



ISNS Case Study

ADHD

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Attention-deficit/hyperactivity disorder or ADHD is a disorder characterized by impulsivity, inattention, and hyperactivity. This disorder is most commonly found in children and/or adolescents with the diagnosis of 1 in 20 children in the United States affected. ADHD often increases the risk of comorbidity with learning disabilities and conduct disorders. This disorder should be diagnosed in patients four years and older with poor attention, hyperactivity, distractibility, impulsiveness, poor academic performance, or behavioral problems at home or school.

There is no specific way to diagnose ADHD; however, the Diagnostic and Statistical Manual of Mental Disorders requires patients to be experiencing the three subtypes of ADHD: primarily inattentive, primarily hyperactive-impulsive, and combined to be properly diagnosed with this disorder. The aim of treating ADHD is to improve symptoms, enhance functional performance, and eliminate behavioral difficulty. For treatment, the first step is behavioral therapy for children younger than six years. For moderate to severe symptoms of ADHD, conventional therapy is then recommended consisting of medications including stimulants, non-stimulants, and antidepressants. Other alternatives include diet changes, exercise therapies, supplement interventions, or herbal treatments. Researchers are investigating furthermore into alternative medicinal therapies or treatments for children and/or adolescents diagnosed with attention-deficit/ Hyperactivity Disorder (ADHD) due to parental concern about the short-term and long-term side effects of conventional medications.

Case Study I

Patient: Male

Age: 16-year-old

History: 16-year-old male that has ADHD since he was little, he plays sports, he is in private school, but he

LEGEND:

Proprietary blend 1: silica, vitamin c, and trace minerals.

Proprietary blend 2: N-acetyl L-tyrosine, anhydrous caffeine, L-theanine, velvet bean seed, pine bark, curcumin, and vitamin d.

Proprietary blend 3: black seed oil, resveratrol, turmeric, raspberry ketone, apple cider vinegar, aloe Vera, and d-ribose

always had problems concentrating on school as well as sports.

Treatment/Method: He started with the Proprietary blend 1 with 10 drops in the morning and night. After 3-months he started on the Proprietary blend 2 capsules. When he started on the Proprietary blend 2 capsules, he started with 1 a day, but after 2-weeks ended up going to 2 Proprietary blend 2 capsules in the morning and 2 in the afternoon. He takes them 30-minutes before he plays the activities.

Results: His parents and his coaches reported that he showed significant improvement with focus and the ability to follow instructions and to be able to finish certain assignments at school as well as to focus throughout his basketballs and soccer games. On days he does not play sports he would usually take one Proprietary blend 2 capsule in the morning and one at lunch. He takes the Proprietary blend 2 capsules without food and has seen significant differences in his ability to focus.

No side effects have been reported.

Case Study II

Patient: Male

Age: 12-year-old

History: Mother reports that after the MMR vaccine at 1-year-old her son regressed and had a sudden decrease in appetite for approximately four years and became hyperactive and distracted. He was diagnosed with ADHD in 2018.

Treatment/ Method: He started taking Proprietary blend 1, 5 drops B.I.D. at 12-years-old.

Results: He states that his “head feels clear and less chaotic, has been concentrating and focusing much better, sleeps better, easier to wake up in the morning.” He reports that he is sleeping longer and feels less chaotic.

Follow up in 6 months.

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