



Photo by Neil Brake

Jennie Conrad and her two sons, Sean and Will, who suffer from attention difficulties.

Disturbing increase reported in prescribing novel antipsychotics to kids

By Carole Bartoo

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Novel antipsychotic drugs are being prescribed increasingly for children with attention difficulties despite few studies of their benefits and risks when used in this fashion.

Researchers at the Monroe Carell Jr. Children's Hospital at Vanderbilt report that—following concern about the overuse of the medication Ritalin—a new class of antipsychotic medications is being prescribed for an increasing number of children with attention deficit/hyperactivity disorder (ADHD).

The [study](#), published in the August 3 issue of *Archives of Pediatric Adolescent Medicine*, revealed that between 1996 and 2001 the proportion of children on TennCare¹ who were new users of powerful atypical antipsychotic medications almost doubled, from 23 per 10,000 children to 45 per 10,000. Use for behavioral problems associated with attention-deficit/hyperactivity disorder (ADHD) and mood disorders increased more than twofold. Perhaps most concerning, the adolescent population had more than a threefold increase in use of the drugs for ADHD/conduct disorder, amounting to nearly one in every 100 adolescents covered under TennCare.

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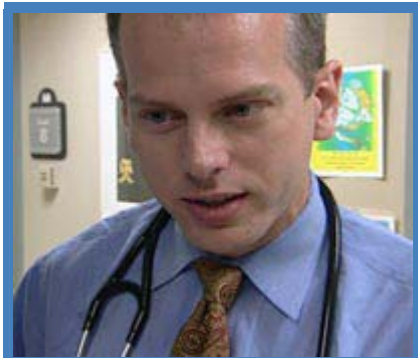


Photo by Richard Stone

William Cooper

The study's authors, led by William Cooper, M.D., associate professor of Pediatrics at Children's Hospital, tracked medical records of thousands of children listed in Tennessee's managed care program between 1996 and 2001. They eliminated any child listed with a severe disability, including a severe mental illness like psychosis or autism. The team suspects the concerns extend to the entire United States and have started working with CDC records in a new study to determine the problem's extent nationwide.

Cooper and Catherine Fuchs, M.D., associate professor of Psychiatry at Vanderbilt, began noticing an increasing number of children in Vanderbilt's clinics who were on antipsychotic drugs. In 2001, Cooper and Fuchs began the retrospective research.

"There were three areas of concern. First, these drugs appeared to be prescribed for disorders they are not proven to treat in children; second, the side effects of these drugs in children are not well understood; and third, usage of these drugs appears to be increasing dramatically." Cooper says.

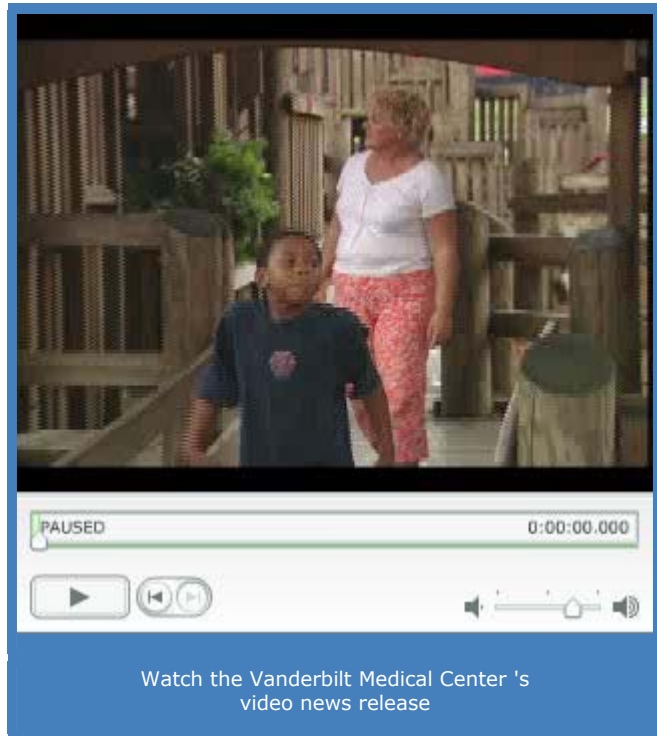
The drugs were introduced during the 1990s as a new generation of antipsychotics, and include clozapine, risperidone, olanzapine, quetiapine fumarate and ziprasidone hydrochloride. They were approved for use in psychosis and Tourettes syndrome. Cooper theorized the introduction of this new class of antipsychotic drugs was part of the reason for the increase in off-label use. The older antipsychotic drugs are well known to have potential side effects like movement disorders and "The newer drugs do have their own set of potential side effects, including serious weight gain, heart rhythm problems, and diabetes," says Cooper. "These are potential side effects that are not well understood when applied to children. In fact, some preliminary studies suggest that the side effects from these medications are more common and may be more severe in children than in adults." other serious neurologic problems not seen in the newer class of drugs.

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Cooper reports that there is modest evidence to support the use of this newer class of antipsychotic medications to treat severe disruptive behaviors associated with autism and mental retardation, but not for behavioral symptoms associated with ADHD and conduct disorders. He says that doctors and parents may perceive that the newer antipsychotics are safer for children and that the drugs can help children with aggressive behaviors.

“But those studies still need to be done. We don't know if the drugs are really safe and beneficial when used this way,” Cooper says.

“We would like for physicians to think very carefully before prescribing these drugs to children,” Cooper says. “And we hope this study encourages more research to find out how these drugs might be best used to help children.”



When study children were classified according to age, the secular trend of increasing antipsychotic use was most pronounced for adolescents aged 13 to 18 years and for children aged to 12 years.

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Fuchs agrees.

“The goal of this article is to encourage physicians to carefully consider the risk/benefit ratio in their decision making about prescribing practices for the new generation of antipsychotics. The medications are very effective. However, it is important for us as physicians to develop increased understanding of behavioral changes as they relate to illness; with the understanding that we will be able to make more effective treatment decisions,” she says.

Cooper's area of special interest is application of research to public health programs. He and Fuchs, along with co-investigators Gerald Hickson, M.D., professor of Pediatrics and Psychiatry; Patrick Arbogast, Ph.D., assistant professor of Preventive Medicine and Wayne Ray, Ph.D., director of the division of Pharmacologic Epidemiology, were assisted by the state's TennCare program in gathering data for the study.

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¹ Tennessee's program for Medicaid enrollees and the uninsured.