

Rise in Psychotropic Drug Prescribing in Children in the UK

An Urgent Public Health Issue

The use of psychotropic medications in children has been featured frequently in the mass media in the UK recently,^[1,2] particularly since the UK Committee on Safety of Medicines (CSM) has issued two warnings on two new antidepressants within a 3-month period^[3] and methylphenidate has been reported to be sold in playgrounds in the north of England.^[1] Unfortunately, very little research in the use of psychotropic medications in children has been conducted because pharmaceutical companies are reluctant to invest in a relatively small market.^[4] Studies in the US have shown that the use of such medications has increased considerably in recent years.^[5] However, such studies have not been conducted in the UK.

For the above reason, we used the IMS HEALTH Medical Data Index to examine the trends for prescribing psychotropic medications in different age groups for the period 2000–2002 in the UK. In the UK, most general practitioners use computer systems for patient management, particularly in prescribing. The Medical Data Index is an audit drawn from the de-identified computer records of 500 general practitioners. Regional projection factors, based on the number of sample doctors in each region, as a proportion of the total number of doctors in each region are used. The resulting figures are then adjusted to reflect the UK total, based on ongoing comparisons with prescription data sources. The

psychotropic medications investigated include antidepressants, stimulants, antipsychotics and benzodiazepines and other anxiolytics. We calculated 95.5% probability and percentage of increment per year in each age group. The results are shown in table I.

From table I, we can see that the number of psychotropic prescriptions has increased significantly within the last 3 years in both adults and children. However, the majority of psychotropic medications are not currently licensed for use in children and adolescents due to lack of clinical studies; therefore, very little information is available for evidence-based prescribing. This is certainly a public health issue that needs to be tackled urgently.

In 2002, our research team received an interesting comment from a funding body. One of their referees believed there was no evidence that children were experiencing more harm than adults because of a lack of research into paediatric medications; therefore, there was no need to fund an adverse drug reaction monitoring study in children using psychotropic medications. This comment seemed to be logical; however, it was flawed. Lack of evidence could simply be due to insufficient research on the safety of these medications. Subsequently, two new antidepressants were reported to be associated with suicide in children.^[3] These two examples have shown that such belief is flawed.

As the trend of prescribing psychotropic medications in children is likely to continue to rise, we would urge funding bodies and pharmaceutical companies to put paediatric psychotropic medications research as a higher priority. Children deserve equal rights with adults in receiving evidence-based treatment.

Table I. Estimated number of psychotropic prescriptions in the UK in the period 2000–2002

Age group (y)	Estimated no. prescriptions (thousands)/year (95.5% probability)			% of increment between years		
	2000	2001	2002	2000–2001	2001–2002	2000–2002
0–12	210 (±9)	270 (±10)	322 (±12)	28	19	53
13–17	225 (±9)	348 (±13)	411 (±13)	55	18	83
0–17	435 (±14)	617 (±16)	733 (±18)	42	19	68 ^a
>17	39 591 (±237)	56 125 (±336)	58 851 (±353)	42	5	48 ^a

a Chi-square test showed that the increase in the 0–17-year age group is significantly higher than the increase in the >17-year age group ($p < 0.0000001$).

Ian C.K. Wong

The School of Pharmacy, University of London,
London, United Kingdom
Institute of Child Health, University College
London, London, United Kingdom

Doreen Camilleri-Novak

The School of Pharmacy, University of London,
London, United Kingdom

Peter Stephens

VP Public Health Affairs Europe, IMS Health,
London, United Kingdom

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Correspondence and offprints: Dr *Ian C.K. Wong*, The School of Pharmacy, Centre for Paediatric Pharmacy Research, University of London, London, WC1N 1AX, UK.
E-mail: ian.wong@ulsop.ac.uk