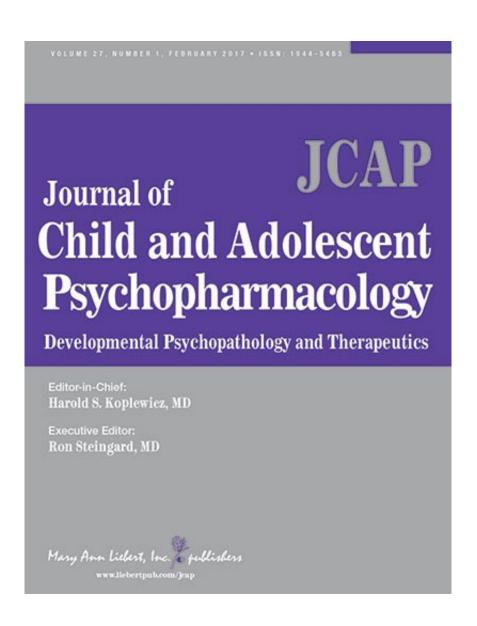


Guanfacine is safe and well-tolerated in children and adolescents with anxiety disorder

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A pilot study of guanfacine, a controlled-release alpha2-agonist, in children and adolescents with general, separation-related, and social anxiety disorder showed the drug to be safe and well-tolerated and provided preliminary evidence of its potential effectiveness. The study supports further clinical testing of the drug in pediatric patients with anxiety, according to the results published in *Journal of Child and Adolescent Psychopharmacology*.

Jeffrey Strawn, MD, University of Cincinnati College of Medicine (Ohio), and coauthors from Duke University School of Medicine (Durham, NC), Shire (Lexington, MA), Columbia University/New York State Psychiatric Institute and New York Presbyterian Morgan Stanley Children's Hospital (New York, NY) compared the effects of guanfacine and placebo over 12 weeks in <u>pediatric patients</u> 6-17 years of age with a diagnosis of anxiety disorder.

In the article entitled "Extended Release Guanfacine in Pediatric Anxiety Disorders: A Pilot, Randomized, Placebo-Controlled Trial," the researchers report the effects of drug treatment and placebo on heart rate, blood pressure, suicidal thoughts and behavior, and multiple measures of anxiety. In addition to describing no remarkable adverse effects associated with guanfacine use, the authors suggest the potential for its use in treating children with other disorders that have co-occurring anxiety symptoms, such as ADHD.

"The safety of guanfacine in this patient population is the first step in potentially developing an additional psychopharmacological treatment for children and adolescents with anxiety disorders," says Harold S. Koplewicz, MD, Editor-in-Chief of the *Journal of Child and Adolescent Psychopharmacology* and president of the Child Mind Institute in New York.



More information: Jeffrey R. Strawn et al, Extended Release Guanfacine in Pediatric Anxiety Disorders: A Pilot, Randomized, Placebo-Controlled Trial, *Journal of Child and Adolescent Psychopharmacology* (2017). DOI: 10.1089/cap.2016.0132

Provided by Mary Ann Liebert, Inc

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