



Medication Audit Criteria and Guidelines

Clonidine (Catapres® [DSC]), Clonidine ER (Kapvay®), Guanfacine (Tenex® [DSC]), Guanfacine ER (Intuniv®)

PEFC Approved: April 2023

Indications

If a medication is prescribed for an off-label indication, documentation in the patient chart is recommended.

Label:

- Monotherapy, adjunctive therapy to stimulants in children and adolescents with ADHD (Kapvay, Intuniv)

Off Label:

- Attention deficit/hyperactivity disorder (clonidine IR, guanfacine IR)
- Symptoms related to opioid withdrawal (clonidine)
- Treatment of Tourette's syndrome or chronic tic disorders (clonidine and guanfacine)

Black Box Warning

None

Contraindications

- Hypersensitivity to medication prescribed

Warnings and Precautions

- Hypotension/bradycardia—caution in patients with hypotension, conditions worsened by hypotension and bradycardia (e.g., heart block, bradycardia, cardiovascular disease, vascular disease, cerebrovascular disease, chronic renal failure)
- Syncope or history of syncope—avoid dehydration, caution with concomitant use of antihypertensives/other medications that reduce blood pressure or heart rate
- Sedation, somnolence—avoid use with alcohol

- Rebound hypertension—avoid abrupt discontinuation. Children especially at risk because of GI illness/vomiting and resultant inability to take oral medication
- Allergic reactions--patients who develop localized contact sensitization to clonidine transdermal system may develop generalized skin rash with continuation of transdermal system or switch to oral Kapvay (clonidine)
- Cardiac conduction abnormalities—caution with concomitant use of other sympatholytic drugs

Adverse Reactions

Side Effects Which Require Medical Attention

- Hypotension
- Bradycardia
- Abdominal pain
- Constipation
- Nausea
- Depression
- Difficulty in breathing
- Extreme dizziness
- Sedation and somnolence
- Sodium and water retention or edema (clonidine)
- Raynaud’s phenomenon (clonidine)
- Vivid dreams or nightmares

Drug Interactions of Major Significance

- Strong and moderate CYP3A4/5 inhibitors increase guanfacine exposure. Decrease Intuniv® to 50% of target dosage when coadministered with strong and moderate CYP3A4 inhibitors.
- Strong and moderate CYP3A4 inducers decrease guanfacine exposure. Based on patient response, consider titrating Intuniv® dosage up to double the target dosage over 1 to 2 weeks.

See: [Indiana Univ Drug Interaction Table](#)

See: Lexicomp, Micromedex for more information

Special Populations

- Pediatrics/Adolescents:
 - ▶ See Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health (6th version) for specific details
- Geriatric:
 - ▶ Included in Beers Criteria

- Renal:
 - ▶ Clonidine IR – may benefit from lower initial dose, monitor carefully
 - ▶ Clonidine ER – adjust initial dose according to degree of renal impairment, monitor carefully for hypotension and bradycardia
 - ▶ Guanfacine IR – start at low end of dosing range
 - ▶ Guanfacine ER – dosage adjustment may be necessary
- Hepatic:
 - ▶ Clonidine – no specific recommendations
 - ▶ Guanfacine – dosage adjustment may be necessary
- Pregnancy and Breastfeeding
 - ▶ Review product-specific labeling

Patient Monitoring Parameters

Baseline Tests:

- Blood pressure and heart rate
- Personal and family cardiovascular history

Ongoing Tests:

- Blood pressure and heart rate—following dose increases and as clinically indicated
- Personal and family cardiovascular history

Dosing

- See HHSC Psychiatric Drug Formulary for dosage guidelines.
- If a medication is prescribed at dosages in excess of the Psychotropic Dosage Guidelines found in the HHS Psychiatric Drug Formulary, documentation in the patient chart is recommended.