



# Medications and Your Child

## Can medications help our child?

Medications are not the primary treatment for autism spectrum disorders (ASDs). Medications have not been shown to directly improve language or social skills. However, medications may help with behaviors that get in the way of progress in your child's intervention program. Such behaviors include

- Aggression
- Irritability
- Anxiety
- Mood disturbance
- Hyperactivity
- Repetitive behaviors
- Impulsivity
- Self-injury
- Inattention
- Sleep disturbance

Your child's pediatrician may recommend medicine for your child if these behaviors disrupt learning, socializing, health and safety, or quality of life and if your child is not responding to behavioral treatments. Your child may have another diagnosis, such as depression or epilepsy, that is treated with medicine. Many children with ASDs, however, do not need to be treated with medication.

## What types of medications are used?

The most common medications for children with ASDs are called atypical antipsychotics, stimulants, selective serotonin reuptake inhibitors (SSRIs), alpha-2 agonists, and certain anticonvulsants. A variety of other medications are also used in some cases. At this time, risperidone and aripiprazole (both atypical antipsychotics) are the only medications that have been approved by the US Food and Drug Administration specifically for children with ASDs to treat irritability (including aggression, deliberate self-injury, and temper tantrums).

Choice of medication depends on the child and specific behaviors. Medications are not helpful for all children with ASDs or for all related problem behaviors. Medication may be prescribed by the child's pediatrician or family doctor or by a specialist such as a child psychiatrist, pediatric neurologist, neurodevelopmental pediatrician, or developmental and behavioral pediatrician.

## What should we do before our child starts a medication?

Before starting your child on a medication, work with her doctor. Look for medical factors that might be causing or

increasing the behavior. For example, your child may have a hidden source of pain, such as an ear infection, that leads to self-injurious behavior. Perhaps a change in routine at school or home is upsetting your child and causing disruptive outbursts. Sometimes, if you address these factors, there is no longer a need for medication.

Discuss treatment options other than medication. Often, behavioral strategies are the best way to decrease problem behaviors, and they should be tried before medication is given. Medications are most often used with behavioral interventions, not in place of them. Once in a while, medication may be needed as a first-line treatment when the safety of the child or others is at risk.

Ask your child's pediatrician about possible benefits and side effects of any medication. It is important for everyone to know what to expect. You should also tell your doctor what other medications, including dietary supplements and other complementary treatments, your child is taking.

## What happens after our child starts a medication?

Target behaviors must be measured to find out what effect the medication is having. Side effects should also be monitored. Your child's pediatrician may ask you to fill out behavior checklists to help watch for behavioral changes or side effects. You may be asked to have teachers, therapists, and other caregivers describe changes they see in your child. With some medications, your child may need periodic blood tests or electrocardiograms (ECGs) because possible side effects of the medications include blood, liver, or heart rhythm problems. The dose of the medication often has to be changed depending on how well it is working and whether there are any side effects. Dosage may also change as your child grows. Your child's pediatrician should continue a medication only if the benefits are greater than any negative effects.

## How can we use medicines safely?

*Give medicines exactly as the doctor tells you—amount and time of day.* Everyone forgets to give a medicine on time once in a while. Ask the doctor or pharmacist what to do if this happens.

*Do not stop, restart, increase, or decrease medicines without asking the doctor first.* If a medicine seems to stop working, it may be because it is not being taken regularly. Your child

may be cheeking or hiding the medicine or forgetting to take it (especially at school). Doses may be too far apart, or your child may need a different dose now. Something at school, at home, or in the neighborhood may be upsetting your child. Or your child may need special help for learning disabilities or tutoring. Talk to your child's pediatrician about your concerns. Do not just increase the dose!

*Keep all medicine out of the reach of all children, and supervise your child when taking medicine.* If your child takes too much of a medicine, call your child's pediatrician, Poison Help (1-800-222-1222), or a hospital emergency department right away.

*Each medicine has a generic or chemical name.* Just like dish soap or paper towels, some medicines are sold by more than one company under different brand names. The same medicine may be sold under a generic name and several brand names. Generic medicines usually cost less than brand-name ones. Generic medicines have the same chemical formula, but they may not be exactly the same strength as brand-name medicines. Also, some brands of pills contain dye that can cause allergic reactions. Ask your child's pediatrician or your pharmacist whether your child should take a specific brand name of medicine.

*All medicines can cause an allergic reaction.* Allergic reactions include hives, itching, rashes, swelling, and trouble breathing. Even a tiny amount of a medicine can cause a reaction in patients who are allergic to that medicine. If your child has a reaction, call your child's pediatrician or your pharmacist right away. Be sure to talk to your child's doctor before restarting a medicine that has caused an allergic reaction in the past.

*All medicines can have side effects.* Your child may experience side effects, and you might not be sure if a symptom is caused by the disorder being treated or the medicine itself. Talk to your child's pediatrician if you have any concerns.

*Taking more than one medicine at the same time may cause more side effects or cause one of the medicines to not work as well.* Always ask your child's doctor, nurse, or pharmacist before adding another medicine, prescription or over the counter. Be sure that each doctor knows about all of the medicines your child is taking. Also, tell the doctor about any vitamins, herbal medicines, or diet supplements your child may be taking. Some of these may have side effects alone or when taken with medication.

*Everyone taking medicine should have a checkup at least once a year in addition to routine medication monitoring visits.* Taking your child to follow-up visits the pediatrician

schedules is very important to check your child's response to the medicine and watch for side effects.

*If you think your child is using street drugs or alcohol, please tell the doctor right away.*

*If you think your child may be pregnant, please tell the doctor right away.* Pregnancy requires special care in the use of medicine.

*Use one pharmacy for all your child's medicines.* Some medications can interact with one another. These interactions can range in severity from mild to fatal. Your child may have more than one doctor prescribing medications for him, and the doctors may not be aware of other medications your child is receiving. Using one pharmacy will help decrease the chance of adverse drug interactions by allowing the pharmacist to review all of your child's medications.

*Ask for childproof bottles for your child's medications.* Accidental ingestion of prescription medications is potentially serious. Childproof bottles, in addition to keeping medications out of your child's reach, can help prevent this.

*Ask how and where your child's medications should be stored and dispensed.* Many people keep medications in the bathroom. The humidity in there can damage pills. Other medications need to be refrigerated. Some liquid medications must be shaken before being given to a child. Ask your pharmacist about these issues when you pick up a prescription.

*If your medication is in liquid form, ask for something to measure it.* Teaspoons and tablespoons used for eating are not accurate for measuring. Syringes and small medicine cups with accurate measurements are available from your physician or pharmacist.

**Please Note:** Printed information like this applies to children and adolescents in general. As researchers learn more, advice changes. Even experts don't always agree. Many medicines have not been approved by the US Food and Drug Administration for use in children. For this reason, use for a certain problem or age group often is not listed in the *Physicians' Desk Reference*. This does not necessarily mean that the medicine is dangerous or does not work. It means only that the company that makes the medicine has not asked for permission to advertise the medicine for use in children. Usually this is because it is expensive to do the tests needed to get that permission.

*If you have questions about the medicine or if you notice anything unusual, please ask your child's doctor or nurse!*

The recommendations in this publication do not indicate an exclusive course of treatment or serve as a standard of medical care. Variations, taking into account individual circumstances, may be appropriate. Original document included as part of *Autism: Caring for Children With Autism Spectrum Disorders: A Resource Toolkit for Clinicians*, 2nd Edition. Copyright © 2013 American Academy of Pediatrics. All Rights Reserved. The American Academy of Pediatrics does not review or endorse any modifications made to this document and in no event shall the AAP be liable for any such changes.

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