Impact of Combined Medication and Behavioral Treatment for ASD & ADHD

This study is not yet open for participant recruitment.

Verified August 2017 by Duke University

Sponsor:
Duke University

Collaborator:
Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD)

Information provided by (Responsible Party):
Duke University

ClinicalTrials.gov Identifier:
NCT03242772

First received: August 4, 2017
Last updated: August 7, 2017
Last verified: August 2017

Purpose

Children with comorbid autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD) have significantly worse outcomes than those with either ASD alone or ADHD alone. Effective early treatments that account for ADHD symptoms have not been developed for young children with ASD. The overarching goals of this study are to (1) evaluate a novel early intervention that pharmacologically addresses ADHD symptoms prior to initiating early behavioral intervention, and (2) identify changes in behavioral and neurophysiological activity that may underlie improved outcomes in children with comorbid ASD and ADHD. The primary aim of this study is to evaluate whether a stimulant treatment augments efficacy of a novel, parent-delivered, behavioral intervention based on the Early Start Denver model (P-ESDM) through a 30 week, double-blind, placebo-controlled Phase II clinical trial. Secondary aims are to determine the efficacy of combined intervention in improving ADHD symptoms and the efficacy, safety, and tolerability of Adzenys-XR-ODT in young children with ASD+ADHD. The study will also examine correlations between behavioral changes and state-of-the-art eye-gaze tracking (EGT) and electroencephalographic (EEG) biomarkers to elucidate key ways in which ADHD impacts attentional and neural functioning in ASD+ADHD, and to potentially identify new targets for intervention in children with ASD+ADHD.

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<thead>
<tr>
<th>Condition</th>
<th>Intervention</th>
<th>Phase</th>
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</thead>
<tbody>
<tr>
<td>Autism Spectrum Disorder</td>
<td>Drug: Amphetamine</td>
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<td></td>
<td>Behavioral: P-ESDM</td>
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<td>Phase 2</td>
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</table>
Deficit Hyperactivity Disorder  |  ESDMDrug: Placebo Oral Tablet

Study Type: Interventional
Study Design: Allocation: Randomized
Intervention Model: Parallel Assignment
Masking: Participant, Care Provider, Investigator, Outcomes Assessor
Primary Purpose: Treatment

Official Title: Impact of Combined Medication and Behavioral Treatment in Young Children With Comorbid ASD and ADHD

Resource links provided by NLM:
Genetics Home Reference related topics: autism spectrum disorder
MedlinePlus related topics: Autism Spectrum Disorder
Drug Information available for: Amphetamine sulfate Amphetamine
U.S. FDA Resources

Further study details as provided by Duke University:

Primary Outcome Measures:

- Change in frequency of joint attention initiations [ Time Frame: Weeks 0, 6, 12, 18, 24, and 30 ]
  Primary outcome will be measured using the Joint Attention Measure (JAMES) from the ESs (Early Social Communication Scales), a semi-structured, play-based assessment measures social communication behaviors that distinguish ASD from other developmental disorders. It yields measures of several specific behaviors noted to be impaired frequently in ASD, including frequency of joint attention initiations.

Secondary Outcome Measures:

- Change in social communication functioning [ Time Frame: Weeks 0, 6, 18, 30 (week 0 = baseline) ]
  Measured using Vineland Scales of Adaptive Behavior (VABS) socialization and communication subscale standard scores.

- Change in ADHD symptoms [ Time Frame: Weeks 0, 6, 12, 18, 24, 30 (week 0 = baseline) ]
  Symptoms assessed using clinician-completed ADHD Rating Scale (ADHD-RS).

Estimated Enrollment: 78
Anticipated Study Start Date: October 2017

Estimated Study Completion Date: July 2021

Estimated Primary Completion Date: July 2021 (Final data collection date for primary outcome measure)

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<th>Arms</th>
<th>Assigned Interventions</th>
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| Active Comparator: P-ESDM + Amphetamine | Drug: Amphetamine  
Study drug will be administered in the morning. Treatment will be initiated at 1 tablet = 3.1 mg or 0 mg of mixed amphetamine. Doses will be flexibly titrated upward by 1 tablet = 3.1 mg or 0 mg every 2 weeks unless there are intolerable adverse effects or great improvement in ADHD symptoms to a target dose of 4 tablets = 12.4 mg or 0 mg of Adzenys- XR-ODT. The allowable dose range will range from 1.6/0 mg (1/2 tablet) to 18.6/0 mg (6 tablets). Doses may be reduced at any point during the trial (typically in 1 tablet increments) but only may be increased every two weeks in order to fully assess potential benefits and adverse events of the current dose.  
Other Name: Adzenys XR-ODT  
Behavioral: P-ESDM  
Weekly sessions of the behavioral intervention will be delivered by a certified P-ESDM therapist. All participants in the trial and their primary caregivers will receive coaching following a manualized intervention (includes individualized learning objectives, intervention coaching for behavior management, handouts).  
Other Names:  
- Early Start Denver Model  
- Parent-Delivered Early Start Denver Model |
| Placebo Comparator: P-ESDM + Placebo | Behavioral: P-ESDM  
Weekly sessions of the behavioral intervention will be delivered by a certified P-ESDM therapist. All participants in the trial and their primary caregivers will receive coaching following a manualized intervention (includes individualized learning objectives, intervention coaching for behavior management, handouts).  
Other Names:  
- Early Start Denver Model  
- Parent-Delivered Early Start Denver Model  
Drug: Placebo Oral Tablet |
Matched placebo tablets will be administered in the morning and provided for 30 weeks (6 weeks prior to initiation of P-ESDM Intervention). Placebo appears identical to the active drug (Adzenys-XR-ODT).

Eligibility

Ages Eligible for Study: 36 Months to 84 Months (Child)
Sexes Eligible for Study: All
Accepts Healthy Volunteers: No

Criteria

Inclusion Criteria:

- DSM-5 criteria for ASD, based on the Autism Diagnostic Observation Scale-2nd edition (ADOS-2), Autism Diagnostic Interview - Revised (ADI-R), review of the NIH ACE Subject and Family Medical History Questionnaires and Physical Exam;
- ADHD-RS score > 93%ile for age and gender;
- Expert consensus DSM-5 diagnosis of comorbid ADHD based on the Standardized ADHD Diagnostic Interview for Preschoolers;
- Chronological age 36-84 months at enrollment;
- Verbal mental age < 54 months to ensure that child's abilities are in the appropriate range for P-ESDM.

Exclusion Criteria:

- Currently taking psychoactive medications;
- Participating in other behavioral one-on-one interventions or parent-coaching interventions for > 3 hrs/week;
- Caregivers not fluent in English;
- Evidence of significant cardiac abnormality based on electrocardiogram (ECG) or medical history;
- History of sudden non-ischemic cardiac death in a 1st or 2nd degree relative;
- Medical conditions as judged by the study clinician that would increase the risks associated with stimulant treatment;
- Known genetic or neurological syndrome/condition;
- Untreated epilepsy or any non-febrile seizure within the 6 months prior to randomization;
- Significant vision, hearing or motor impairment that would interfere with ability to respond to P-ESDM or complete assessments;
- Presence of more than one psychiatric condition in addition to ASD and ADHD confirmed with a semi-structured psychiatric interview and expert consensus diagnosis.

Contacts and Locations

Choosing to participate in a study is an important personal decision. Talk with your doctor and family members or friends about deciding to join a study. To learn more about this study, you or your doctor may contact the study research staff using the Contacts provided below. For general information, see Learn About Clinical Studies.
Please refer to this study by its ClinicalTrials.gov identifier: NCT03242772

Contacts

Contact: Geraldine Dawson, PhD  (919) 684-3165   geraldine.dawson@dm.duke.edu

Sponsors and Collaborators
Duke University
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More Information

Responsible Party: Duke University
ClinicalTrials.gov Identifier: NCT03242772   History of Changes
Other Study ID Numbers: Pro00085179
Study First Received: August 4, 2017
Last Updated: August 7, 2017

Individual Participant Data (IPD) Sharing Statement:
Plan to Share IPD: No

Studies a U.S. FDA-regulated Drug Product: Yes
Studies a U.S. FDA-regulated Device Product: No
Product Manufactured in and Exported from the U.S.: No

Additional relevant MeSH terms:
Disease          Sympathomimetics
Attention Deficit Disorder with Hyperactivity  Autonomic Agents
Autism Spectrum Disorder  Peripheral Nervous System Agents
Pathologic Processes  Dopamine Agents
Attention Deficit and Disruptive Behavior Disorders  Neurotransmitter Agents
Neurodevelopmental Disorders  Molecular Mechanisms of Pharmacological Action
Mental Disorders  Adrenergic Agents
Child Development Disorders, Pervasive  Adrenergic Uptake Inhibitors
Amphetamine  Neurotransmitter Uptake Inhibitors
Central Nervous System Stimulants  Membrane Transport Modulators
Physiological Effects of Drugs  Dopamine Uptake Inhibitors

ClinicalTrials.gov processed this record on August 08, 2017