

# CADDRA GUIDE TO ADHD PHARMACOLOGICAL TREATMENTS IN CANADA - NOVEMBER 2022

Medications & Illustrations		Delivery	Duration of action <sup>1</sup>	Starting dose <sup>2</sup>	Release mode Immediate/ Delayed (%)	Dose titration per product monograph <sup>3</sup>
<b>AMPHETAMINE-BASED PSYCHOSTIMULANTS</b>						
First Line	Adderall XR* Capsules 5, 10, 15, 20, 25, 30 mg 	Granules can be sprinkled	~12 h	5-10 mg q.d. a.m.	50/50	▲5-10 mg at weekly intervals Max. dose/day: Children = 30 mg Adolescents & Adults = 20-30 mg
First Line	Vyvanse* Capsules 10, 20, 30, 40, 50, 60, 70 <sup>4</sup> mg Chewable Tablets 10, 20, 30, 40, 50, 60 mg 	Capsule content can be diluted in liquid or sprinkled Chewable tablets should be chewed thoroughly	~13-14 h	20-30 mg q.d. a.m.	Not Applicable (Prodrug)	▲10-20 mg by clinical discretion at weekly intervals Max. dose/day: All ages = 60 mg
Second Line	Dexedrine* Tablets 5 mg Spansules 10, 15 mg 	Scored Tablet Beaded Formulation	~4 h ~6-8 h	Tablets = 2.5 to 5 mg b.i.d. Spansules = 10 mg q.d. a.m.	100/0 50/50	▲5 mg at weekly intervals Max. dose/day: (q.d. or b.i.d.) Children & Adolescents = 20-30 mg Adults = 50 mg
<b>METHYLPHENIDATE-BASED PSYCHOSTIMULANTS</b>						
First Line	Biphentin* Capsules 10, 15, 20, 30, 40, 50, 60, 80 mg 	Granules can be sprinkled	~10-12 h	10-20 mg q.d. a.m.	40/60	▲10 mg at weekly intervals Max. dose/day: Children & Adolescents = 60 mg Adults = 80 mg
First Line	Concerta* Extended Release Tablets 18, 27, 36, 54 mg 	Osmotic-Controlled Release Oral Delivery System (OROS <sup>®</sup> )	~12 h	18 mg q.d. a.m.	22/78	▲18 mg at weekly intervals. Max. dose/day: Children & Adolescents = 54 mg Adults = 72 mg
First Line	Foquest* Capsules 25, 35, 45, 55, 70, 85, 100 mg 	Granules can be sprinkled	~13-16 h	25 mg q.d. a.m.	20/80	▲10-15 mg in intervals of no less than 5 days Max. dose/day: Children & Adolescents = 70 mg Adults = 100 mg
Second Line	Methylphenidate short-acting Ritalin* SR Tablets 5 mg (generic) 10, 20 mg (Ritalin*) Tablets 20 mg 	Scored Tablet Wax Matrix Preparation	~3-4 h ~8 h	5 mg b.i.d. to t.i.d. Adult: 20 mg q.d.	100/0 100/0	▲5-10 mg at weekly intervals Max. dose/day: All ages = 60 mg
<b>NON-PSYCHOSTIMULANT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR</b>						
Second Line	Strattera* (Atomoxetine) Capsules 10, 18, 25, 40, 60, 80, 100 mg 	Capsule needs to be swallowed whole to reduce GI side effects	Up to 24 h	Children & Adolescents: 0.5 mg/kg/day Adults = 40 mg q.d. for 7-14 days	Not Applicable	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
<b>NON-PSYCHOSTIMULANT - SELECTIVE ALPHA-2A ADRENERGIC RECEPTOR AGONIST</b>						
Second Line	Intuniv XR* (Guanfacine XR) Extended Release Tablets 1, 2, 3, 4 mg 	Pills need to be swallowed whole to keep delivery mechanism intact	Up to 24 h	1 mg q.d. (morning or evening)	Not Applicable	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

Illustrations do not reflect actual size of pills/capsules. Longer-acting stimulants tend to have lower abuse potential than shorter-acting formulations. Non-stimulant formulations have no abuse potential.

<sup>1</sup>Pharmacokinetic and pharmacodynamic responses vary from individual to individual. The clinician must use clinical judgment as to the duration of efficacy and not solely rely on reported values for PK-PD and duration of effect. <sup>2</sup>Starting doses in table are taken from product monographs. CADDRA recommends usually starting with the lowest dose available. <sup>3</sup>For specific details on how to start, adjust and switch ADHD medications, clinicians should refer to the Canadian ADHD Practice Guidelines ([www.caddra.ca](http://www.caddra.ca)). <sup>4</sup>Vyvanse 70 mg is an off-label dosage for ADHD treatment in Canada. Original version of this sheet developed by Dr. Annick Vincent in collaboration with Direction des communications et de la philanthropie, Laval University. Access provincial and federal formulary information at [tinyurl.com/uf3mxrl](http://tinyurl.com/uf3mxrl)

