

Facts about amphetamine sulfate (Evekeo)



- Class – Evekeo® is a new amphetamine-based stimulant medication FDA approved (2014) for treatment of ADHD in ages 3 and older
- Mechanism of action: blocks reuptake of dopamine and norepinephrine
- Effective in reducing core symptoms of ADHD: inattention, hyperactivity, and impulsivity.
- Evekeo® has the same active compound (amphetamine) as other commonly prescribed amphetamine stimulants like Adderall® but has a 50/50 racemic mixture of the D and L isomers
- Evekeo® is a short-acting stimulant typically dosed 2-3 times per day
- It is available in scored 5 and 10mg tablets and can be cut in half
- Initial dosing:
 - 2.5mg daily for 3-6 year olds
 - increase to divided dosing (BID or TID) with max total daily dose 40mg
 - 5mg daily for 5-12 year olds
 - increase to divided dosing (BID or TID) with max total daily dose 60mg
 - 10mg daily for >12 year olds
 - increase to divided dosing (BID or TID) with max total daily dose 60mg
- Common side effects similar to other CNS stimulant medications: appetite suppression, sleep trouble, headache, GI upset, increased heart rate and blood pressure, anxiety, irritability and aggression.
- Rare but potentially serious reactions include psychosis, cardiac events including sudden death, seizures, priapism, dependence/abuse, peripheral vasculopathy, and Raynaud's phenomenon.
- Safety and Monitoring – same as with all stimulants
 - Screen for cardiac risk factors before starting and obtain cardiology consult if significant risk factors identified
 - Monitor growth and vital signs regularly
 - Black box warning about the risk for diversion abuse (note the evidence is that stimulants used appropriately in children with ADHD lower long term risk of substance abuse)

References:

1. Epocrates drug monograph for Evekeo®
2. Package insert <https://www.evekeo.com/assets/evekeo-pi.pdf>
3. Childress, A., et al. The Efficacy and Safety of Evekeo Racemic Amphetamine Sulfate, for Treatment of ADHD Symptoms; A Multicenter, Dose-Optimized, Double-Blind, Randomized, Placebo-Controlled Crossover Laboratory Classroom Study. *Journal of Child and Adolescent Psychopharmacology*. 2015; 25(5): 402-414.