New Trends in Child Psychiatry

Catherine Madden, MD
Child Psychiatrist - Children’s Mercy
Assistant Professor
UMKC School of Medicine
New Trends in Child Psychiatry

• New diagnostic classifications from DSM 5

• New medications used in children
DSM 5

• Published in 2013 by the American Psychiatric Association after an 8 year process
• Revision from *DSM IV* published in 1994
• DSM 5 Eliminated “multiaxial” diagnosis
• 13 New, 2 Eliminated, 28 Combined diagnoses
DSM 5 Additions

• Disruptive Mood Dysregulation Disorder (DMDD)
  – 3 tantrums per week
  – Angry, depressive mood in between episodes
  – Present for at least 1 year in a pt older than 6 and must start by age 10
DSM 5 additions

• Binge Eating Disorder

• Disinhibited Social Engagement Disorder

• Social (Pragmatic) Communication Disorder
Intellectual Disabilities

- New name for mental retardation
- Criteria still requires standardized psychological testing
- Greater emphasis on adaptive functioning than in the past
- Elimination of the number alone dictating level of severity
• Categories in DSM IV were inconsistently applied, had no prognostic or treatment differences.
• New diagnosis is wordy but highly descriptive.
• Levels of support needed are outlined in DSM 5 but are subjective.
DSM 5 Autism

• Asperger, PDD-NOS, and Autistic Disorder combined to make *Autism Spectrum Disorder*

• Specifiers are used to better define this large category

• Example: *Autism Spectrum Disorder with language and intellectual impairments associated with Rett Disorder, level 3 supports for social communication and level 2 for behavior*
New medications for kids

- ADHD-Quillivant®
- Depression: Viibryd®
- Bipolar Disorder/Irritability: Latuda®, Fanapt®, Saphris®
Quillivant®

• A new sustained release form of methylphenidate
• The same active ingredient as Ritalin® and Concerta®
• Liquid preparation makes it unique
• 25mg per 5 ml (5mg/ml)
• 20% IR MPH 80% Delayed Release
Viibryd®

- Active ingredient is vilazodone
- Partial agonist of 5HT 1A
- Not indicated in pediatric patients
- Available brand only
- Activation and sexual dysfunction are possible side effects
Latuda®

- Active ingredient is lurisadone
- A new Second Generation Antipsychotic (SGA)
- FDA indicated in adults for Schizophrenia, Bipolar Disorder and BPAD with Depression
- Must be taken with 350 calorie meal
Fanapt®

• Active ingredient is iloperidone
• A new Second Generation Antipsychotic (SGA)
• No FDA indications in pediatrics
• Appears rarely used in KC Area
Saphris®

- Active ingredient is asenapine
- A new Second Generation Antipsychotic (SGA)
- Dose form is an orally dissolving tablet that must absorb in the mouth. No eating or drinking for at least 10 minutes after taking Rx.