

Returning to Stimulants in Children with Treatment Resistant ADHD: A Case Series.

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Abstract

OBJECTIVE:

To present a case series of children retrialed on stimulants after initial poor stimulant responses given the paucity of information on the usefulness of this strategy.

METHODS:

Health records from an ADHD medication service were obtained for six children who: (i) were medication naïve at service entry; (ii) had trials of at least one stimulant from each stimulant class; (iii) subsequently received a non-stimulant ADHD medication; and, (iv) were then retried on stimulants.

RESULTS:

Initial stimulant discontinuation was a function of adverse effects and/or limited symptom improvement. Minimal response and/or adverse effects to non-stimulants contributed to the decision to retry stimulants. Final ADHD symptom ratings by parents and teachers were significantly better than baseline for this cohort. Three were discharged on stimulants, two as monotherapy.

CONCLUSION:

Further study is required to develop evidence-based treatment algorithms for treatment resistant ADHD. Retrying a stimulant may be one option.