


Dosing Recommendations Regarding the Use of Antipsychotic Medication in Children under 6 Years of Age

The use of antipsychotic medications in preschoolers (children under six years of age) is generally “off-label” is not recommended and should only be considered under the most extraordinary circumstances. Disruptive aggression in autism is one such circumstance. Adequately powered studies have not been conducted in preschoolers.

Before considering pharmacological treatment for preschoolers the following guidelines are strongly recommended.

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|  | <p>1. Must have developmentally-appropriate, comprehensive psychiatric assessment with diagnoses, impairments, treatment target and treatment plans clearly identified and documented.</p> |
| | <p>2. Assessment must include evaluation of parental psychopathology and treatment needs, as well as family functioning.</p> |
| | <p>3. Psychosocial treatments should precede the use of psychotropic medications and should continue if medications are prescribed.</p> |

Antipsychotic Dosing Recommendations for Children Under Age 6 (used under rare circumstances)

The dosing recommendations are based on expert opinion and therefore are Level C evidence.

| Drug | Dose |
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| Risperidone (Risperdal) | Starting dose: 0.125 mg/day Maximum dose: 2 mg/day |
| Quetiapine* (Seroquel) | Starting dose: 12.5 mg/day Maximum dose: 25 mg/day |
| Abilify* (Aripiprazole) | Starting dose: 0.5 mg/per day Maximum dose: 2 mg/day |
| *Quetiapine and Aripiprazole carry “black box” warning about suicidal risk in children, teens and young adults. | Note: Seroquel should not be used for sleep |