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## MOOD STABILIZER MED TRIAL

Child's name:

Person completing this form:

Relation to child:

Year:

Grade:

Dear Parents, Teachers, and Student:

Thank you very much for your help. It is so important to conduct this medication trial in a careful and controlled fashion. Please complete the table below. Your comments in narrative form are also very helpful. On the back, please record the date and describe the following: If there were side effects, at what time did you usually notice this? Do medicine benefits seem to "kick-in" too late or "wear off" too early? General comments about side effects. General comments about benefits. Please call me if you have any questions or concerns. Thank you.

How often did you notice the following? 0=not at all, 1=just a little, 2=often, 3=very often

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## Some mood stabilizers used in the treatment of mood regulation disorders:

- Divalproex sodium (Depakote/ER, Depakene): 250 mg/5 ml; 125,250,500 tabs; 250 caps
- Lamotrigine (Lamictal): chewtab 2,5,25 tabs: 25,100, 150, 200
- Oxycarbezepine (Trileptal): 300 mg/ 5 ml or 150,300,600 mg tabs

Before beginning any medication, parents should have a clear understanding of the diagnosis, purpose of treatment, types of available treatments, "off-label" use of medications which are not specifically approved by the FDA for use in pediatrics, known efficacy of available treatments, known side effects of available treatments, expected outcome with no treatment, expected efficacy of suggested treatment, expected side effects of suggested treatment, confidentiality, emergency procedures, monitoring and follow-up. If they do not feel that they have given informed consent, then they should not administer the medication.

## **DIRECTIONS FOR MEDICATION TRIAL:**

- Adjustments: Side effects tend to happen early, usually within days of each dose change. Although <u>peak benefits</u> happen late, usually after a few months, you may see the <u>beginning</u> <u>of benefits</u> earlier, sometimes even within the first week. After one week at each dose, compare baseline ratings before medication with updated ratings:
  - a. "Looking good": If benefits are optimal (2s and 3s are down to 0s and 1s) and side effects are <u>in</u>significant (numbers on the bottom half of the page have not gone up), then stay with that dose.
  - b. "Too low": If benefits are less than optimal and side effects are <u>in</u>significant, then increase the dose by an amount equal to the starting dose.
  - c. "Hopefully just an adjustment": If benefits are optimal but there are significant side effects, call me. We will probably decrease the dose by 1/4-1/2 the starting dose. Call me again after this adjustment if side effects do not lessen each day.
  - d. "No good": If benefits are less than optimal and there are significant side effects, call me. Remembering that side effects can happen before benefits, we will either decrease the dose by ½ (and give the maximum <u>tolerated</u> dose a chance to work) or just stop and consider trying something else.