

Medication Optimization and Deprescribing in Children and Adolescents with ASD and ID

INTRODUCTION

- Medication optimization for target symptoms in children with ASD and ID involves a systematic approach that takes into consideration current symptoms, level of impairment, indications for medication prescribing, evidence-base, and benefit-to-risk ratio.
- Routine evaluation of medications regimens is recommended to minimize the use of polypharmacy and potential medication-related adverse effects.
- One approach in determining whether a medication is being used appropriately or whether (and how) it can be stopped has been deprescribing.

WHAT IS DEPRESCRIBING?

- Deprescribing is a structured approach to identifying and discontinuing medications when existing or potential harms outweigh existing or potential benefits.
- Deprescribing is not synonymous with medication cessation; rather, the goal is to use the minimum effective dose and lowest number of medications necessary to manage symptoms and maintain functioning.
- Deprescribing is its own process, requiring extreme caution and a certain skill on the part of the prescriber.

RECOMMENDATIONS FOR MEDICATION OPTIMIZATION/DEPRESCRIBING

- Start with a comprehensive psychiatric assessment. Obtain information from collateral sources such as parents/family members, teachers/school, and other care providers. Refer to the Principles of Practice.
- Develop a comprehensive treatment plan, including evidence-based psychosocial interventions.
- Be clear about the reasons for deprescribing psychotherapeutic medication.
- Identify medications that can be reduced or discontinued.
- In cases of polypharmacy, reduce or discontinue only one medication at a time.
- Consider factors such as:
 - ◆ The target symptoms for which the medications are prescribed
 - ◆ Evidence-base for use
 - ◆ Medication benefit
 - ◆ Risk of medication-related adverse effects
 - ◆ Potential for drug-drug interactions.
- Start with medications:
 - ◆ Without a clear indication.
 - ◆ If after assessment, it remains unclear what symptoms the medication was targeting.

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- ◆ With the least evidence of efficacy for the symptoms the medication is prescribed to treat.
- Develop a monitoring plan, including safety risk monitoring.
- If symptoms recur once a medication is reduced or stopped, first wait and observe. Symptom exacerbation may be self-limited and related to medication withdrawal. Consider the presence of external stressors, and reinforce therapeutic support strategies.
- If symptoms persist, review the differential diagnosis and treatment plan. Consider updating the treatment plan if indicated.

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