

# PSYCHOTROPIC MEDICATIONS FOR CHILDREN IN CARE

## *Bench Card*

*This Bench Card has been created by the Administrative Office of the Court as a resource for judges. Bench Cards do not represent statements of law by the Idaho Supreme Court and do not constitute legal advice.*

### **PURPOSE**

To monitor psychotropic medication use in children diagnosed with a mental health disorder.

### **WHAT<sup>1</sup>**

Psychotropic medications are prescribed to manage psychiatric and mental health disorders or issues. They include mood stabilizers, antipsychotics, anti-anxiety medications, and stimulants.

### **WHO<sup>2</sup>**

Youth in care who have been diagnosed with a mental health disorder and have been prescribed medication to manage issues and symptoms. Common school-age child and adolescent diagnoses include:

1. Mood disorders including depression, depression with psychotic features and bipolar disorder;
2. Anxiety disorders including obsessive-compulsive disorder, PTSD, and generalized anxiety disorder;
3. Thought disorders including schizophrenia and psychotic disorders;
4. Attention deficit and disruptive behavior disorders;
5. Elimination disorders; and/or
6. Other disorders of infancy, childhood or adolescence including separation anxiety disorder (SAD), reactive attachment disorder (RAD), anorexia and bulimia.

### **RED FLAG WARNINGS<sup>3</sup>**

The following circumstances may warrant further investigation:

1. **Black Box Warning** – The FDA places black box warning labels on prescription medications with a high potential for adverse effects. This is the strongest warning the FDA can impose. Medicines with black box warnings are still FDA approved, but their use requires particular attention and caution regarding potentially dangerous or life-threatening side effects.  
NOTE: All antidepressant medications carry a black box warning that using the drugs can increase the risk of suicidal tendencies and behaviors in children and adolescents.
2. **Polypharmacy** – The prescribing of more than one psychotropic medication can result in increased side-effects and risks. Whenever multiple medications are used, there should be a rationale provided as to why each is prescribed.
3. **Medication in Children under Five** – Young children are often more sensitive to medication side effects compared to older youth. Any consideration of such medication in a child or infant below the age of five (5) should be very carefully evaluated by a clinician with special training and experience with this young age group.

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### OTHER CONSIDERATIONS<sup>4</sup>

**Off-Label Use** – Many medications used with children are often used off label, meaning they are used to treat symptoms which they were not FDA approved to treat. Using medications off label is legal; however, concerns have been raised about risks of widespread off-label use.

### RECOMMENDED QUESTIONS

1. What is the child's diagnosis that warrants medication?
2. For what is the medication needed?
3. Who prescribed the medication? (e.g. adequate credentials)
4. What other modes of treatment or intervention will also be provided?
5. Was an accurate medical, behavioral, and psychological history obtained from parents and past providers?
  - a. What else has been tried?
  - b. Has counseling been tried over a substantial period of time?
  - c. Has the child had a psychiatric and/or medical examination?
6. Who will monitor the ongoing use of this medication and how often will the youth be seen?
7. What are the possible side effects of this medication and how will they be handled?
8. What evidence supports the use of this medication with children?
  - a. What do we know about how this medication works in children?
9. How will this child be able to comply with the prescribed medication?
10. Does this child agree with taking this medication?
11. Who gave permission to place this child on medication?
12. How will this medication help improve this child's functioning?
13. Is a second opinion warranted in this case?

### ENDNOTES

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<sup>1</sup> For more information on commonly prescribed psychotropic medication and side effects see: pgs. 9-11, Practice and Policy Brief. Psychotropic Medication and Children in Foster Care: Tips for Advocates and Judges. JoAnne Solchany, PhD, ARNP. October, 2011. Adapted from National Alliance on Mental Illness. Commonly Prescribed Psychotropic Medications, *available* at [www.nami.org](http://www.nami.org) (last visited June 1, 2020).

<sup>2</sup> Practice and Policy Brief. Psychotropic Medication and Children in Foster Care: Tips for Advocates and Judges. JoAnne Solchany, PhD, ARNP. October, 2011.

<sup>3</sup> A Guide for Public Child Serving Agencies on Psychotropic Medications for Children and Adolescents. American Academy of Child and Adolescent Psychiatry, February 2012.

<sup>4</sup> Practice and Policy Brief. Psychotropic Medication and Children in Foster Care: Tips for Advocates and Judges. JoAnne Solchany, PhD, ARNP. October, 2011, p. 17.