CHADD's National Resource Center on ADHD

ADHD Quick Facts

Medication in ADHD Treatment



Medication can be an important part of ADHD treatment. It can help to control symptoms, helping a child stay on task and pay attention. It can only be prescribed by medical professionals, not other professionals. An accurate ADHD diagnosis is needed, including an evaluation for other possible diagnoses, before medication is prescribed.

Each family must consider the benefits and drawbacks of medication when deciding how to treat their child's ADHD symptoms. Medication does not cure ADHD. It eases ADHD symptoms during the time it is active. It is like eyeglasses, which improve vision only when the glasses are actually worn.

Stimulant medications

Stimulants are the most widely used medications for managing ADHD symptoms. These medications "stimulate" networks of nerve cells in the brain to work more effectively with each other, mainly by stimulating the dopamine system. They are effective in decreasing symptoms for most children with ADHD.

The benefits of medication can vary from significant symptom improvement to a mild or modest change in symptoms. Medication might not be helpful at all for some children. Attention span and on-task behavior often improve with medication, especially in structured environments. There may be less impulsive behavior. Some children can better handle frustration and follow direction. Common side effects for stimulants include appetite loss, abdominal pain, headaches, and sleep disturbance.

Not all children will experience a side effect, and some side effects go away. If symptoms persist, a change in dose or a change in medication might be needed.

Stimulants like methylphenidate or salts of amphetamine (brand names included under *Medications Often Prescribed for ADHD* on the following page) are controlled substances that can be misused, and therefore require careful monitoring, special prescriptions, and frequent checkups by the doctor. They are available as short-acting (example, four hours) and long-acting (example, 6-8 hours or all day) preparations. How much and when to take the medication will depend on the individual. Long-acting preparations are also less likely to be misused.

Many parents prefer that their child take longer-acting stimulants, which may cause fewer ups and downs over the day. This prevents the need for the child to take medication at school. For some children, it may be useful to add a shorter-acting dose in the mid to late afternoon. The "booster" dose may be

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used to provide better coverage for homework or evening activities. It can sometimes reduce problems of rebound when the earlier dose wears off.

A medication trial is often used to find the most beneficial drug and dose for a child. It usually begins with a low dose that is gradually increased at 3–7 day intervals until symptoms are noticeably better. It is common for the dose to be raised several times during the trial. The child is monitored both on and off the medication. Parents and teachers, as well as coaches and tutors, can share observations on rating scales. Monitoring treatment with medication is an essential part of medication management.

Nonstimulant medications

Nonstimulant medications may be used when stimulants do not work well, have unacceptable side effects, or a nonstimulant is preferred for other reasons. They do not work as quickly as stimulants and for most individuals not as well. Side effects can include nervousness, sleep problems, fatigue, upset stomach, dizziness, or a dry mouth. For some people they work better, and once built up in the system the effect is smoother over time.

Atomoxetine reduces inattention and hyperactivity/impulsivity mainly by stimulating the norepinephrine system. It is not a controlled substance, unlike a stimulant. This classification allows medical professionals to give samples and to place refill orders by telephone. Full effects are often seen only after atomoxetine is taken regularly for over a month.

Another type of FDA-approved medicine for ADHD is extended-release alpha-2 agonists, which work on a different part of the epinephrine system than atomoxetine. They tend to be sedating, or calming, until one gets used to them.

Learn more:

- Managing Medication for Children
- Medication Abuse and Diversion

Medications Often Prescribed for ADHD

Common stimulant medications:

- methylphenidate (Ritalin, Concerta, Metadate, Jornay PMTM, Daytrana patch)
- dextromethylphenidate (Focalin)
- mixed salts of amphetamine (Adderall, Evekeo, Dynavel)
- dextroamphetamine (Dexedrine, Dextrostat, Vyvanse)

Common nonstimulant medications:

- atomoxetine (Strattera)
- viloxazine (Qelbree)
- alpha-2 agonists
  - guanfacine XR (Intuniv)
  - clonidine XR (Kapvay, Onyda XR)



For more information, visit the ADHD Medication Guide provided by Northwell Health's Cohen Children's Medical Center at ADHDMedicationGuide.com

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