

## Complex behavior problems in children: treatment options

Use this decision aid to help you and your healthcare professional talk about how to treat complex behavior problems in children between ages 5 and 18. Behavior problems include being unable to control anger, aggression, emotions, hyperactivity, or extreme defiance.

Frequently Asked Questions ↓	Behavioral therapies	Stimulant medications	Non-stimulant ADHD medications	Antidepressant medications	Atypical antipsychotic medications
<b>What does the treatment involve?</b>	Weekly 1-hour visits for 3 to 6 months. You will learn how to improve the relationship and work together to manage behaviors. This will require practice.	After careful evaluation, medication is often used for about 1 year. You will have monthly visits to check for side effects. Ideally, you and your child will also get behavioral therapy.			
<b>What options are offered?</b>	Parent Child Interaction Therapy, Positive Parenting Program, Incredible Years, cognitive-behavioral therapy, and others.	methylphenidate and amphetamine formulations (Concerta, Focalin, Adderall, Vyvanse).	Alpha-agonists: clonidine (Kapvay) and guanfacine (Intuniv). Non-stimulant: atomoxetine (Strattera).	fluoxetine (Prozac), sertraline (Zoloft), citalopram (Celexa), escitalopram (Lexapro), fluvoxamine (Luvox), venlafaxine (Effexor), duloxetine (Cymbalta).	risperidone (Risperdal), quetiapine (Seroquel), ziprasidone (Geodon), olanzapine (Zyprexa) and aripiprazole (Abilify) *antipsychotics only FDA-approved for extreme irritability in autism.
<b>How well does the treatment work?</b>	About 60 in 100 children (60%) have less behavior problems in a few months.	Up to 90 in 100 (90%) of children are less hyperactive and impulsive in a week or less.	About 50 in 100 children (50%) are less hyper, impulsive, and aggressive in a few weeks.	About 50-80 out of 100 children (50-80%) are less moody, sad, anxious, or irritable in a few weeks.	About 80 in 100 children (80%) are less moody and have fewer problem behaviors (80 in 100, 80%) in a few weeks.
<b>What are some problems with this treatment?</b>	Behavior change may take a few months.  Behavioral therapies may not be available in all areas.	<ul style="list-style-type: none"> <li>● 25 in every 100 children (25%) feel less hungry and have worse sleep.</li> <li>● 6 in every 100 (6%) have increased heart rate.</li> <li>● 3 in every 100 (3%). Have increased blood pressure.</li> <li>● Stimulants can reduce growth by 0.3-0.4 inches per year.</li> <li>● 5 -10 in 100 (5-10%) high school students misuse or sell/give away prescribed stimulants.</li> </ul>	<ul style="list-style-type: none"> <li>● <b>Alpha-agonists:</b> 30 in 100 children (30%) feel sleepy. 40 in 100 children (40%) feel dizzy.</li> <li>● <b>Atomoxetine (Strattera):</b> 15 in 100 (15%) have problems falling asleep. 10 in 100 (10%) have increased blood pressure. 10 in 100 (10%) feel sleepy. Rarely, children think about self-harm or about being dead (4 in 1,000 or 0.4%). Very rarely, children have serious liver problems.</li> </ul>	<ul style="list-style-type: none"> <li>● 10 in every 100 children (10%) have sleep problems, feel drowsy, or have trouble waking.</li> <li>● 4 in every 100 children (4%) gain weight.</li> <li>● 4 in every 100 children (4%) think about self-harm or about being dead.</li> </ul>	<ul style="list-style-type: none"> <li>● Most children gain weight, often 8-32 pounds per year.</li> <li>● 60 in every 100 children (60%) feel sleepy.</li> <li>● 30 in every 100 children (30%) have abnormal movements.</li> <li>● 20 in every 100 children (20%) have higher cholesterol.</li> <li>● 3 in every 100 children (3%) have higher blood sugar levels.</li> <li>● <b>Risperidone (Risperdal):</b> 40 in every 100 children (40%) have higher levels of the hormone prolactin.</li> </ul>
		Side effects may go away quickly. Long-term side effects are unknown. Ask about FDA approvals.			