

Quick Guide to ADHD Medication in QUÉBEC - September 2019

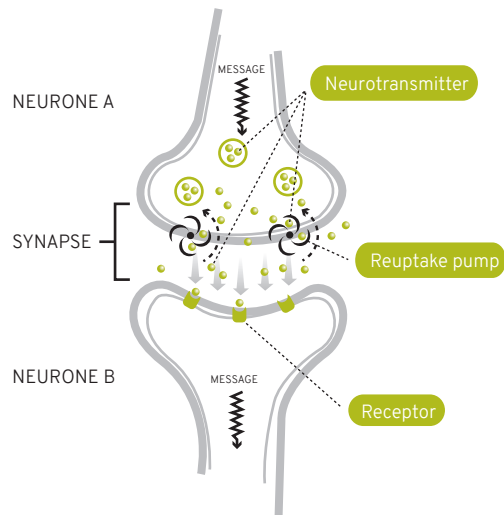


Medications available and illustrations	Liberation mode (% immediate / delayed)	Particularities	Duration of action ¹	Starting Dose ²	Dose titration as per product monograph	RAMQ-coverage (code)
Amphetamine-based psychostimulants						
Dexedrine® Tablets 5 mg 	(100/0)	Pill can be crushed ³	~ 4 h	Tablets = 2.5 to 5 mg BID	↑ 2.5 - 5 mg at weekly intervals; Max. dose/day: (q.d. or b.i.d.) All ages = 40 mg	Covered
Dexedrine® Spansules 10, 15 mg 	(50/50)	Spansule	~ 6 - 8 h	Spansules = q.d. 10 mg am		Covered
Adderall XR® Capsules 5, 10, 15, 20, 25, 30 mg 	(50/50)	Sprinkable Granules	~ 12 h	5 - 10 mg q.d. a.m.	↑ 5 mg at weekly intervals Max. dose/day: Children = 30 mg Adolescents and Adults = 20 - 30 mg	Exceptional medications Child-Teen: (SN280) Adult: (SN280)
Vyvanse® Capsules 10, 20, 30, 40, 50, 60, 70* mg Chewable Tablets 10, 20, 30, 40, 50, 60 mg 	Prodrug Prodrug	Capsule content can be diluted in water, orange juice and yogurt Tablet must be chewed thoroughly before swallowing. Can be substituted with Vyvanse capsules on a mg per mg basis	~ 13 - 14 h ~ 13 - 14 h	20 - 30 mg q.d. a.m. 20 - 30 mg q.d. a.m.	↑ by clinical discretion at weekly intervals Max. dose/day: All ages = 60 mg ↑ by clinical discretion at weekly intervals Max. dose/day: All ages = 60 mg	Capsules: Exceptional medications Child-Teen: (SN280*) Adult: (SN280*) Chewable Tablets: Exception patient measure
Methylphenidate-based Psychostimulants						
Methylphenidate short acting Tablets 5 mg (generic) 10, 20 mg (Ritalin®) 	(100/0)	Pill can be crushed ³	~ 3 - 4 h	5 mg b.i.d. to t.i.d. Adult: consider q.i.d.	↑ 5 mg at weekly intervals Max. dose/day: All ages = 60 mg	Covered
Biphentin® Capsules 10, 15, 20, 30, 40, 50, 60, 80 mg 	(40/60)	Sprinkable Granules	~ 10 - 12 h	10 - 20 mg q.d. a.m.	↑ 5 - 10 mg at weekly intervals Max. dose/day: Children and Adolescents = 60 mg, Adults = 80 mg	Exceptional medications Child-Adolescent: (SN280) Adult: (SN280)
Concerta® Extended Release Tabs 18, 27, 36, 54 mg 	(22/78)	Pill needs to be swallowed whole to keep delivery mechanism intact	~ 12 h	18 mg q.d. a.m.	↑ 9 - 18 mg at weekly intervals Max. dose/day: Children = 54 mg Adolescents = 54 mg / Adults = 72 mg	Exceptional medications Child-Teen: (SN280) Adult: (SN280)
Foquest® Capsules 25, 35, 45, 55, 70, 85, 100 mg 	(20/80)	Sprinkable Granules	~ 16 h	25 mg q.d. a.m.	↑ 10-15 mg in intervals of no less than 5 days Max. dose/day: Children and Adolescents = 70 mg Adults = 100 mg	Exception patient measure
Non psychostimulant - Selective Norepinephrine Reuptake Inhibitor						
Strattera^{MD} (Atomoxetine) Capsules 10, 18, 25, 40, 60, 80, 100 mg 	Not applicable	Capsule needs to be swallowed whole to reduce GI side effects	Up to 24 h	Children and Adolescents : 0.5 mg/kg/day Adults = 40 mg q.d. for 7-14 days	Maintain dose for a minimum of 7 - 14 days before adjusting: Children = 0.8 then 1.2 mg/kg/day 70 kg or Adults = 60 then 80 mg/day Max. dose/day : 1.4 mg/kg/day or 100 mg	Exceptional medications Child-Teen Exception patient measure Adult
Non psychostimulant - Selective Alpha-2A Adrenergic Receptor Agonist						
Intuniv XR® (Guanfacine XR) Extended Release Tabs 1, 2, 3, 4 mg 	Not applicable	Pills need to be swallowed whole to keep delivery mechanism intact	Up to 24 h	1 mg q.d. (morning or evening)	Maintain dose for a minimum of 7 days before adjusting by no more than 1 mg increment weekly Max. dose/day : Monotherapy: 6-12 years = 4 mg, 13-17 years = 7 mg. As adjunctive therapy to psychostimulants 6-17 years = 4 mg	Exceptional medications Child-Teen Exception patient measure Adult

Note: Illustrations do not reflect real size of pills/capsules. For specific details on how to start, adjust and switch ADHD medications, clinicians are invited to refer to the Canadian ADHD Practice Guidelines (www.caddra.ca). ¹ Pharmacokinetics and pharmacodynamic response vary from individual to individual. The clinician must use clinical judgement as to the duration of efficacy and not solely rely on reported values for PK and duration of effect. ² Starting doses are from product monographs. CADDRA recommends generally starting with the lowest dose available. ³ Higher abuse potential. * Vyvanse 70 mg is an off-label dosage for ADHD treatment in Canada. In Québec, RAMQ does NOT authorize the reimbursement of the 70 mg capsule while all the other doses are covered following the criteria of the Exceptional medications program. *Document developed by Annick Vincent MD (www.attentiondeficit-info.com) and Direction des communications et de la philanthropie, Laval University.*



ILLUSTRATION OF A SYNAPSE



Illustrations from: My Brain Still Needs Glasses, Annick Vincent, Québec Livres 2013
www.attentiondeficit-info.com

ADHD Pharmacologic Treatment Steps*

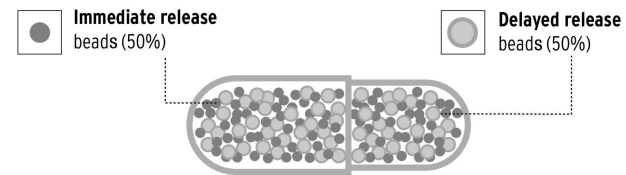
* Caution: This may not apply to all. Always individualize treatment plan. For specific details on how to start, adjust and switch ADHD medications, clinicians are invited to refer to the Canadian ADHD Practice Guidelines (www.caddra.ca).

ADHD Diagnosis + clinical indication to treat with medication

- Start long acting psychostimulant (amphetamines or methylphenidate-based)
 - Consider duration of action, delivery mechanism and active ingredient
 - Possibility to augment with a non stimulant or add a short acting stimulant to prolong clinical effects
- Failure/intolerance: Try a different long acting psychostimulant
 - Consider duration of action, delivery mechanism and active ingredient
 - Possibility to augment with a non stimulant or add a short acting stimulant to prolong clinical effects
- Failure/Intolerance: Consider a switch to non-stimulant (monotherapy)
- Sub-optimal response: Consider adding a non-stimulant (adjunct / combination therapy)

Delivery System of Long Acting Psychostimulants

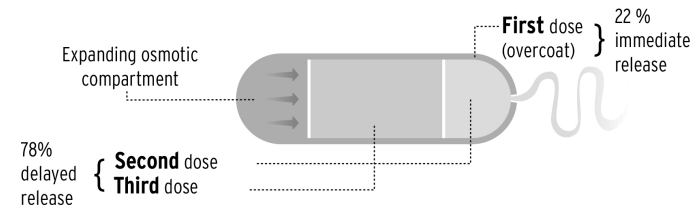
ADDERALL XR®



BIPHENTIN® / FOQUEST®



CONCERTA®



VYVANSE MD

