Protecting Children Who Are On Antipsychotic Medication

Children taking antipsychotic medication should receive the right care at the right time for the right reason!

Be alert for these 5 warning signs:

- Children **less than 5 years** of age receiving antipsychotic medications, such as risperidone (Risperdal) or olanzapine (Zyprexa)
- Children and adolescents being prescribed **3 or more mental health medications** in a calendar year
- Children and adolescents prescribed **2 or more antipsychotic medications** in a calendar year
- Medication dosages exceeding **recommended range**
- **Gaps in taking medication** that exceed 20 days

➢ Research on how antipsychotic drugs affect children is sparse. Experts are increasingly concerned that the drugs are being prescribed too often for children with behavior problems, such as attention deficit hyperactivity disorder (ADHD) and aggression.

➢ Early intervention with an effective and well-tolerated antipsychotic medication provides improvement in some mental disorders in children and adolescents that may modify the actual course of the disease associated with these disorders.
The diagnosis and treatment of mental health issues in children is complex, but help is available. One source when you have questions about the medications your child has been prescribed is the Partnership Access Line.

Call the Partnership Access Line (PAL)
1-866-599-PALS (7257)
Monday – Friday, 8 am – 5pm

The Partnership Access Line is a telephone-based child mental health consultation system for that gives the caller access to pediatric psychiatrists, psychologists, and social workers associated with Seattle Children’s Hospital.

The program provides:
• Immediate phone access to an expert
• Free tools to help the doctor and the patient
• Online resources at www.palforkids.org

➢ Children and adolescents taking antipsychotic medication seem to have a higher risk than adults for experiencing adverse side effects, such as repetitive, involuntary, and purposeless body or facial movements; lethargy; weight gain; and metabolic effects.

➢ Patients and their families should be included in a careful risk-benefit assessment before prescribing any specific antipsychotic drug.

➢ Over 11 percent of children using antipsychotic medications were prescribed 4 or more during a calendar year (non-concurrent).

➢ A statewide second opinion process reduced ADHD medication prescription practices.

➢ More children in foster care (12.4 %) are prescribed antipsychotic medications than non-foster care children (1.7 %).