

# GEORGE STILL FORUM

National Paediatric ADHD Network Group

National Paediatric ADHD Network Group

Newsletter

June 2007

Issue 1

## Chairman's Address

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### Interim Committee

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15 May 2007

Welcome to the first newsletter of the George Still Forum. The group was created at the recent RCPCH meeting in York in April of this year. It was started by a core group of paediatricians who are involved in the management of children with AD/HD and who were concerned that there needed to be more of a paediatric voice within the College to highlight the importance of these conditions and the need for adequate training.

They were also concerned that there was a need for more effective inter-professional liaison. The steering group was formed and a draft constitution put in place.

The aim is for this to be a specialist group within the RCPCH and to increase awareness of AD/HD. It also aims to inform more broadly, to provide evidence-based information, to work with other agencies both within and outside the College, and to widely help with the management of children with AD/HD and related neurodevelopmental difficulties.

Members of the group very much see the broader concept of AD/HD and its inter-relationship with many other neurodevelopmental difficulties.

We are particularly keen to work with BAACH, the mental health group and disabilities group within the College, as well as other groups outside the College including youth justice services, child and adolescent mental health services, social workers, nurses and educators etc.

The group is also keen to help support paediatricians in this challenging and labour intensive area which is certainly not for the faint-hearted! Many paediatricians have commented that they felt quite 'burnt out' from the high maintenance workloads involved.

The steering committee would very much appreciate feedback from paediatricians regarding what has happened so far and plans for the future.

The steering committee will be finalising its thoughts/remit/ethos before the next meeting in September and we hope at that stage to take things much further forward. Suggestions for the future include a discussion forum, an effective website, mutual support systems, provision of information, conferences, adaptation of future guidelines for the College and for significant links with other groups dealing with neurodevelopmental difficulties in children and youths with difficulties with the outcomes of AD/HD.

We welcome and encourage your active participation and collaboration with this initiative.

*Geoff Kewley*

[geoffkewley@hotmail.com](mailto:geoffkewley@hotmail.com)



Dear colleagues

Welcome to the first newsletter of the George Still Forum (The National Paediatric ADHD Network Group) which we are delighted to present to you.

This forum was formed for Paediatricians involved in managing ADHD children in the United Kingdom to exchange ideas and share information. The second meeting of the forum is due on 25<sup>th</sup> September

2007, during the BACCH meeting in Reading.

If you have information that you wish to share with your George Still Forum colleagues then do not hesitate to send it to me for publication in the newsletter, or for publication on our website.

By the time this newsletter reaches you the George Still Forum website will be live. Please visit

[www.georgestillforum.co.uk](http://www.georgestillforum.co.uk)

Let us have your comments.

I sincerely hope that you will be able to attend the next general body meeting in Reading in September this year.

With kind regards

**Sonmath Banerjee**

[Somnath.b@doctors.org.uk](mailto:Somnath.b@doctors.org.uk)



## Developing an Interest in ADHD!

I first came across the problem of ADHD while working in Brisbane, Australia in 1994-95 at a time when the problem was not as well recognised as a medical entity in the UK. Many still felt that this type of behaviour was directly attributed to parenting abilities and social circumstances.

In order to understand more about the condition and the aetiology I attended the 2002 ADHD a century of understanding conference, where I was enlightened by a variety of professionals with views including clinicians, psychologists and sociologists. Firstly I learnt of the pathophysiology. Cases with ADHD have relatively smaller frontal lobes, decreased levels of dopamine within the brain and strong genetic similarities to each other when compared to peers not displaying symptoms of ADHD. ADHD could therefore be defined as a medical condition.

In terms of the genetic links I was most inspired by a lecture from a sociologist who highlighted the fact that the genes for ADHD have shown positive selection over time which from Darwin's point of view would indicate that having this particular genetic make-up may be advantageous. Unfortunately society focuses on the

disadvantages of ADHD, impulsivity, hyperactivity and poor concentration rather than the benefits. Children with ADHD are more likely to take risks which may be to their advantage in business later in life; they can be very imaginative and creative so can achieve success in the arts or inventing. Their excess energy and vitality can produce great sportsmen.

The other important take home message from the conference was that while some children with ADHD do very badly others do very well indeed the main difference being the self esteem of the individual.

I attended comprehensive school and have always been aware that there are children in the class who struggle. In the past these children have often been made to feel less than adequate due to their academic difficulties. Once identified by teachers in the classroom as different there is also an impact on their relationships with peers outside the classroom. Self esteem can be lost at a very early age. As we know children then go on to look for others ways of gaining acceptance and attention in negative ways and end up in trouble and a burden to society.

I have a strong interest in looking at ways to help children who are not strong academically. We should be working together with education to understand these children and ease their difficulties through medical intervention, psychological support and education strategies to focus on their strengths rather than on their weaknesses.

I remember one particular boy at school who was quite left behind academically but now has his own carpentry business. Many children with ADHD have vital skills that through encouragement can enhance our society.

Through work with children with ADHD I have witnessed children feel more positive about themselves, more able to settle and achieve at school and in life and therefore recognize that we have an essential role in identifying and supporting these children.

**Elaine Clarke**

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To realise at last  
 Your sense of desperation, down right frustration  
 Was not only your own  
 But a common theme shared  
 To realise at last  
 Your burning desire to share your inner feelings,  
 innovative and influential ideas  
 Was not only your own  
 But a common aspiration  
 To realise at last  
 The sense of belonging to the National ADHD network for  
 Paediatricians  
 A modality to iron out differences, disparities and  
 discrepancies

And  
 Seek coherence, cohesion and collaboration  
 Is now available  
 Brings a great sense of relief  
 A big achievement for a small group?  
 What will be the next when the group gets bigger?

*Jayantha*  
 (Dr S J Perera)  
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## NEWS

The 6th annual refresher study day for teachers was held on the 25th April at Wigan Investment Centre. This was done in collaboration with the National Nurture Group Network. It was sponsored by two drug companies. It was attended by approximately 90 delegates. The day looked at what is ADHD, which I presented. Then Finton O'Regan did a 75 minute presentation on the relevance of ADHD to education. During the afternoon we had 3 workshops. The day was enjoyed by all.

*Dr Saroj Jamdar*  
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## Forthcoming Events

### General Body Meeting

The Next General Body Meeting is scheduled for Tuesday 25th September 2007 in Reading at 6pm.  
 Everybody is cordially invited.

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