

ADD/ADHD

Frequently Asked Questions

Q. How can you tell what is ADD and what is not?

A. By objective measures...that is why I go through a full neurological workup. I want to determine what areas of the brain system are contributing to this issue. I look at the receptive and the expressive systems. We are measuring if the brain processes information appropriately. Pure ADD from a brain processing point of view shows discriminants of what brain wave activity should look and compares this to what that specific individual's brain waves actually look like. The brain map has two parts. It has normal brain wave patterns and where you deviate from normal and then it also compares that person's brain waves with other ADD brain waves. It is very specific. That is the power of it.

Q. How does NeuroGeniSys work with ADD?

A. You have to recognize when we are talking about ADD it is a broad category of attentional issues. Those attentional issues may be caused by biological issues, cognitive-function issues, short term memory issues, proprioceptive issues, or a disparity between the auditory and visual short term memory.

So, it depends on what is causing the ADD and why it is there...what are the underpinnings. The NeuroGeniSys procedure is extremely effective if the ADD is caused due to a developmental delay or if the pathways are inhibited. This program can include neurotherapy, short-term/intermediate memory therapy, auditory therapy, cognitive abilities therapy and NeuroCoach. As far as I'm concerned that is the most effective way, because it aids in the development of the neuro-pathways in the most comprehensive, integrated fashion.

Q. How is Crossroads Institute's method different from other methods of dealing with ADD/ADHD?

A. It is different because it allows whatever parts of the central nervous system that have not matured and developed to develop appropriately.

Q. How?

A. If ADD is an issue because of an inhibited part of the memory, it helps break up whatever is inhibiting that pathway. The exercises, activities, and therapies along with appropriate and very specific neurotherapy protocols helps the brain to mature. These programs are very specific and based on the QEEG and Cognitive evaluation.

If it is an attentional area that simply has not matured because of lack of use or improper use, the NeuroGeniSys process exercises those specific attentional systems.

Q. When you say exercising what are you saying exactly? How do you exercise the brain?

A. By requiring the brain to hit certain attentional states. We do this by shifting certain brain waves into specific attentional states.

Think of it like this: Let's relate it to exercising a muscle in the body. Let's say you say to me: "My child can not lift a set of books and carry it across the room due to weak biceps. You can give that child drugs to help them and that child will be able to lift those books momentarily,

regardless of the condition of those muscles. But when the drugs wear off the child will not be able to lift those books. On the other hand, if you send that child off to the gym where they can properly develop the strength in that muscle, what ends up happening is they will be able to lift that set of books at any time. Because you have trained and strengthened the muscles properly. You did not merely mask the weak muscles with a drug. That is the same thing that happens to a child's brain with the use of drugs vs. exercising the brain. You must exercise and strengthen the brain in order for it to mature and develop to the point that it can function and cope appropriately on its own.

Q. Does a child need drugs to help offset ADD? Doctors indicate parents see a difference when their child takes them. How can you say they don't need drugs?

A. Because there are two ways of dealing with ADD. We are trying to create performance where there is not performance. Ritalin and other ADD medications basically speed up the mid-brain's ability to gate..which means how quickly the brain samples information. So it appears that it is working properly. It masks the problem. But the side effects of medications are questionable from potential liver damage to heart damage.

Q. So drugs can never correct the problem?

A. Drugs are not designed to permanently fix the problem. They are designed to allow a certain state to occur when under medication. Drugs will never correct it. Ever. And the physiological side effects can have long reaching impact on the development of the nervous system and the body at large, not to mention the possible psychological implications on a developing individual's sense of self concept. Think about it, what are we really telling the child, "that in order to pretend you are normal, you have to take a pill."

Q. Really?

A. Yes. You tell a child they have a broken brain and you have to take these pills to be normal ...they may end up believing that.

Q. What do you say to parents who say, "I do see a difference in my child when they take medication. They do seem calmer. They do seem to be able to attend better." How is NeuroGeniSys going to be able to do the same thing?

A. By allowing that part of the nervous system to mature to capacity through appropriate neurodevelopmental exercises.

Q. Can drugs have an adverse effect on children?

A. It's been reported that they can.

Q. Can neurotherapy have an adverse effect?

A. If done improperly. For example, think of neurotherapy like this, if neurotherapy is used in rewarding certain states..such as allowing the client to gain a certain kind of strength... and it works... what would happen if you applied the wrong kind of criteria to condition the improper gain....

For example, there appears to be 11 different subtypes of ADD/ADHD. A large majority of these folks with ADD symptoms will have high amplitude slow brain wave activity. Thus, the classical Pharmaceutical and neurotherapy protocols are designed to reduce this slow wave activity and

increase the faster brain wave activity. But, a large percentage of folks with ADD symptoms may also have low amplitude, slow wave activities and high amplitude fast brain wave activities. If we trained these folks using classical methods we would see the individual becoming more anxious and prone to addictions. That is why we always start with a brain map so we know where the issues are located and their underpinnings. How do you know what to train and what area of the brain needs to be targeted without precise measurement? We believe each brain is unique, therefore we measure each brain to determine what the needs are for that individual. Not using evidence based, neuro-imaging measures is just too scary.

Q. How long will it take to see results from a NeuroGenisSys program as it relates to ADD/ADHD?

A. We should see some change somewhere between 12 and 20 sessions. But those results won't last unless we do 36-40 sessions.

Q. Why?

A. Because of the way the brain works. The brain itself needs a certain amount of repeated stimulation in order for it to remember and integrate it into normal functioning. The difficulty comes when a client (or parent) sees the shift or change at 20 sessions. They don't want to continue because they think everything is already complete, but all the data and every statistic has shown you need to go the full 36-40 sessions for the results to last.

Q. Will the effects fade over time?

A. No. We have 20-25 year studies that have shown that that will not happen as long as the individual remains healthy and maintains a healthy lifestyle.

Q. Do you need to do any tweaking? Sessions every month or every year or two years?

A. No you don't. Let me qualify that. It won't fade if the person stays healthy, and does not develop bad habits. The truth of the matter is, if we have bad health or bad habits it will effect neurological function.

Q. Would ADD/ADHD come back?

A. Not necessarily. A lot of things can look like ADD. Look at nutrition. A person with classic ADD issues will have problems with the pre-frontal lobes. You can blow that out with poor nutrition. If your blood sugars go up you will have hyperactive tendencies. If you mistake that and assume that is ADHD because of the characteristics you would be incorrect. That is the difficulty when you are looking at symptomology only and do not take quantifiable measurements.