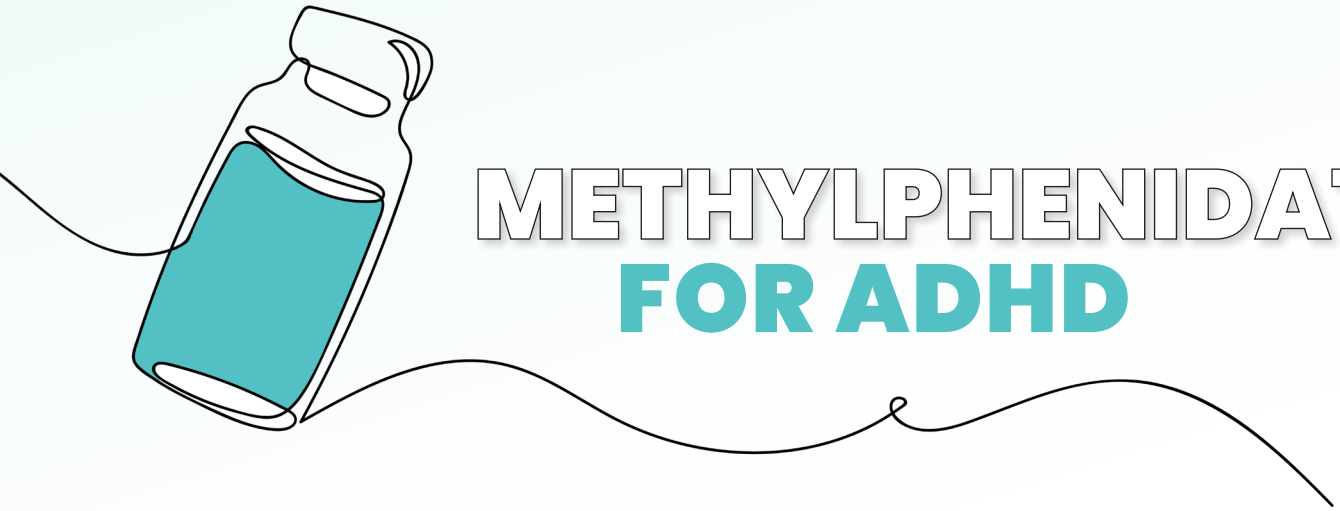
aadpa | **ADHD** INFORMATION GUIDE



METHYLPHENIDATE FOR ADHD

This guide is for individuals, parents, and carers. It explains how methylphenidate is used to manage ADHD.

Always follow your doctor's instructions and check the Consumer Medicines Information (CMI) for full details on side effects.

WHAT IS METHYLPHENIDATE?

Methylphenidate is a **psychostimulant medication** used to treat:

- **ADHD** – improves attention, reduces impulsivity and hyperactivity.
- **Narcolepsy** – helps with excessive daytime sleepiness.

Common brand names (Australia & NZ):

- **Immediate Release (IR)**: Ritalin (AU/NZ), Artige (AU), Rubifen (NZ)
- **Modified Release (MR)**: Ritalin LA (AU/NZ), Rubifen SR (NZ), Concerta OROS (AU/NZ), Methylphenidate Teva XR (AU/NZ)

TIPS BY FORMULATION

FORMULATION		CAN CRUSH/SPRINKLE?		DURATION	NOTES
Ritalin/Artige/Rubifen	IR	✔ YES	Can crush & mix with food	~3–4 hrs	• May taste bitter • Contains gluten & lactose
Ritalin LA/Rubifen LA	Capsule	✔ YES	Open & sprinkle beads	~6–8 hrs	• Don't chew beads; • Avoid fatty foods
Rubifen SR	Tablet	✗ NO	Swallow whole	~6–8 hrs	• Don't crush • Avoid fatty foods
Concerta OROS	Caplet	✗ NO	Swallow whole	~8–10 hrs	• Shell may appear in stool (this is normal)

KEY POINTS

- ✔ Stimulants are **not addictive** when used as prescribed
- ✔ Safe to stop suddenly, but ADHD symptoms will return
- ✔ Some take '**medication holidays**' (weekends/holidays) – discuss with your doctor
- ✔ Starting medication is a **trial** – aim for best symptom control with fewest side effects
- ✔ Keep a **daily log** of appetite, sleep, mood, and focus to help adjust dose

HOW DOES IT WORK?

- Increases dopamine and noradrenaline in brain areas controlling attention, planning, memory, and impulse control
- Improves communication between brain cells, reducing ADHD symptoms

HOW TO TAKE METHYLPHENIDATE

- **IR:** usually 2–3 times daily
- **MR:** once daily, usually in the morning
- Starts working in **30–60 minutes**
- Take with or after food to reduce nausea or appetite loss
- Treatment usually begins at a low dose and increases gradually. Doctors may start with IR, then adjust or switch to longer-acting versions.
- Finding the right dose can take **6–8 weeks**.

REMEMBER ▶ *Medication is only one part of ADHD management.*

MEDICATION SAFETY & MONITORING

- Store securely, ideally in a locked cupboard
- Only the prescribed person should take it
- Regular check-ups monitor:
  - Response to treatment
  - Height, weight, heart rate, blood pressure
  - Sleep, appetite, mood, and behaviour
- If overdose or accidental ingestion occurs, call the Poisons Information Line and seek emergency care.

POSSIBLE SIDE EFFECTS

VERY COMMON (>1 IN 10):

- Headaches (often settle in 4–6 weeks).
- Reduced appetite (usually returns in evening).
- Trouble sleeping (avoid late doses; use good sleep habits).
- Mood swings — children may feel teary or irritable when medication wears off (commonly in the afternoon). Tend to resolve over the first 4-6 wks of treatment.

COMMON (<1 IN 10):

- Nausea, stomach pain.
- Anxiety, dizziness, fast heart rate.
- Tics (not caused by medication but may fluctuate).
- Sore throat or blocked nose.

UNCOMMON — SEE YOUR DR IF NOTICED:

- Mood changes (aggression, depression).
- Hallucinations.
- Palpitations.
- Bed wetting.
- Excess sweating, numbness/tingling, or Raynaud's.
- Slowed growth (monitor height/weight).

SEEK URGENT HELP IF:

- Allergic reaction (swelling of face/lips/tongue).
- Severe chest pain or rapid heartbeat.
- Suicidal thoughts.
- Seizures.
- Prolonged painful erection (priapism).

HELPFUL RESOURCES

LINKS

AUSTRALASIAN ADHD PROFESSIONALS ASSOCIATION (AADPA)

AADPA – LIVED EXPERIENCE RESOURCES

HEALTH DIRECT – ADHD

NPS MEDICINEWISE

ADHD NZ

UNDERSTOOD.ORG

BEYOND MEDICATION

ADHD is best managed with a multimodal approach, combining:

- Education about ADHD
- Supportive environments (routines, reminders)
- School strategies (accommodations, teacher support)
- Parenting strategies (consistency, behaviour guidance)
- Therapy (behavioural or psychological)
- Workplace adjustments (clear expectations, structure)

EMOTIONAL WELLBEING

Starting medication can bring relief, but also uncertainty or grief, especially with late diagnosis. These feelings are normal. Talking with a psychologist or peer support group can help.