

**PREVALENCE OF PSYCHOTROPIC MEDICATION RX IN A NATIONAL SAMPLE OF SCHOOL-AGE BOYS SEEN FOR WELL-CHILD CARE** Richard Wasserman, MD<sup>1,2</sup>; Jennifer Steffes, MSW<sup>1</sup>; Donna Harris, MA<sup>1</sup>; Eric Slora, PhD<sup>1</sup>; and Marcia Herman-Giddens, DrPH<sup>3</sup>. (Sponsored by Richard Wasserman,) <sup>1</sup>Pediatric Research in Office Settings (PROS), American Academy of Pediatrics, Elk Grove Village, IL, United States; <sup>2</sup>Department of Pediatrics, University of Vermont, Burlington, VT, United States; and <sup>3</sup>Department of Maternal and Child Health, University of North Carolina School of Public Health, Chapel Hill, NC, United States.

**Background:** A variety of reports from diverse samples suggest that psychotropic medications are being prescribed in increasing amounts in children. Few reports have been made on national samples of children seen for well-child care (WCC).

**Objective:** To determine the prevalence of psychotropic medication prescription in school-age boys presenting for WCC.

**Design/Methods:** As part of a study on the emergence of puberty, data on chronic medication treatment (defined as medication taken on a regular basis for 3 consecutive months within the last year) were obtained on consecutive boys 6-16 years of age being seen for WCC. Subjects were recruited from 46 practices (in 29 states) enrolled in Pediatric Research in Office Settings (PROS), the national practice-based research network of the AAP. Practices were urban, non-inner city (37%), suburban (33%), rural (17%), and urban, inner city (13%).

**Results:** Of the total sample of 1843 boys, 425 (23.1%) were taking a chronic medication; 10.6% had one or more psychotropic medications prescribed, with 2.0% taking multiple psychotropic medications. Stimulants were the most commonly prescribed medication class (7.9% of the boys in the sample), followed by atypical antipsychotics (1.5%), selective norepinephrine reuptake inhibitor (1.4%), antidepressants (1.1%), and mood stabilizers (0.4%). Among those taking multiple psychotropic medications, the most common combinations were stimulant + second stimulant (5 patients), stimulant + atypical antipsychotic (5 patients), and stimulant + mood stabilizer (3 patients). Boys on psychotropic medications were significantly older (mean 12.0 years vs 11.5,  $p < .001$ ), more likely to be white/non-Hispanic than a member of a minority group (13.3% vs 6.8%,  $p < .001$ ), on Medicaid (18.1% vs 8.5%,  $p < .001$ ), and more likely to be living in the Midwest versus another region (18.2% vs 8.8%,  $p < .001$ ).

**Conclusions:** These results suggest that 1) psychotropic medications comprise a substantial proportion of chronic medications taken by school age boys being seen for WCC; 2) one boy in 50 from this sample is taking more than one psychotropic medication; 3) atypical antipsychotics, many of which have undergone limited testing in this population, comprise a substantial proportion of the medications prescribed; and 4) demographic and regional variations in prescribing that have been described previously, persist in this current sample.