

# MOXO WITH IR 10MG RITALIN

### CASE STUDY CURTOESY OF DR. CHAYA NEEMAN, ISRAEL

## **BACKGROUND**:

Sookie is a six year old girl, came to the test at the behest of the educator and the mother due to a suspected ADHD.

The mother reports: Sookie has 5 siblings, she is the fifth in the family. She's a first grader. Much loved by her friends, makes good connections with those around her. Opinionated. Very organized and agile. The educator reports a notable unrest expressed in movement, great chatter, dealing with things unrelated to the lesson, difficulty in the ability to persist over time in fulfilling tasks. She needs to complete school work at home, which is done with great effort and no-desire.

## SCREENING:

She underwent a MOXO and MOXO retest with Ritalin IR 10MG

#### NORM COMPARATIVE CHART



Hide Z-Score







Hide Z-Score



#### Severity table

Sookie experimented with two pre-test practices, so I'm sure she understood what was required of it. She was focused most of the time on the screen. At the end of the "quiet" stage, the body's mobility increased greatly: lying on the table, restless on the armrest, scratching the head, etc.) until the end of the test, there were also occasional sighs.

Little movement was observed, no complaints were heard. She said the second test was faster than the first...

#### INDIVIDUAL PERFORMANCE CHARTS



### NO MEDICATION



### RITALIN IR 10 MG

# **CHARTS INTERPRETATION**

Without Medication:

**The attention index**: When comparing stages 1&8 (baseline - without distractors), there was a deterioration in performance. This index is characterized by <u>strong</u> volatility. It is also possible to notice that the deterioration occurred with the appearance of the visual, auditory and integrated distractors. There was a tendency to positive correlation to the timing index.

**The timing index:** When comparing stages 1&8, there was a deterioration in performance between the end of the test and the beginning of the test. In addition, this index is characterized by <u>moderate</u> volatility. There was a deterioration with the appearance of the visual, auditory and integrated distractors. It is possible to notice a positive correlation to the attention index .

**Impulsivity index**: When comparing stages 1&8, there was an improvement in performance between the end and beginning of the test. This index is characterized by <u>strong</u> volatility. There was also an improvement in throughout the teat even when the various distractors appeared. It is possible to discern a positive correlation to the hyperreactivity index.

**The hyperreactivity index:** When comparing stages 1&8, there was an improvement in performance between the end and the beginning of the test. In addition, this index is characterized by <u>strong</u> volatility. With the advent of the combined distractor, the hyperactivity decreased. It is possible to discern a positive correlation to the impulsivity index.

With Ritalin IR 10 mg

**Attention Index:** This index is characterized by strong volatility. There is a tendency to positive correlation to the timing index.

**Timing Index:** This index is characterized by moderate volatility. It is possible to notice a positive correlation to the attention index .

**Impulsivity Index:** This index is characterized by weak volatility. The level of impulsivity has improved with the appearance of the visual distractors.

**The hyperreactivity index:** – There was a deterioration with the appearance of the visual distractors

### SUMMARY:

According to the MOXO test without medication, there is evidence of attention deficit hyperreactivity disorder due to deviation from the norm in impulsivity and hyperactivity measures, results that may indicate ADHD.

With the influence of Ritalin 10 mg – an improvement in attention, impulsivity and hyperactivity indices has been observed. The first test shows difficulty entering the task (attention and timing).

Volatility was observed in both tests. Under the influence of the drug, the intensity of the volatility decreased. This volatility is not necessarily explained by the effect of distractors. This finding may indicate instability in execution throughout the test.

In the first test, a positive correlation was observed between the hyperreactivity index and the impulsivity index, which are characterized by a similar performance almost throughout the test.

You can see that when you turn on control, these two metrics improve, but sometimes it comes "at the expense" of attention and timing qualities. There are stages in which multiple clicks were performed that supposedly cause clicks on the target element (a high score in the attention metric) but at the same time unnecessary clicks that lead to impulsive errors (low impulsive score) and vice versa. It is possible that it is the many clicks help her maintain attention.



According to all the findings, it is recommended to consult a medical professional (neurologist / psychiatrist) who specializes in ADHD for further diagnosis and treatment.

It is also advisable to seek professional consultation in the emotional field.

Recommendations for therapeutic intervention will be sent to the school through the parents.

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