

10 ADHD Medication Mistakes Even Doctors Make

If your doctor starts lecturing you about the "average dose of Adderall," share these ADHD medication rules she might not know — but should — to minimize symptoms and optimize your treatment plan.

by Gina Pera

Get Informed

Many adults still encounter professionals whose knowledge of medication management is spotty, including psychiatrists who claim special expertise. Be a smart health-care consumer, and learn as much as you can about any medication before you start taking it. In the meantime, if your prescribing physician makes any of the following 10 statements, it might be time to talk things over or find a new doctor.

My adult ADHD patients do best on this stimulant medication.

Physicians who "play favorites" with stimulants don't have a proven basis for doing so, and are gambling with your chances of success. Each of the two major classes of stimulant medications (methylphenidates and amphetamines) can work for some ADHD patients but have no effect on others. There's no way to predict how you'll respond to each class until you try it.

For an adult of your height and weight, we start with this dosage.

An optimal dosage of ADHD medication is not related to a person's height or weight.

This is an average starting dose.

There is no "average starting dose." The choice depends on many factors, including your history of taking stimulants, genetic differences, co-existing conditions, and the severity of your symptoms. The brain is complex, and results differ from person to person.

We'll increase the dosage to 10 mg in two weeks.

Just as a professional cannot predict which medication will work best, or at which starting dose, he also can't predict an optimal dosage goal. The optimal dosage is identified by a method called titration: carefully increasing the dosage over time, until side effects outweigh benefits, and then dialing down to the previous dosage.

How's the medication working out for you?

Judging a medication's effectiveness takes more than just asking how you're doing. It requires taking careful inventory of challenges you faced before starting medication and regularly reviewing as treatment progresses, tracking improvements or side effects. During titration, experts recommend talking with your doctor weekly and scheduling in-office visits every three to four weeks.

You should see a huge improvement in symptoms right away.

Research tells us a lot about overall stimulant efficacy, but we cannot tell how it will affect any one individual. Any potential positive effects shouldn't be oversold. True, some symptoms may improve dramatically in days, or even in hours. But it's important to wait to judge the full effect, because it can take some time for all the data to accrue.

If the stimulant disrupts your sleep, we'll have to switch you to a nonstimulant.

Sleep problems among ADHD patients are multi-faceted and poorly understood by most doctors. Increasingly, research points to neurophysiological differences in circadian rhythm, the inner biological clock that tells us when to sleep. Some people with ADHD sleep better on stimulants, which stop "brain noise" and increase focus on going to sleep.

Sure, continue consuming caffeine, if you like.

Many ADHD adults have lifelong love affairs with coffee or caffeinated sodas. Yet caffeine may exacerbate the effect of stimulant medications, creating anxiety and heart palpitations. You can't determine what's causing these side effects -- the stimulant or the caffeine -- unless you gradually wean yourself off caffeine before starting stimulants.

If you have high blood pressure, you can't take stimulants.

ADHD adults should have a thorough physical and have their blood pressure checked before beginning any new medication. But the idea that hypertension precludes taking ADHD medication is a myth. In fact, there are medications for ADHD that lower blood pressure -- like guanfacine -- that can be used as an alternative to, or in conjunction with, stimulants.

If you think the stimulant has stopped working for you, maybe we should try something else.

Perhaps the stimulant stopped working for neurobiological reasons, or maybe you just forgot what life was like before you started it. After a few weeks of experiencing the "novelty" of improved symptoms, it's easy to forget how far you've come. Keeping written records of your progress is the best way to know if the med is working.

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