

# Psychotropic Medication Review

## Introduction

This tool can assist clinicians in systematic and timely reviews of psychotropic medication prescribed to adults with intellectual and developmental disabilities (IDD). Psychotropic medications can be inappropriately or overprescribed in adults with IDD. This tool helps identify the benefits of these medications, atypical responses, side effects, adverse reactions, potentially unnecessary medications, or unwanted effects even at low doses.

## How to use this tool

The key question in reviewing psychotropic medication is: *is the medication appropriate*, i.e., indicated for psychiatric conditions or symptom clusters? Antipsychotics, in particular, are associated with adverse side effects that can impair quality of life and lead to harmful health outcomes. Regular prescription of PRN (as needed) medication to manage difficult behaviors can be misused and experienced as traumatizing. If medication indications or psychiatric diagnoses are unclear, refer to a specialist with IDD, which can be difficult to find, or consider cautious, watchful deprescribing.

Adults with IDD might be unable to communicate harmful or distressing side effects other than through changes in their behaviors. Review appropriateness of medication and reasons for prescribing when a change in behaviors presents.

Together with family/support persons, always identify target symptoms and behaviors to be monitored for medication efficacy. See [Identifying Symptoms and Sign of Mental Distress](#).

When considering deprescribing medication for behavior concerns, review current supports (e.g., environment, interpersonal, social supports) and the need for introducing possible non-pharmacological interventions.

## Review prescribing indications

Psychotropic medication reviews are a means of periodic monitoring for medication prescribing issues including indications, dosages, efficacy, and side effects (e.g., every 3-12 months). Use this tool to review prescription of psychotropic medication:

- for psychiatric disorders and mental health conditions for which the medications are licensed;
- as a trial of medication for suspected psychiatric condition or symptom cluster (e.g., depressed mood and decreased eating);
- for behavior issues;
- as part of a medication reduction plan (e.g., withdrawal of psychotropic medication originally prescribed for behavior issues).

## Partner with patients and family/support persons

Provide patients and family/support persons an opportunity to discuss questions about medication. Determine capacity and need for supports for decision and managing medications. See [Decision Making in Health Care of Adults with IDD: Promoting Capabilities](#). If the medication is deemed effective due to sedation, have a discussion with family and support persons about the restraining nature of this practice.

## Advocate

Prescribing of psychotropic medication other than for a psychiatric diagnosis is off-label. Therefore, consider carefully the reasons and consent for such prescribing decisions. Clinical care may be ineffective if crucial health and developmental services and supports are not available. Advocate and engage with those responsible for the health, social care, and safety of people with IDD when psychotropic medication is being used to manage distressing behaviors, rather than addressing underlying causes, or when it is used as a substitute (e.g., through sedation) for necessary assessments, other interventions, and preventive supports.

## Medication for distressing behaviors

If medication has been prescribed for concerns about behavior and safety, do a [Risk Assessment for Adults with IDD in Crisis](#) first.

# Psychotropic Medication Review

<b>Patient name:</b>		<b>Date of Birth:</b>
First	Last	

<b>Review date:</b>	<b>Date of last review:</b>
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<b>Current psychotropic medications (list all):</b>	<b>Medication being reviewed:</b>

## MEDICATION PRESCRIBED FOR PSYCHIATRIC DISORDER OR MEDICATION TRIAL FOR SYMPTOM CLUSTER

- Has the patient been given a psychiatric diagnosis? (Excluding IDD and autism diagnoses) Yes No Unsure
  - If yes, by whom:
    - Specialty:
    - Date of diagnosis:

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- Is the medication appropriate for given diagnosis? (Excluding IDD and autism developmental diagnoses) Yes No Unsure
  - If No or Unsure, if possible, consider referral to specialists with IDD expertise; consider cautious, watchful deprescribing.

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- Is the medication being prescribed as a trial for a cluster of symptoms and signs? Yes No  
 See: [Identifying Symptoms and Signs of Mental Distress in Adults with IDD](#).
  - If Yes, describe the symptoms and signs:
 

Mood related	Anxiety related	Psychotic related
Other:		
  - Have these symptoms and signs improved in three months since first prescribed? Yes No
    - If No, deprescribe and consider other options.  
 See: [The Frith Prescribing Guidelines for People with Intellectual Disability](#).

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- Is the cluster of symptoms and signs linked to adjustment-related disorders, or excessive reactions to stress or events that are much more intense than would typically be expected. Yes No Unsure
  - If Yes, refer for psychological therapies adapted to developmental needs, if such resources are available in your area.
  - If Unsure, identify possible life event(s) contributing to the adjustment distress.

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- Is the cluster of symptoms and signs linked to trauma-related disorders? Yes No Unsure
  - If Yes or Unsure, make sure the patient is safe, refer for psychological support or therapy adapted to developmental needs, and, if possible, provide support to staff in providing trauma-informed care. Refer for further assessment as needed (e.g., psychology, social work, trauma-informed psychiatry).

## MEDICATIONS PRESCRIBED FOR BEHAVIORS

6. If the patient does not have a psychiatric diagnosis or a cluster of symptoms and signs and medications are being used for behavior concerns, are guidelines for distressing behaviors being followed? See: <a href="#">HELP with Emotional and Behavioral Concerns in Adults with IDD</a> .	Yes	No	
7. As severity of IDD, co-existing autism, and social-emotional functioning are associated with distressing behaviors, review:			
a. Is level of IDD known?	Yes	No	Unsure
b. Does the patient have autism?	Yes	No	Unsure
c. Are the patient's social-emotional functioning and needs understood?	Yes	No	Unsure
▶ If No or Unsure to 7a, 7b, or 7c, review available reports and refer for assessment as needed (e.g., psychologist).			
8. Is referral to an interdisciplinary team, if available, working with client, family and support persons, warranted to assess the behavior concerns for which the medication is prescribed?	Yes	No	
▶ If yes, specify behaviors of concern:			
▶ If no specialist team is available, refer for assessment(s) as needed to:			
Medicine			Occupational therapy/sensory integration
Vision or hearing specialists			Speech language therapy
Behavior therapy			Nursing
Psychology			Psychiatry with specialization in IDD, if available
Psychotherapy			Other:
9. a. Is the medication for behavior concerns causing sedation?	Yes	No	
b. Are there other side effects that are restricting the patient's activities or quality of life? Specify side effects:	Yes	No	
▶ If Yes, consider deprescribing.			

## FOR ALL PSYCHOTROPIC MEDICATIONS PRESCRIBED

### Target symptoms and signs

10. a. Together with patient and family/support persons, have target symptoms and behaviors been identified against which to monitor medication effectiveness?	Yes	No	
▶ If Yes, specify target symptoms and behaviors:			
b. Is there a plan to monitor these target symptoms and behaviors objectively and systematically?	Yes	No	
c. Is there a plan for regular review of medication and target symptoms and behaviors?	Yes	No	

### Psychotropic prescribing issues.

If unsure in this section, see *The Frith Prescribing Guidelines for People with Intellectual Disability*.

11. Has an appropriate medical assessment been done for the purpose of prescribing and monitoring?	Yes	No	Unsure
12. Is the patient being monitored for psychotropic medication side effects and adverse events (e.g., CNS, sedation, extrapyramidal, anticholinergic, cardiovascular, metabolic, endocrine, others related to the specific medication)?	Yes	No	

13. a. Are psychotropic medications indicated based on current diagnostic formulation?	Yes	No
b. Are psychotropic medications effective?	Yes	No
c. Are there adverse effects or significant burden from psychotropic medications (side or adverse effects, polypharmacy)?	Yes	No
▶ If there are questions, refer to a specialist (e.g., psychiatrist with experience in IDD if available in your area.)		
14. Are medications being changed too rapidly (e.g., emergency department prescriptions, sudden discontinuation)?	Yes	No
15. a. Are PRN or “as needed” psychotropic medications being prescribed?	Yes	No
b. Are PRN or “as needed” medications being audited with family/support persons as to their use?	Yes	No
c. Are PRN or “as needed” medications running out before the refill date?	Yes	No
▶ If yes, please specify:		
16. As evidenced by target symptoms and behavior concerns (since last review):		
a. Is medication effective for prescribing indication (a) psychiatric disorder?	Yes	No
b. Is medication effective for prescribing indication (b) medication trial/cluster of symptoms and signs?	Yes	No
c. Is medication effective for prescribing indication (c) behavior concerns?	Yes	No
▶ If Yes, to any prescribing indication (17a, 17b, 17c):		
d. Is the individual sedated, or has lost skills or enjoyment?	Yes	No
e. Are there any apparent adverse side effects of medication on physical and mental well-being?	Yes	No
▶ If Yes to 17d-e, discuss risks, burden, and benefits with patient or substitute decision-maker; consider deprescribing.		
Before deprescribing, engage with family/support persons to ensure interpersonal and social supports and environments are tailored to level of IDD, autism, social-emotional functioning and needs.		
See: <a href="#">Mental Health Interventions</a>		

**Capacity and consent**

17. a. Is this patient capable with respect to this specific treatment decision? See: <a href="#">Decision-Making of Adults with Intellectual and Developmental Disabilities: Promoting Capabilities</a> for essential parameters of decision-making.	Yes	No
b. If capable, has he/she given consent?	Yes	No
c. If not capable, has consent been obtained from the substitute decision-maker?	Yes	No

**CONCLUSIONS AND ACTION PLAN**

Consider: appropriateness, effectiveness, and side effects of medication; consent; need for assessment and additional non-pharmacological supports.

<b>Date next review:</b>
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## Supporting materials

- i. Risk Assessment for Adults with Intellectual and Developmental Disabilities**  
Health Care for Adults with Intellectual and Developmental Disabilities  
[iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/risk-assessment/](http://iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/risk-assessment/)
- ii. Identifying Symptoms and Signs of Mental Distress in Adults with Intellectual and Developmental Disabilities**  
Health Care for Adults with Intellectual and Developmental Disabilities  
[iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/psychiatric-symptoms-and-behaviors-screen](http://iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/psychiatric-symptoms-and-behaviors-screen)
- iii. HELP with Emotional and Behavioral Concerns in Adults with Intellectual and Developmental Disabilities**  
Health Care for Adults with Intellectual and Developmental Disabilities  
[iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/help-with-emotional-and-behavioral-concerns](http://iddtoolkit.vkcsites.org/behavioral-and-mental-health-issues/help-with-emotional-and-behavioral-concerns)
- iv. Mental Health Interventions for Adults with Intellectual and Developmental Disabilities.**  
Health Care for Adults with Intellectual and Developmental Disabilities  
[iddtoolkit.vkcsites.org/mental-health-interventions/](http://iddtoolkit.vkcsites.org/mental-health-interventions/)
- v. Decision-making in Healthcare of Adults with Intellectual and Developmental Disabilities: Promoting Capabilities**  
Health Care for Adults with Intellectual and Developmental Disabilities  
[iddtoolkit.vkcsites.org/decision-making](http://iddtoolkit.vkcsites.org/decision-making)
- vi.** Bhaumik S, Branford D, Barrett M, Gangadharan SK, editors. *The Frith Prescribing Guidelines for People with Intellectual Disability*. 3rd ed. Chichester, West Sussex ; Hoboken, NJ: John Wiley & Sons Inc.; 2015.

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