

**DCF Psychotropic Medication Advisory Committee**  
**Meeting Minutes**  
**March 05, 2021, 1:00 PM**

**PRESENT via Video Conference: David Aresco RPh; Paul Rao, M.D.; Margaret Rudin, APRN, PhD; ; Amy Veivia, Pharm.D.; Brian Keyes, M.D.; Carissa Patsky-Pomerleau, M.D.; Pamela Hetherington, M.D.; Dielka Brutus, APRN; Tina Spokes, RN; Beth Muller, APRN; Angela Ojide, APRN; Melissa Straus, APRN; Pieter Joost Van Wattam, M.D.**

1. The meeting was held remotely via Zoom; Dr. Rao called the meeting to order at 1:04pm.
2. As the first Friday in April is a Holiday the next meeting will be held on May 7, 2021 from 1PM – 2:30pm as a remote meeting.
3. Minutes: The minutes of the December 2020 and February 2021 meetings were reviewed and approved with some minor revisions regarding the subject of PRNs and assessments.
4. Announcements: NONE
5. Medication therapeutic class review and discussion: Stimulants and non-stimulant ADHD medications.
  - i. Research was conducted and the results presented to the Committee by Dr. Veivia.
  - ii. The current PMAC protocol for this medication class was distributed (via email), reviewed and discussed.
  - iii. It was noted that there is very little new/changed information since the last time this drug class was reviewed.
  - iv. Several possible changes/additions to the monitoring for this drug class were reviewed and discussed in detail. Based on this review/discussion the following changes were recommended.
    - a. Add for amphetamines only: Consuming with acidic foods like orange juice may decrease blood levels. Approved.
    - b. The risk of priapism with methylphenidate containing products was discussed in detail. It was noted the FDA classifies this as “rare but serious”. A recommendation was made and approved to add this warning with the addition of “consider appropriate intervention if it occurs”.
    - c. The warning to observe for signs of digital changes (peripheral vasculopathy, Reynaud’s phenomenon) was discussed. After discussion a recommendation was made and approved to not add this warning.

- d. The need for periodic monitoring of CBC with differential for risk of neutropenia with long term therapy was discussed. It was noted that this is classified as a “rare but serious” adverse effect. A suggestion was made to consider this requirement for other medications. It was noted that this will be a significant change in practice. A recommendation was made and approved to add this warning to the protocol for methylphenidate.
- e. The risk of permanent skin discoloration with the Daytrana patch was discussed. A recommendation was made and approved to add this warning.
- v. The most recent version of the Texas protocols regarding this drug class was discussed and it was noted that it was similar to the PMAC protocol.
- vi. AAP guidelines published in 2019 were discussed. No recommendations made.
- vii. Underdosing of stimulant medications possibly leading to unnecessary addition of mood stabilizing agents and resultant polypharmacy was discussed.
- viii. The relationship between birth month and the academic year, and the differential effects on rates of ADHD diagnoses, was discussed.
- ix. The effects of the COVID-19 pandemic on children and ramifications regarding medication management were discussed. It was noted that the diagnosis of ADHD is now much more complicated due to COVID related circumstances. No recommendations made.
- x. Some additional COVID related issues were discussed to include adding a general and broad statement regarding considerations for prescribing psychotropic medications if the youth is COVID positive. No recommendation made.
- xi. Journey was discussed and a recommendation made and approved to not add this medication to the approved drug list.
- xii. There was some discussion regarding adding language regarding dietary considerations for all medications (as a general statement). This will be on the agenda for the May 2021 PMAC meeting.
- xiii. No other changes recommended.

6. Standing items:

- ❑ Obtaining vitals and laboratory tests and other assessments: deferred.
- ❑ PRN statement in Monitoring Protocol: deferred.
- ❑ PMAC contributions to discussions around implementation of FFPSA: deferred

7. NEW business:

- Review of the Guidelines for Psychotropic Medication Use in Children and Adolescents.
  - Age of assent: A question was raised as to how the age of >8 yrs. old was determined.
8. Other as time allows: Movement disorders were briefly discussed focusing on TD. A question was raised as to if this was ever discussed by PMAC as a separate agenda item.
9. Dr. Rao adjourned the meeting at 2:30PM.

Respectfully submitted: David S. Aresco Consulting Pharmacist