Methylphenidate (say: me-thile-fenny-date)

What is methylphenidate used for?

- Methylphenidate is mainly used to help treat the symptoms of ADHD (Attention Deficit Hyperactivity Disorder) and sometimes narcolepsy
- It is made as plain tablets (e.g. Medikinet®) and long-acting tablets and capsules (e.g. Concerta XL®, Medikinet® XL, Xenidate XL®, Matoride XL®, Xaggitin XL®, Equasym XL®, Addepta XL®, Delmosart PR®, Ritalin XL®)
- There is also a liquid, made as a special order.

☞ For ADHD, about 2 in 3 (70%) of people's symptoms improve with methylphenidate
☞ If that doesn't work or it has too many side effects, then switching to lisdexamfetamine means about half of those people get better (total of about 85%, or 3 in 4 people).

What is the usual dose of methylphenidate?

- The usual dose of methylphenidate is around 30-40mg a day (depending on your weight) but it can often be much higher in adults e.g. up to 70mg a day or more
- Medikinet XL® can be up to 80mg a day.

How should I take methylphenidate?

- Swallow the tablets or capsules with at least half a glass of water whilst sitting or standing so they do not get stuck in your throat
- If you see what looks like a capsule/tablet in your poo do not worry. These are empty
- For the liquid, shake the bottle, then carefully measure using a medicine spoon or oral syringe.

When should I take methylphenidate?

Plain tablets and liquid:

- Try to take them at regular times each day, but make sure the last dose is no later than teatime
- They can be taken with or after food.

Long-acting (XL) tablets or capsules:

Once a day in the morning is best, to make sure it doesn't make it even harder for you to fall asleep

- Concerta XL®, Xenidate®, Xaggitin XL® and Matoride® are usually taken before, with or after breakfast
- Medikinet® XL, Metyrol XL®, Meflynate XL® - usually morning, with or after breakfast. It's morning and lunchtime for adults. It can also be sprinkled on yoghurt and eaten.
- Equasym® XL, Exattent®, Addepta® - take <u>before</u> breakfast.

How long will methylphenidate take to work?

- Usually within 1-2 hours of a dose
- The effect then builds over the next few weeks.

How long will I need to keep taking it for?

- Probably for several years and it works much better if taken regularly for at least 2 years
- It should be reviewed at least once a year by your specialist – how you feel on days when you don't have a dose is very helpful.

What are the alternatives to methylphenidate?

- There are other medicines (e.g. atomoxetine, lisdexamfetamine, dexamfetamine, guanfacine), talking therapies and treatments for ADHD.

☞ See our "Handy chart" for ADHD to help you compare the medicines available and how long to take them
☞ This will help you talk to your prescriber, nurse, pharmacist or other healthcare professional.

Is methylphenidate addictive and can I stop taking it suddenly?

- Methylphenidate is a stimulant drug
- At smaller doses, it can be stopped suddenly and sometimes each weekend if that is what you have agreed with your prescriber
- At higher doses, it is possible that 'withdrawal' effects might be seen. These would include extreme tiredness, rebound hyperactivity, increased appetite and depression
- If this happens then starting methylphenidate again would get rid of these effects
- When the time comes, you should come off it by a gradual drop in the dose over several weeks
- It normally works out much better stopping in a planned way at a time when your stress levels are lower, rather than e.g. around life events
- Discuss this with your prescriber, nurse or pharmacist.

See our handy fact sheet on 'Coming off Medicines'
There is little evidence that taking methylphenidate will lead to someone to take illicit drugs when they are older. In fact the opposite may be true as the person will not try to self-medicate with illicit drugs to manage symptoms.

What should I do if I forget to take a dose of methylphenidate at the right time?

- If you are taking the long-acting tablets or capsules, taking a dose more than a few hours late may mean it is more difficult to sleep
- Do not try to catch up by taking two or more doses at once as you may get more side effects

If you have problems remembering your doses (as many people do) ask to see our Handy Fact Sheet "Remembering to take your medicines".

Will it affect my other medication?

Methylphenidate can interact with a few other medicines:

- There is no problem with the 'Contraceptive Pill'
- Make sure any prescriber and/or pharmacist who treats you knows you are taking methylphenidate.

You **must** also see the Patient Information Leaflet (PIL) for the full possible list. Some of these medicines can still be used together but you must follow your doctor's instructions carefully.

Will I need any blood or other tests if I am taking methylphenidate?

- You will not need any extra blood tests
- Methylphenidate does not affect growth but there may be some checks on height and weight
- Your heart should be checked before starting
- If you have any other blood tests, make sure the prescriber knows you takes methylphenidate as this can lead to odd results in some tests.

What about getting pregnant?

- Discuss this with your health professional – we have leaflets that can help give you the information you need to make a choice
- Usually, people gradually reduce their dose before trying to get pregnant
- If you find yourself pregnant unexpectedly see your health professional as soon as possible.

Can I drive or cycle while I am taking methylphenidate?

- You may feel a bit light-headed at first when taking methylphenidate
- Until you know that it is not affecting you, you should not cycle, drive or operate machines.

If you have ADHD, methylphenidate can help you concentrate and so you may actually be *less* likely to have an accident, **but only if you take it regularly.**
(for more details go to www.gov.uk/adhd-and-driving)
In the UK you are legal to drive as long as you take methylphenidate as prescribed by a prescriber and **if** you are sure that it does **not** harm your driving.

What sort of side-effects might I get if I am taking methylphenidate?

This table shows some of the most common side effects and any you might need to take action on. You **must** also see the maker's Patient Information Leaflet for the full list of possible side effects but do not be worried by this. Some people get no side effects at all. Some side effects are the brain getting used to a medicine and these usually wear off in a few days or weeks. Starting at a lower dose helps. If you think you might have a side effect to this medicine, you should ask your prescriber, pharmacist or other healthcare professional.

Side effect	What happens	What to do about it
VERY COMMON *(more than about 1 in 10 people might get these)*		
Headache	Your head is pounding and painful.	Try paracetamol. Take your methylphenidate with food (not an empty stomach) and make sure you drink enough liquids.
COMMON *(fewer than about 1 in 10 people might get these)*		
Anorexia	Loss of weight, not feeling hungry.	Ask to see a pharmacist or dietician for advice. It often wears off after a few weeks. Don't miss meals. Eat several smaller meals a day rather than bigger ones.
Nausea and vomiting	Feeling sick and being sick. Abdominal pain	If it is bad, contact your prescriber. Taking it after food may help. It should wear off after a few weeks.
Nervousness	Feeling more anxious or nervous	This should wear off. If not, discuss with your prescriber next time. If you get nervous tics see your prescriber.
Nasopharyngitis	Cough, sore nose and throat	This should wear off but see your prescriber if it doesn't wear off.
Dizziness	Feeling light-headed and faint	Do not stand up too quickly. Try and lie down if you feel it coming on. Do not drive or cycle. Get your blood pressure checked.
Insomnia	Not being able to fall asleep at night	Take your dose early enough in the day. Talk to your prescriber about which product you take. See our leaflets on sleep.
Tachycardia	A pulse rate more than 120 beats per minute while you are resting.	If your pulse is over about 120 (i.e. not after exercise), you should mention this to your prescriber. It may be that you need a different dose or a beta-blocker to help slow it down.
Tell your prescriber if you get this side effect		
Change in mood	Being aggressive, depressed, hostile and perhaps suicidal thinking.	It is more likely after starting, a dose increase, or overdose. See your prescriber straight away if you have thoughts of harming yourself.
Priapism	Men can get an unexpected erection lasting longer than 4 hours with no stimulus. Most likely to occur after a dose change.	Although it would be embarrassing, you MUST seek treatment straight away. If it lasts more than about 10-15 hours it can cause damage to the penis and mean you might not be able to get an erection again.

The small print: This leaflet is to help you understand more about your methylphenidate. You **must** also read the manufacturer's Patient Information Leaflet (PIL). You may find more on the internet but beware as internet-based information is not always accurate. Do not share medicines with anyone else. The 'Handy charts' will help you compare the main medicines for each condition, how they work and their side effects. Go to our website for fuller answers to these and many other questions.