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Researchers from The Children's Hospital of Philadelphia's (CHOP) PolicyLab published the largest study to date documenting the significant risks to children's health associated with prescription antipsychotics, a powerful class of medications used to treat mental and behavioral health disorders.

The results suggest that initiating antipsychotics may elevate a child's risk not only for significant weight gain, but also for type II diabetes by nearly 50 percent; moreover, among children who are also receiving antidepressants, the risk may double.

Previous PolicyLab research showed that one in three youth receiving antidepressants in the Medicaid program were receiving an antipsychotic at the same time.

Traditionally, antipsychotics have been narrowly prescribed to children with a diagnosis of schizophrenia or bipolar disorder, or to those with significant developmental delays who were displaying aggressive behaviors that were potentially injurious to themselves or others.

However, in recent years, these medications are increasingly being prescribed in the absence of strong supporting safety and efficacy data to treat healthier children and adolescents with disruptive behaviors, such as those who are diagnosed with attention deficit hyperactivity disorder (ADHD).

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"With such vast numbers of children being exposed to these medications, the implications for potential long-lasting harm can be jarring," said Dr David Rubin, the study's lead author and co-director of PolicyLab at CHOP.

"Although these findings should certainly give us pause," Dr Rubin added, "we should not reflexively over-react to them. Rather, we need to incorporate these new revelations about the risk for diabetes into a more thoughtful consideration of the true risks and benefits of prescribing an antipsychotic to a child. Yes, we should try, by all means possible, to minimize the numbers of children and adolescents exposed to these powerful medications. But for some children in immediate crisis, we must also concede that the benefit of the antipsychotic for acute management may still outweigh the risk."

"At the end of the day, the approach to the individual child who is in crisis is still a case-by-case decision between a family and the treating provider," said Dr Rubin.