

# DEPRESCRIBING STIMULANTS IN YOUTH

## WHAT IS DEPRESCRIBING?

A structured approach to evaluating medications for indications, risks, and benefits with a goal of a minimum effective dose and number of medications.

Note: Guidelines suggest an annual conversation with the youth and family on whether stimulants should be continued

## STEP 1: PATIENT CONSIDERATIONS

Consider each of the following:

- The strength of the diagnosis of ADHD
- The severity and duration of the illness and length of treatment
- Current demands for attention and behavior – summer may be a good time to reduce or stop
- Family and youth request
- Weight and height compared to norms
- What happens if the youth misses an occasional dose?

## STEP 2: REVIEW MEDICATION HISTORY

Resources:

- [Medication History tool](#)
- Stimulant use in children:
  - [CMS stimulant indications and dosing](#)
  - [Ohio Minds Matter Psychotropic Med List - see page 6](#)

## STEP 3: ASSESS EACH MEDICATION

Consider:

- Current benefit of the medication
- Possible side effects of stimulants – growth deficits, weight loss, insomnia

## STEP 4: DEPRESCRIBING

Steps to follow:

- While most stimulants can be safely stopped with a quick taper – lowering the dose gradually every month is a more conservative option
- “Drug holidays” during the summer may be an option
- Educate youth and family on managing mild behavioral problems through parent management
- For assistance, Norton providers can consult psych via Epic Secure Chat to NCMG Child Psychiatry and Psychology



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## FOLLOW-UP

- Have the youth/family call or visit in 1 month to report progress
- Use standardized rating tools to monitor symptoms of ADHD, such as the [Vanderbilt Parent Rating Scale](#)
- Encourage the youth/family to continue therapy

## REFERENCES and SUPPORT

1. [2018 - 2019 Florida Best Practice Psychotherapeutic Medication Guidelines](#)
2. [MCAP Guidelines and Clinical Pearls](#) (Anxiety, Depression, and ADHD)
3. ADHD: diagnosis and management, [NICE guideline](#)
4. [American Academy of Child & Adolescent Psychiatry: Practice parameter](#)

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