An Examination of the Relationship Between Medication Change and Assault and Restraint: A Replication and Expansion

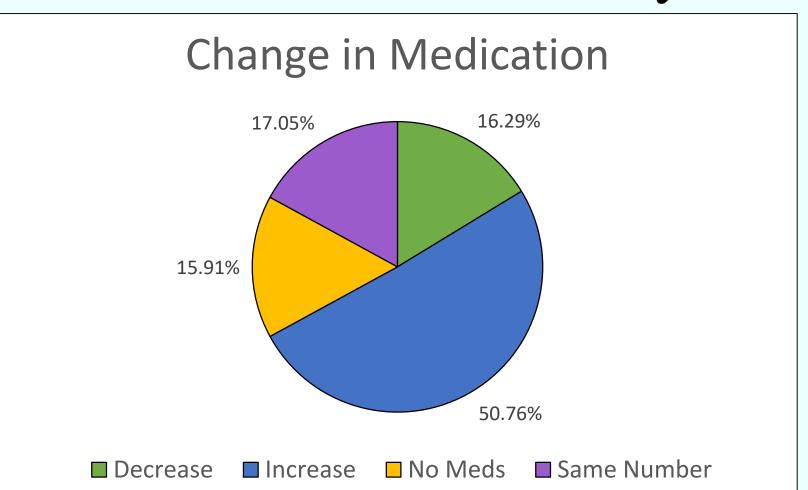
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Overview: This study attempts to replicate the findings in a previous study examining the changes in a youth's psychotropic medication and behavior. In a sample of 264 male youth, we were unable to replicate the results of the previous study.

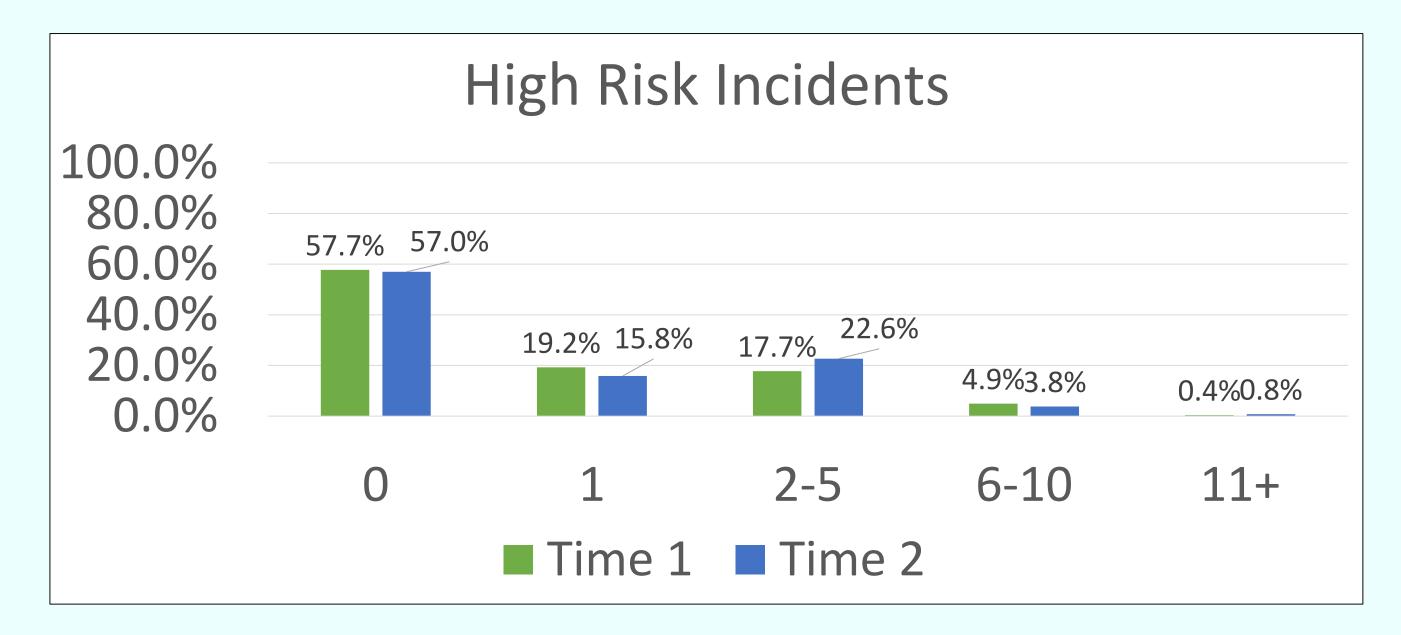
There was no relationship between changes in medication and behavior.

Background: Many youth in residential care are diagnosed with a psychiatric condition and are prescribed medication to manage these conditions, though evidence for the efficacy of this medication for youth is limited. Previous research found that reducing medication did not result in an increase in negative behavior. This study sought to examine the same question with different data.

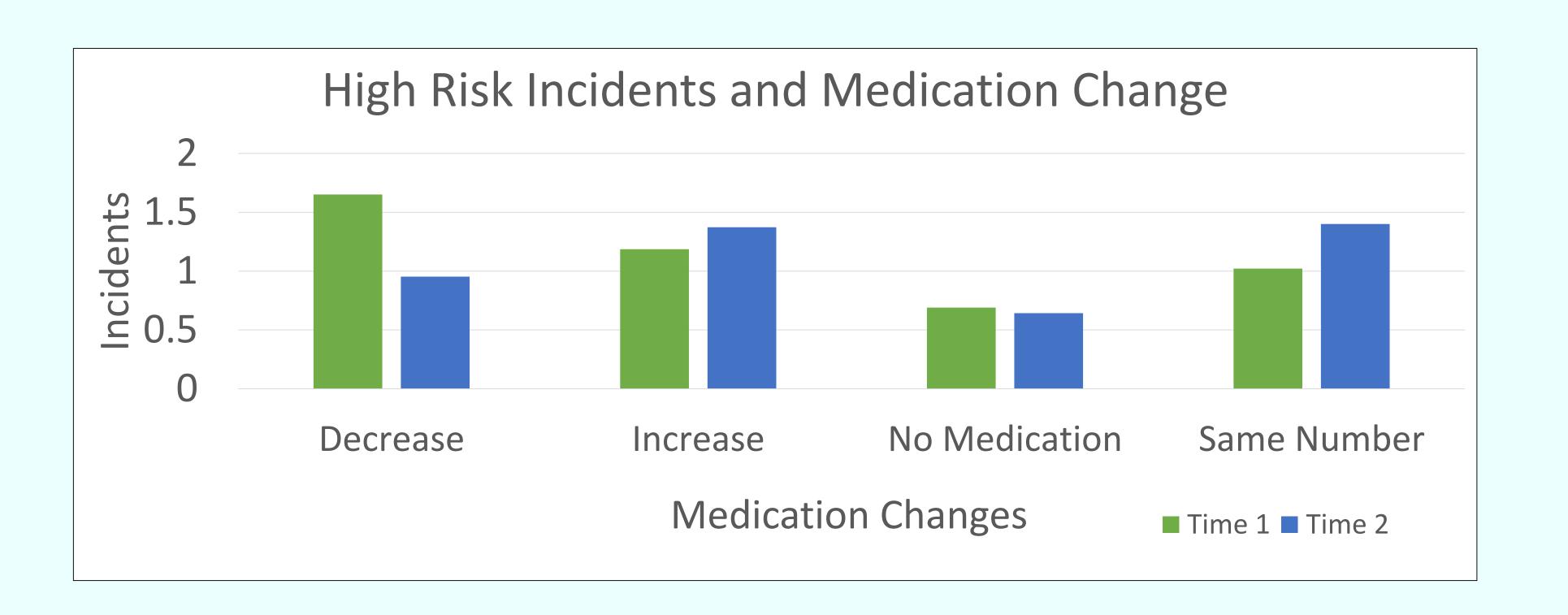
Sample: This analysis used a sample of 264 male youth residing in a Residential Treatment Center (RTC). The average age of respondents was 15 years. Youth's diagnoses and medications at admission were documented and compared to their information at discharge. In addition, High Risk Incidents were counted during the first 14 days after admission and the last 14 days before discharge.



- The majority of youth, 84.1%, arrived with prescriptions for psychotropic medication
- Most of these youth (50.76%) had an increase in prescriptions for psychotropic medication
 - In most cases, (60.7%), these youth had an increase in the number of psychiatric diagnoses during their stay.
- Most youth did not engage in any High Risk Incidents at either time period



Results: There was no significant change in the number of high risk incidents that a youth engaged in between Time 1 and Time 2. The repeated measures MANOVA models were not statistically significant, even when changes in psychiatric diagnoses was included in the model. While the graph below indicates that there was a reduction in incidents for youth who had a decrease in medication, this result was not statistically significant.



Discussion: While the previous study indicates that youth who had a reduction in the number of psychotropic medications demonstrated a resulting decrease in high risk behavior, these results were not seen in this sample. There was no relationship between changes in medication and high risk behavior. This lack of finding leads to a number of questions related to the administration of medication for behavioral control.

Limitations: small, male sample, not many youth in the medication decrease category, only one RTC included in the study

Implications: Based on the findings in this study, there is no relationship between medication changes and high risk behavior.