

MOXO D-CPT ADHD TEST

CASE STUDY CURTOESY OF: DR.YAEL BRIAR, ISRAEL

BACKGROUND:

Adam, a 19.5 male yeshiva student, arrived for a diagnosis accompanied by his parents.

Adam the eldest in a family of 10 children has nine brothers and 1 sister. Two brothers with suspected ADHD. Adam was born after a normal pregnancy and birth. His early development has been reported as normal, his behavior as an infant and in early childhood is remembered as usual, no sensory sensitivity is known. At 13 he was diagnosed with ADHD, he had difficulty controlling impulses and a need for immediate gratification.

Academic and therapeutic background: According to his parents he shows very good academic ability, his academic achievements were high in the elementary grades. In 7th grade, there were comments about difficulty concentrating and dealing with the materials, while prayers are difficult to him to this day. In 8th, he began drug treatment at Concerta 54 mg per day.

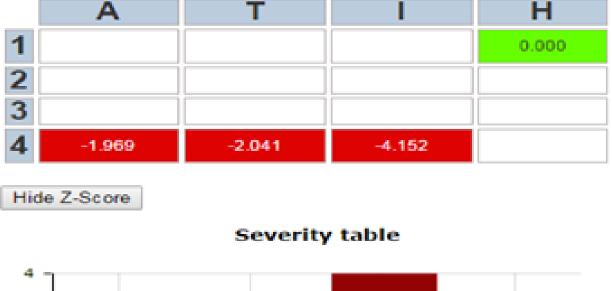
At the Yeshiva he "lasted" one year when problems started, he stopped taking medication, there were symptoms of breaking boundaries, lies, taking money and belongings, not taking responsibility and blaming others for the consequences.

At the end of the first year at the yeshiva the situation began to deteriorate further. He started traveling and spending time in hotels without his parents' knowledge and used other people's credit cards. When asked by his parents why he was lying he replied that this is his way of surviving. Having trouble making real communication with friends, he stated he had no good friend, and that is does not bother him. He does not like sports do not like, says he is too lazy to make an effort.

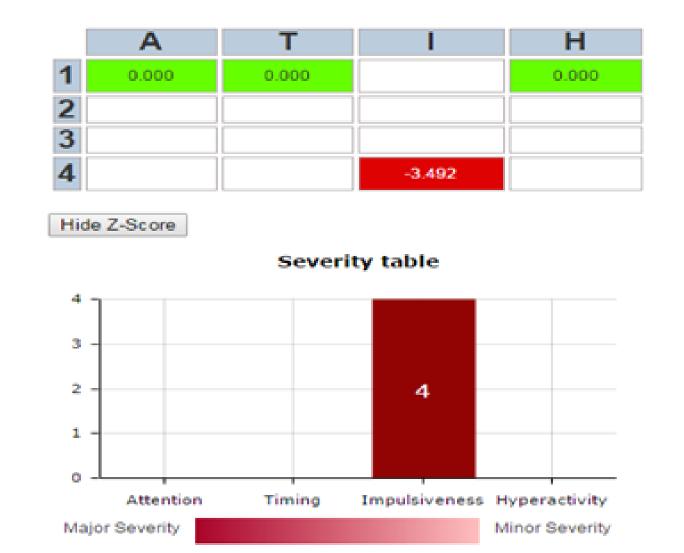
SELF REPORT & BROWN SCALES

Following a conversation and performing a Brown scales diagnoses for ADHD in adults, he spoke about his difficulties in different settings and reported an improvement in attention following medication, along with side effects such as bad taste in the mouth, difficulty falling asleep and a decreased appetite.

Adam is currently studying in a more "tolerant" Yeshiva, but he also claims that lately there is surmounting pressure, the regime is difficult, he is looking for an escape route, wants to play, or walk about". He said that he was comfortable wearing tight-fitting clothes.



3 2 4 2 1 2 Impulsiveness Hyperactivity Timing Attention Minor Severity Major Severity



NORM COMPARATIVE CHART



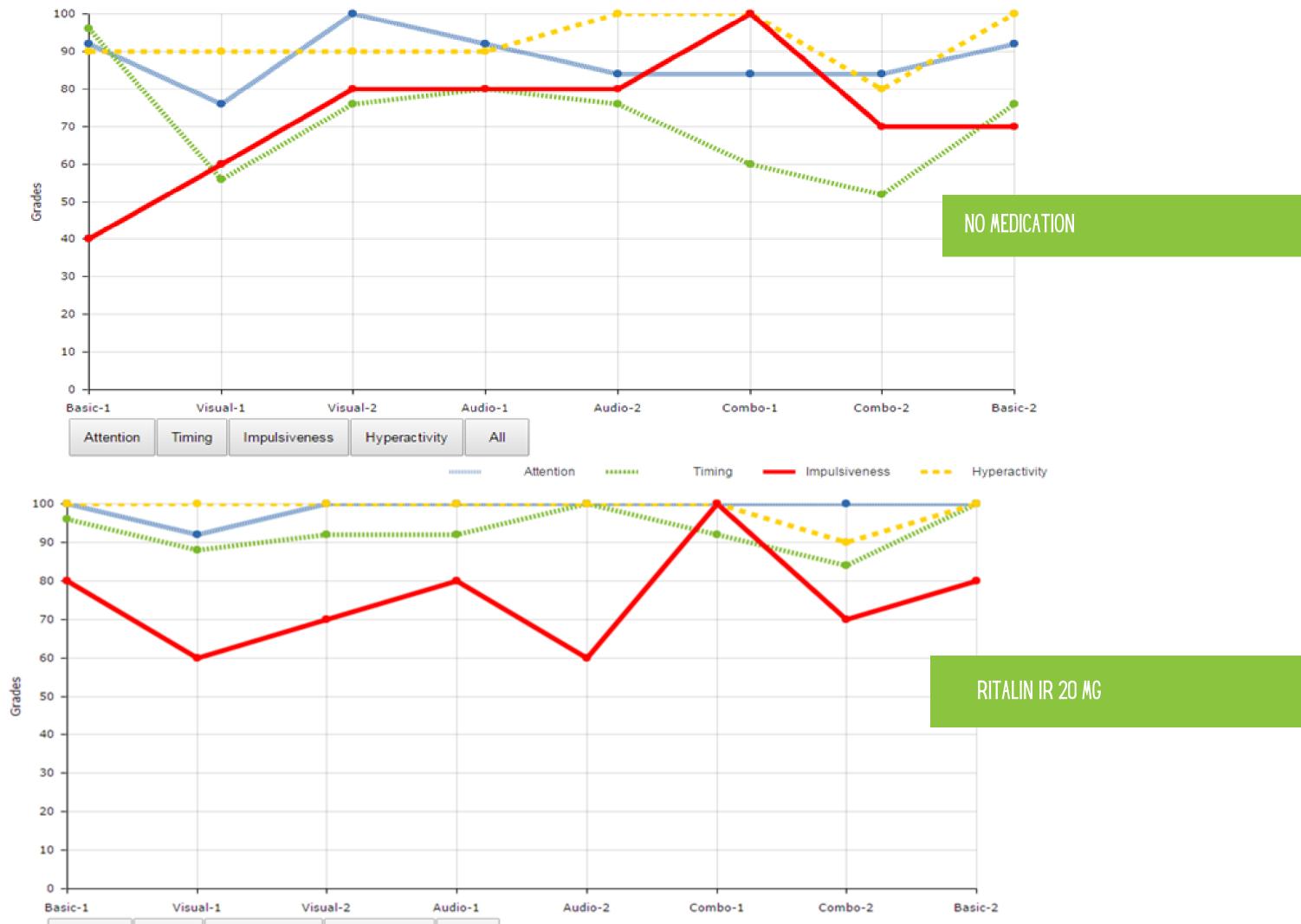
NO MEDICATION

Adam understood what was required after the initial practice. During the assessment, motor restlessness was observed, which was manifested in the replacement of body stances, the alternation of a working hand, and movement in a chair. Similarly, fatigue from the task and difficulty persevering in it was clearly observed, which was expressed verbally ("When is it over? .. how long is it ..") and physically (stretching, yawning).

MEDICATION: RITALIN IR 20 MG

The sitting position is stable, relaxed and much more collected. Is not moving in a chair. Does not complain.

INDIVIDUAL PERFORMANCE CHART



DECIPHERING THE EXECUTION CHARTS:

WITHOUT MEDICINE:

Attention Index - This index is characterized by <u>moderate</u> volatility throughout the assessment. **Timing Index -** When comparing the end of the test to the beginning (the stages without the distractions), the performance deteriorates over time. This index is characterized by <u>moderate</u> volatility throughout the assessment when deterioration in performance can be discerned under all types of

distractors.

Impulsivity Index - When comparing the end of the test to the beginning, there is an improvement in performance over time. Improvement in performance can be noticed under all types of distractors. **Hyperactivity Index -** This index is characterized by <u>weak</u> volatility throughout the assessment.

WITH MEDICINE:

Attention Index - This index is characterized by <u>weak</u> volatility throughout the assessment.
Timing index - This index is characterized by <u>weak</u> volatility throughout the assessment.
Impulsivity Index - This index is characterized by <u>moderate</u> volatility throughout the test.
Hyperactivity Index - This index is characterized by <u>weak</u> volatility throughout the assessment.

SUMMARY:

According to the MOXO test, there is a high probability of ADHD due to a deviation from the norm in the attention, timing and impulsivity index.

After taking Ritalin 20 mg, Adam showed significant improvement in the attention and timing index while the impulsivity index remained lower than the age norm.

Referred to a psychiatrist for a differential diagnosis and treatment for attention deficit disorders and behavioral symptoms reported in the background.

Depending on the medical diagnosis that is received - it is recommended to seek appropriate psychological treatment by a professional.

In conjunction with parental guidance by a professional who specializes in Adam's difficulties, in order to provide parents with practical knowledge, support and tools for coping.

RECOMMENDATIONS:

Adam shows volatility and functional gaps in the task and he tends to get exhausted by tasks.

- Therefore, it is recommended that Adam study for short periods at a time and initiate a break for refreshment during learning in order to improve the quality of attention later on.
- It is advisable to reduce the amount of material given on assignments and exams, due to his difficulty of sitting over time.
- Adam may benefit from reinforcements and immediate feedback.
- \star If necessary, it is recommended to give extra time in exams.
- Due to an impulsive response pattern, it is recommended that Adam be given self-management strategies around planning, control and reflection.

In terms of the influence of the distractors, it seems that working in a distracting environment impaired Adam's attentional function. Under the influence of Ritalin 20 mg no adverse effect of distractors was observed.

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