

# Increased prescribing of psychotropic medication for children and adolescents during the COVID-19 pandemic: no cause for alarm

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Now that the perceived threat has subsided, morbidity and help-seeking should both return to pre-pandemic levels

Examining prescribing patterns during the coronavirus disease 2019 (COVID-19) pandemic could provide insights into service use, which in turn could inform planning for future pandemics.<sup>1</sup> Two investigations reported in this issue of the *MJA* compared the rates of prescribing and dispensing of psychotropic medications for children and adolescents in Australia during the early years of the COVID-19 pandemic with rates prior to the pandemic.<sup>2,3</sup> The authors used different methodologies, but both studies found that rates were higher than usual during the pandemic, findings consistent with those of similar studies in Scandinavia<sup>1,4</sup> and Spain.<sup>5</sup> Differences by gender and age conformed with known morbidity patterns under non-pandemic conditions. The authors of the two articles suggest that psychotropic medications were sometimes prescribed as substitutes for referral to more appropriate non-pharmacological support services that were less readily accessible during the pandemic.<sup>2,3</sup>

To understand the significance of the increased prescribing, one must take into account changes in the number of new incident cases of mental disorder, the severity of symptoms in people with pre-existing conditions, help-seeking, and the use of non-pharmacological support. The number of new incident cases of mental disorder among young people in Australia increased during the early phase of the pandemic, as did the severity of symptoms for those with existing mental problems.<sup>6</sup> Help-seeking also increased, one example being a surge in the number of presentations with mental health problems to hospital emergency departments.<sup>7</sup> The use by young people of Medicare Benefits Schedule items for mental health problems was higher in 2020 than 2019,<sup>8</sup> in line with Australian government initiatives to temporarily raise funding caps for psychological services. In this context, increased prescribing of psychotropic medications for children and adolescents during the pandemic was to be expected; indeed, one would have been alarmed had there been no change.

The two articles in this issue include further data that could be helpful when planning responses to future pandemics. Hardie and colleagues<sup>2</sup> analysed prescribing data from general practices in five New South Wales and Victorian primary health networks (four in metropolitan areas), the two states most affected by COVID-19-related lockdowns. The spikes in rates that accompanied the general increase in prescribing differed by drug class and age band; in some cases, they occurred at the onset of the pandemic, in others they were later, perhaps associated with lockdowns. The upward trend in prescribing probably reflected increased morbidity, but the spikes are likely to indicate something else. Remember the rush on toilet paper early in the



pandemic? My guess is that parents were ensuring they had adequate supplies of psychotropic medications for children with mental conditions in case prescriptions became difficult to obtain or fill. What is the lesson for future pandemics? Ensure that Australia has adequate reserves of frequently prescribed medications, and make this situation clear to the public.

Wood and colleagues<sup>3</sup> analysed national dispensing data for the period 2013–2021. Dispensing surged during the pandemic in all states and territories, regardless of whether they experienced harsh and prolonged lockdowns, as in Victoria, or relatively modest disruption, as in Western Australia. The rise paralleled changes in morbidity,<sup>6</sup> and this finding suggests that lockdowns and associated disruptions were not the dominant drivers of mental health problems in children and adolescents during the pandemic. I wonder whether prolonged perceived threat was a factor here? Interestingly, following the Christchurch earthquakes, each of which could be characterised as a brief but intense period of threat followed by a protracted period of disruption, psychotropic medication prescribing for children did not increase, apart from a small rise for antidepressants.<sup>9</sup> What is the lesson for future pandemics? Precise public health messages, together with swift rebuttal of misinformation.

In conclusion, psychotropic medication prescribing for children and adolescents increased during the COVID-19 pandemic in the context of increased psychiatric morbidity and help-seeking, and was one component of the broader mental health treatment response to the pandemic. Rather than inappropriate, it was an example of the system working as it should. Now that the perceived threat of COVID-19 has subsided, we expect that morbidity and help-seeking will both return to pre-pandemic levels. If they do not, we will have to ask why.

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- 1 Kuitunen I. Psychotropic medication use in pediatric population during COVID-19 pandemic. *Acta Psychiatr Scand* 2022; 146: 381-383.
- 2 Hardie RA, Sezgin G, Pont LG, et al. Psychotropic medication prescribing for children and adolescents by general practitioners during the COVID-19 pandemic. *Med J Aust* 2023; 219: 26-27.
- 3 Wood SJ, Ilomäki J, Gould J, et al. Dispensing of psychotropic medications to Australian children and adolescents before and during the COVID-19 pandemic, 2013–2021: retrospective cohort study. *Med J Aust* 2023; 219: 18-25.
- 4 Bliddal M, Rasmussen L, Andersen JH, et al. Psychotropic medication use and psychiatric disorders during the COVID-19 pandemic among Danish children, adolescents, and young adults. *JAMA Psychiatry* 2023; 80: 176-180.
- 5 García MLN, Martínez PF, Bretón EF, et al. Psychotropic consumption before and during COVID-19 in Asturias, Spain. *BMC Public Health* 2023; 23: 494-502.
- 6 Li SH, Beames JR, Newby JM, et al. The impact of COVID-19 on the lives and mental health of Australian adolescents. *Eur Child Adolesc Psychiatry* 2022; 31: 1465-1477.
- 7 Hu N, Nassa N, Shrapnel J, et al. The impact of the COVID-19 pandemic on paediatric health service use within one year after the first pandemic outbreak in New South Wales Australia: a time series analysis. *Lancet Reg Health West Pac* 2022; 19: 100311.
- 8 Gao CX, McDonald LP, Hamilton MP, et al. Inequalities in access to mental health treatment by Australian youths during the COVID-19 pandemic. *Psychiatr Serv* 2022; <https://doi.org/10.1176/appi.ps.20220345> [online ahead of print].
- 9 Beaglehole B, Moor S, Zhang T, et al. Impact of the Canterbury earthquakes on dispensing of psychiatric medication for children and adolescents: longitudinal quantitative study. *Br J Psychiatry* 2020; 216: 151-155. ■