Westat
Megan	Westat
Paige	University of Alabama, Birmingham
Raiko	University of Colorado, Denver
Renee	University of Illinois, Chicago
Stephanie	University of Miami
Theresa	Texas Children's Hospital
Yuri	University of Miami

• **APPROVAL OF MINUTES**

The minutes from the January 22, 2014 call were approved with no changes.

• **ADHD PRESENTATION**

Kay talked about Attention Deficit Hyperactivity Disorder (ADHD). ADHD may affect a child's ability to focus or stay on task. Many children with ADHD have not been treated. Children with ADHD may have trouble listening to someone and/or following directions. Children may also have trouble finishing tasks, keeping track of their stuff, and they may daydream often. Children with ADHD may not want to do activities that require a lot of concentration.

Children with ADHD may be hyperactive. They may have a hard time sitting still or playing quietly. They may talk a lot and run around too much. Children with ADHD may also be impulsive. This means that they may interrupt people and act before they think.

Renee talked about ADHD. ADHD can affect how a child grows and develops. ADHD can increase a child's risk of childhood depression, anxiety, and substance use.

There are no laboratory tests for ADHD. Doctors rely on what families tell them about their child's behavior. Children must have several symptoms to be diagnosed with ADHD. The child must have symptoms for at least six months. They must have symptoms before they turn 12. They must have symptoms in at least two different locations like home and school.

There are three types of ADHD: combined, hyperactive/impulsive, and inattentive. Combined ADHD is the most common type. Children with this type of ADHD have problems with paying attention, being hyperactive, and being impulsive. Another type of ADHD is the hyperactive/impulsive type. Children with this type of ADHD may have trouble sitting still. They also may not be able to control their impulses. Children with inattentive ADHD have trouble focusing. However, they may not be overly active.

There are many causes of ADHD. Some studies have shown that children with ADHD have problems in their brains. They may have less brain activity in the part of the brain that controls attention. It is not known what causes these brain issues. ADHD runs in families. Family genetics may be a cause of ADHD.

There are two treatments for ADHD: behavioral treatment and medication treatment. Behavioral treatment can help both parents and children. Behavioral training can help parents learn parenting skills. It may also help children learn rules and build self-esteem. Treatment that includes both behavior training and medication can be the most helpful.

Medication therapy can help children with ADHD. There are stimulant medications and non-stimulant medications. Stimulant medication can help increase children's attention span and help control their behaviors. Medications for ADHD can have side effects. Some children may have a hard time remembering to take medications. Medications may also impact growth and development. ADHD medications may also interact with other medications.

There may be special school services for children with ADHD. Families may put together a 504 plan to help children with ADHD do well in school. These plans may include having a child sit closer to the teacher and/or asking teachers to repeat instructions. Teachers may also give a child rewards for doing well. Children with ADHD may also be able to go to Special Education Classes. Special Education classes are made just for children with learning or behavior disabilities, but children with ADHD do not always qualify for Special Education Services

Children with ADHD do well with structure at home. Parents can help by making routines for their children and/or giving them a schedule to follow.

Children with ADHD may have specific diets. There are some foods that are good for the brain. Eggs, meat, and beans may improve concentration. Talk to doctors about foods that may help children with ADHD.

Some doctors recommend that children with ADHD not watch TV for more than two hours a day. It may be better for children to play games. They can also do puzzles. It may help to read with children with ADHD.

There is no one way to prevent ADHD. Parents can try to reduce risk. Doctors recommend that moms stay healthy during pregnancy. Keep an eye on children's behavior. Talk to a doctor about ADHD.

Early treatment can make a big difference. Many children with ADHD can feel better if they are being treated by a doctor. However, children should continue to be followed by a doctor as they grow up. Some kids can even "outgrow" ADHD, but some adults have ADHD. Children who are not treated for ADHD can be at risk for substance abuse and mental health issues. It's important to monitor children with ADHD. This can help reduce other risks.

Stephanie talked about ADHD. Schools may be able to help children with ADHD. Delia talked about mood swings and ADHD. Parents should talk to their doctors about how to diagnose ADHD.

- **CAB LEADERSHIP TRANSITION**

Megan talked about the CAB Leadership transition. Dolores will be stepping down as CAB Chair. The CAB thanked Dolores for her hard work and dedication to the PHACS CAB. Dolores will still participate in the CAB as a CAB member. Kim, who was serving as the Vice Chair, will be the new CAB Chair. Delia will help train Kim as the new CAB Chair. The CAB decided to hold Vice Chair elections in May. Delia will continue to train Kim until a new CAB Vice Chair is elected in May.

- **SPRING 2015 LEADERSHIP RETREAT**

The PHACS Spring 2015 Leadership Retreat will take place March 17 – 18, 2015 in Potomac, Maryland. Delia and Kim will be attending the retreat. Delia and Kim will report back to the CAB about the retreat during the next CAB call. Delia, Kim, and other PHACS members will participate in a stigma panel discussion at the retreat. CAB members can suggest questions for the stigma panel through the PHACS CAB Evaluation Survey.

NOTE: The next CAB call will be on Thursday, March 26, 2015 at 12:00 pm EST.