

Stimulant Medications

What are the benefits of stimulants?

For many people with ADHD, stimulants dramatically improve their ability to focus and prioritize at work, school and in their social life. Symptoms that benefit include distractibility, short attention span, hyperactivity, and impulsivity, and physical coordination. Although they are called stimulants, most people with ADHD feel calmer on them. If you do not have ADHD, they may make you feel hyped or energized, which may be an indication you should stop them.

When should I see improvement?

Improvement in symptoms should be noticeable within a few hours after taking a stimulant. If no change is seen after a week, the medicine may need to be adjusted.

How should I take the medicine?

Dosing will depend on how long its action lasts – see the other side for available options. The duration can be improved (by about an hour) and the onset made smoother if it is taken with food (30 min before a meal).

Some people only take stimulants on work or school days, while others find the benefits extend into their leisure and social lives and take them every day; either way is equally safe.

What if I miss a dose?

You may take the dose late or wait for your next scheduled dose. Your decision will depend on how long the medicine affects you (see chart), what activities you face that day, and the possibility of sleep disruption if the dose is taken too late.

What side effects are possible?

Side effects include difficulty sleeping, nervousness, appetite loss, dizziness, upset stomach, and headache. Taking too much of the medicine can cause paranoia and agitation. People with Tourette's disorder may have more tics. People with bipolar disorder may have worse mood swings, such as mania or agitation, on stimulants.

Stimulants can raise blood pressure a small amount, and we will monitor this while you take them. Very rarely people have undiagnosed heart conditions which put them at risk for sudden death after a stress such as exercise or when using certain medications, including stimulants.

Are stimulant medicines addictive?

When taken as prescribed to treat the symptoms of ADHD, stimulants are not addictive. People with ADHD rarely abuse stimulants, and in fact treatment *lowers* their rates of substance abuse. However, *misuse* of stimulants can lead to abuse and addiction.

Will I need stimulants for life?

Symptoms of ADHD may improve as you age, and trials without medication can be attempted to see if it is still necessary. If taken as prescribed, stimulants can be safely stopped at any time.

Insurance coverage

Some insurers require authorization for stimulants which can be a lengthy process. Contact auth@moodtreatmentcenter.com if you run into trouble with that.

Ritalin (Methylphenidate Compounds)			
Name	Reaches its peak in (hours):	Effects last for (hours):	Sizes (mg)
Methylphenidate	1-2	3-5	Tablets: 5, 10, 20 Brands: Ritalin, Methylin chews
Methylphenidate SR/ER (generic)	4-5	4-8	Tablets by brand: Generic 20, 10, Ritalin SR 20, Methylin ER 10, 20. Metadate ER 20.
Ritalin LA	2, 5.5 (2 peaks)	8-12	Capsule: 20, 30, 40 (50% released at taking, 50% 4 hr later).
Concerta	6-8	12	Capsule: 18, 27, 36, 54, 72
Metadate CD	1.5, 4.5 (2 peaks)	8	Capsule: 20 (6mg released 1 st , 14mg released 3 hr later)
Focalin	1-2	3-5	Tablets: 2.5, 5, 10
Focalin XR			

Adderall (Dextroamphetamine and Amphetamine Mixture)			
Name	Reaches its peak in (hours):	Effects last for (hours):	Sizes (mg)
Adderall	3	4-6	Tablets: 5, 7.5, 10*, 12.5, 15, 20*, 30* (*scored tabs).
Adderall XR	3, 7 (2 peaks)	8-12	Capsules: 5, 10, 15, 20, 25, 30

Dexedrine (Dextroamphetamine)			
Name	Reaches its peak in (hours):	Effects last for (hours):	Sizes (mg)
Dextroamphetamine	3-4	4-6	Tablets: 5, 10 Brand: Dexedrine
Dextroamphetamine SR	8	10-14	Capsules: 5, 10, 15 Brand: Dexedrine Spansule
Vyvanse	3-4	12-14	Tablets: 20-70mg

Books:

Driven to Distraction and Answers to Distraction by E.M. Hallowell & J. Ratey.

Out of the Fog: Treatment Options and Coping Strategies for Adult Attention Deficit Disorder by K.R. Murphy & S. LeVert. (1995).

You mean I'm not lazy, stupid or crazy?! by K. Kelly & P. Ramundo. (1996).

Organizations:

CHADD (Children and Adults w/ ADHD)
8181 Professional Place, Suite 201
Landover, MD 20785
(301) 306-7070, (800) 233-4050
www.chadd.org, email national@chadd.org
National Attention Deficit Disorder Association
1788 Second Street, Suite 200
Highland Park, IL 60035
(847) 432-2332 www.add.org, email: mail@add.org

Agreement on the Use of Controlled Substances

I understand that my use of controlled prescriptions is monitored and regulated by state agencies. To prevent problems in my controlled-substance record I agree that:

1. **No early refills.** I will not over-use or share the medicine and understand that it cannot be refilled early even if the pills are lost.
2. **Only receive and change controlled prescriptions at office visits.** I will keep regular office visits and only receive refills at the office. In rare cases when I am unable to keep an office visit I will provide one week notice for refills of controlled substances to allow time to check the state database. If I think I need to increase or change a controlled prescription, I will schedule an office visit rather than trying to make changes on my own or by telephone.
3. **Do not obtain from other MDs.** I will alert the Mood Treatment Center before filling prescriptions for the same type of controlled substance they are prescribing (see list below), unless it is part of a hospital stay.
4. **Refill limitations.** Controlled scripts and their refills expire six months after they are written. For stimulants, the maximum amount that can be written at each office visit is 3 months.
5. **Pharmacy regulations.** The pharmacy will only honor a hard-copy of these prescriptions (no call-ins) and will require the person picking up the bottle to show a government-issued photo ID (you can designate someone else to pick up the prescription).
6. **Drug screens and out-of-state pharmacies.** Controlled substances will show up on urine drug screens. Some states may not honor out-of-state prescriptions for controlled substances.

Examples of Controlled Substances

Benzodiazepines: alprazolam (Xanax), clordiazepoxide (Librium), clonazepam (Klonopin), clobazam (Onfi), clorazepate (Tranxene), diazepam (Valium), estazolam (ProSom), flurazepam (Dalmane), lorazepam (Ativan), midazolam (Versed), oxazepam (Serax), quazepam (Doral), temazepam (Restoril).

Stimulants: methylphenidate (Ritalin, Concerta, Metadate, Methylin, Daytrana), dextmethylphenidate (Focalin), amphetamine-salts (Adderall), dextroamphetamine (Dexedrine, Vyvanse, Zenzedi).

Sleep Medicines: eszopiclone (Lunesta), zaleplon (Sonata), zolpidem (Ambien, Edluar, Intermezzo).

Opioids*: buprenorphine, codeine, hydrocodone, hydromorphone, fentanyl, meperidine, morphine, tramadol, oxycodone, oxycontin.

Other: modafinil (Provigil, Nuvigil), dronabinol (Marinol)*, gamma hydroxybutyric acid (Xyrem)*, barbiturates*.

*Not prescribed at the Mood Treatment Center

Signature

Date