

Lisdexamfetamine - ADHD Shared Care Guideline

Specialist Details

Name: _____
Location: _____
Tel: _____

Patient Identifier

Date: _____

Introduction

Lisdexamfetamine is a CNS stimulant drug used in the treatment of Attention Deficit Hyperactivity Disorder (ADHD). It should only be initiated following assessment and diagnosis by a specialist with expertise in ADHD, as part of a comprehensive treatment plan.

Amber indications: Children of 6 years and over, adults who continue on treatment from childhood, and adults initiated on treatment.

Dosage and Administration

Initially 20 - 30mg once daily in the morning, increased if necessary by 10 - 20mg at weekly intervals, maximum 70mg daily.

Available as: Lisdexamfetamine (Elvanse[®]) 20mg, 30mg, 40mg, 50mg, 60mg and 70mg capsules and Elvanse Adult[®] 30mg, 50mg and 70mg capsules.

If necessary to aid administration the capsules may be opened and the contents dissolved in a glass of water.

Lisdexamfetamine is a schedule 2 controlled drug and is therefore subject to normal controlled drug regulations.

Hospital Specialist Responsibilities

- Diagnose the condition and assess if the patient is suitable for treatment with lisdexamfetamine (as per the pre-drug assessment in NICE guidance including an assessment of cardiovascular status)
- Baseline height (not applicable to adults), weight, BP and heart rate
- Provide patient/carer with relevant information on use, side effects and need for monitoring of medication
- For patients 6 years and over, arrange shared care with the patient's GP
- Provide the GP with relevant information for each patient, including:
 - Treatment to be undertaken by GP (dose, any dosage titrations etc.)
 - Results of baseline investigations and physical monitoring undertaken
 - System of monitoring and recording of progress and side effects
- Monitoring side effects
 - Height, Weight and appetite: Measure and record every six months
 - Heart Rate and Blood pressure: Measure and record every six months and after each dose change
 - Assess for development of tics, psychotic symptoms, anxiety, or seizures
- Monitor response to treatment and need to continue therapy. Advise discontinuation of lisdexamfetamine if no improvement in symptoms is seen after 1 month at the maximum tolerated dose
- Specialist will continue to review the patient at regular intervals sending a written summary to the GP whenever the patient is reviewed
- Provide any other advice or information for the GP if required
- Supervise any discontinuation of treatment or onward referral to adult service if appropriate.

GP Responsibilities

- Prescribe lisdexamfetamine (continued prescribing is appropriate for patients attending specialist review)
- Report concerns with adherence, potential misuse/diversion, signs of alcohol/drug dependence or misuse to the specialist
- Report any adverse events to the specialist, and the usual bodies (e.g. MHRA / CHM).

Adverse Effects, Precautions and Contraindications

Contraindicated in patients with:

- Known intolerance of sympathomimetic amines
- Glaucoma
- Current or recent (within 14 days) treatment with MAOI's
- Agitated states
- Hyperthyroidism
- Symptomatic cardiovascular disease – including moderate to severe hypertension and structural cardiac abnormalities. May be used with caution in patients with certain cardiovascular conditions following individual assessment by a cardiologist.

Use with caution in patients with:

- Mild hypertension
- Motor tics, or family history of Tourette's syndrome
- Epilepsy. If seizure frequency increases, the specialist should discontinue lisdexamfetamine
- Bipolar disease or psychosis
- Renal impairment.

Pregnancy: avoid unless potential benefit outweighs risk.

Breastfeeding: excreted in breast milk - avoid.

Dizziness, nervousness, drowsiness and headaches are commonly experienced upon initiation of therapy. May affect performance of skilled tasks (e.g. driving). Loss of appetite (some weight loss may occur) and insomnia may also occur. These effects are often mild and transient and may be controlled by a reduction in dose

Other adverse effects include: abdominal pain, nausea and vomiting (can be alleviated with concomitant food intake), dry mouth, emotional lability, temporary growth retardation, changes in blood pressure and heart rate, tachycardia, palpitations, dyspnoea, skin rash or itching.

Common Drug Interactions

- Effect of lisdexamfetamine can be decreased by chlorpromazine, haloperidol and lithium
- Concurrent (or recent) use of MAOI's may precipitate hypertensive crisis
- May reduce the effectiveness of guanethidine and other anti-hypertensives.

Communication

For any queries relating to this patient's treatment with lisdexamfetamine, please contact the specialist named at the top of this document.

**This information is not inclusive of all prescribing information and potential adverse effects.
Please refer to full prescribing data in the SPC or the BNF**