CHAPTER 1

From the chemical “straitjacket”… to empathy

«You cannot solve a problem with the same kind of thinking that you used to create it» (Einstein).

What is ADHD? Does it really exist?

In many countries there has been a veritable explosion of diagnoses of ADHD, alias Attention Deficit Hyperactivity Disorder, probably for a number of reasons: socio-cultural, political, economic, personal and psychological. These days, society as a whole offers a pace of life that is too rapid for the biological rhythms of the body and mind, creating false idols and false objectives to pursue, with a lack of valid models with which to identify. There is often induction by contagion and imitation through TV images, movies and commercials, whose characters display personal aspirations beyond the realistic reach of young viewers. All this creates distress and unhappiness, and given the structural weakness of the individual, their evolving sense and discernment is unable to resist manipulation and standardization.

Thus, the multinational drug companies insinuate them-
selves into families suggesting “chemical straitjackets” for their “troublemakers”, promising happiness and serenity with a pill for every ill: Prozac® , the happy pill, Ritalin®, the serenity pill, Strattera®, the balance pill, and so on. Every problem has a pill to reach “psychic heaven”: who can resist such rapid and apparently effective solutions?

Who doesn’t have problems at the family, personal and psychological level? In single-parent families, or “blended” families with children from previous relationships, how do we combine a career, homemaking, children, partner, parents and time to relax? And if the children get sick, what do we do? Where do we find the time to listen to them and take care of them?

And here comes the diagnosis of Attention Deficit Hyperactivity Disorder to relieve us of all our responsibilities, from the feeling of being inadequate, of living in a superficial and heedless manner. In fact, the more diagnoses there are, the more the disease is constructed: the more parents or teachers diagnose it. After all, there are questionnaires and anyone can administer them, and evaluate them as well! Perhaps, in the frenzy to diagnose ADHD, there is no longer any need for doctors...

As we were writing this chapter, we read an article by Moritz Nestor² in Current Concerns³ citing the German weekly Der Spiegel no. 6 of February 2012:⁴

«The American psychiatrist Leon Eisenberg, born in 1922, “scientific father of ADHD”, gave his last interview at the age of 87, seven months before his death, in which he

³ International Swiss online publication dedicated to independent thinking, ethical questions, the promotion of international laws for respect of the public and human rights <www.currentconcerns.ch>. See also <http://www.currentconcerns.ch/index.php?id=1608>.
said that “ADHD is a prime example of a fictitious disease”».

In the same article we also read that, «the Swiss National Advisory Commission for Biomedical Ethics (NEK) issued a highly critical judgment on the use of Ritalin®, a drug used to treat ADHD, which states that consumption of pharmacological agents has altered the behaviour of children without any contribution from them, thus interfering with their freedom and their rights. Pharmacological agents in fact induce behavioural changes, but they are not capable of teaching children how to make these changes on their own. The children are thus deprived of the essential learning experience of how to act autonomously and empathically, which limits considerably their freedom and alters the development of their personality».

The factors that influence brain development

Today we know that the brain relies on a number of factors if it is to function correctly. These influence its anatomical development and its psycho-physiological structure. These factors are worth remembering, as they are the basis of both affective-emotional balance and mental and physical health, as well as distress and illness.

- **The first factor** is an adequate dietary intake, which is essential as it determines the growth of the brain, increasing the number of cells, their size, and the multiplication of synaptic interconnections. If, on the other hand, we feed the brain with drugs, especially in the first years of life, we could cause irreversible brain damage involving various structures, depending on the speed of growth of the brain. As a result there

could also be irreversible functional damage, as well as long-term damage to learning processes and intellectual and emotional development, and to the motivational and behavioural balance.

- **The second factor** regards environmental influences, namely the relationship between social interaction, intensity of external inputs and anatomical and biochemical cerebral structuring. The brain needs an environment full of positive stimuli that increase the cortical thickness of the glial cells, and improve the modulatory activity of nerve impulses and behavioural performance, while an inappropriate use of psychotropic drugs in a developing brain can cause behavioural abnormalities, irritability, aggression, headaches, sleep disorders, and so on.

- **The third factor** relates to the affective-emotional components of relationships: frustrating or rewarding experiences, pleasure and joy or pain and punishment, satisfaction and disappointment, imitative behaviour and empathy. If parents, teachers or therapists, hoping that psychopharmaceuticals will solve their problems, abdicate their roles as affective guides, understanding the various stages of child growth and supporting their innate dispositions, they are denying the emotional importance of learning and may thus condition children, making them prone to developing mental or psychophysical pathogeneses. No one can remain indifferent to these images that we owe to a 2002 study by Bruce D. Perry: the two scans relate to two children of three years old and prove the impact maternal love has had on the development of their brains.

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6 Bruce D. Perry, M.D., Ph.D./Child Trauma Academy.
7 The article about this study was published in the *Medical Daily* and is available in English at: <goo.gl/Rkrdl>.
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The brain on the left is that of a normal 3-year-old child, well cared for by his mother, and is significantly larger and with less dark areas than that on the right, belonging to a three-year-old who has been seriously neglected by his mother (Photo Bruce D. Perry, MD, Ph.D. / Child Trauma Academy).

• The fourth factor relates to climatic influences: the winds, electromagnetic fields, circadian and ultradian rhythms\(^8\) in which we are always immersed. Until a few years ago those who suffered from headaches because of a warm, damp wind were considered to suffer from “meteoropathic neurosis”, but today we know that the hot humid winds can affect emotional tone, spontaneous activity and the development of the

\(^8\) “Circadian” derives from the Latin \textit{circa diem} and means “around the day”. It is an endogenous rhythm that manifests itself roughly every 24 hours, but is capable of adapting to a number of external signals, the most common being daylight. “Ultradian” rhythms refer to cycles or phases that are repeated within the 24 hour period, like the dilation of the nostrils or the arrival of the appetite, or those of the cyclical 90-120 minute phases studied by those researching sleep patterns.
body; that electromagnetic fields modulate respiratory and heart rates, and that circadian and ultradian and other rhythms affect the pituitary-adrenal axis. And you could extend the concept to infinity, since we are immersed in the whole universe. Mach\textsuperscript{9} points this out, saying that every phenomenon is, at every moment, the result of all the unfathomable energy exerted on it by the universe.

The paradigm shift

Is there an alternative to the “chemical straitjacket” to help children manage their excesses and difficulties? In fact there are several. And they all begin with education or the enrichment of the training of the adults with whom the children interact.

The problem is that adult society, which should serve as a model, does NOT know how to handle its own excesses and problems, and responds to the intemperance of the child with equally intemperate reactions. We stop at the superficial level of the child’s behaviour because we have not developed enough empathy to feel what suffering is being manifested by such actions. This attitude is actually rooted in a widespread delay in accepting the paradigm shift that has been required in every branch of human knowledge since classical physics, based on solids, was replaced by quantum physics.

We have been accustomed for centuries to imagining a reality that is pre-existent to the observer, described in three-dimensional terms and believed in absolutely, in which each object is material, located in space and separated from the rest by its borders. Since the time of

\textsuperscript{9} Physicist and philosopher, Ernst Mach (1838-1916) was also a neuroscientist \textit{ante litteram}. 
Descartes we have deduced being from thinking (*cogito ergo sum* – I think therefore I am), and we believe that there is a whole composed of parts, which therefore can always be analysed, categorized, disassembled and reassembled like the pieces of a machine. This separate vision, which excludes the interactions between the whole and each phenomenon, has had time to infiltrate into every field of knowledge, and in particular those regarding the body, made up of cells and atoms, solid and circumscribed, where illness, including mental illness, is seen as damage or “a broken machine”. As Gioacchino Pagliaro\(^{10}\) explains, in order to be accepted as a “science”, still defined according to the old paradigm, psychology too developed the tendency to look for trauma in a mind that is not working and to consider the mind and mental states as mechanistically dependent on the structures of the brain and nervous system. Such and such a disorder must be matched to such and such a cause in a linear fashion, and linked to this specific fragment of history. Even the psychosomatic refers to this causal and mechanistic model: if on the one hand it accepts that mind and body affect each other, sometimes widening the vision to the society in which the person is immersed, on the other it completely forgets that everything that surrounds us and permeates us, and of which we are a part, influences

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