

# Clonidine

(clonidine)

[Full Prescribing Information](#)

[DailyMed Drug Information](#)

## Forms/Strengths

- **Tablets:** 0.1 mg, 0.2 mg, 0.3 mg

## Dosing

- **Age:**  $\geq$  6yr
- **Onset:** 30-60 min (oral)
- **Duration:** 6-12 hours
- **Considerations:** Monitor for bradycardia and hypotension; taper off gradually to avoid rebound hypertension
- **Initial Dose:**
  - 27-40 kg: 0.05 mg nightly
  - 40+ kg: 0.1 mg nightly
- **Titration:**
  - Increase 0.05mg every 3-7 d taper gradually over 2-4 days to discontinue
- **Max Dose:**
  - 27-40 kg: 0.2 mg/day
  - 40+ kg: 0.4 mg/day

## Quick Facts

- Alpha-2 adrenergic agonist; reduces sympathetic outflow
- Decreases hyperactivity, impulsivity, and improves sleep in ADHD
- Off-label use for ADHD, especially in patients with comorbid tic disorders or poor stimulant response; often used as an adjunct to stimulants
- Common side effects: drowsiness, sedation, dry mouth, hypotension

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# Indications

- **ADHD** (ICD-10: F90.0)
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# Off-Label Uses

- **Tourette syndrome** (ICD-10: F95.2)
  - **Oppositional defiant disorder:** (ICD-10: F91.3)
  - **Sleep disturbances associated with ADHD** (ICD-10: G47.00)
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# How to Take

- Take at the **same time each day** for consistency.
  - Can be taken **with or without food**.
  - **Swallow whole**; do not crush or chew.
  - If used for **ADHD**, often given **twice daily**, with the larger dose at bedtime to minimize drowsiness.
  - Do not **suddenly stop** taking; tapering may be required to prevent **rebound hypertension**.
  - Transdermal patches should be applied to a hairless area on the upper outer arm or chest.
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# Side Effects

- Common
    - Dry mouth
    - Drowsiness
    - Dizziness
    - Constipation
  - Serious
    - Bradycardia
    - Hypotension
    - Withdrawal syndrome
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# Monitoring / Labs

- Blood pressure and heart rate monitoring
  - Renal function tests
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## Education

- **When to Call the Doctor:**
    - Severe **dizziness, fainting, or low blood pressure**.
    - Slow or irregular heart rate.
    - Signs of **over-sedation**, such as excessive drowsiness or difficulty waking.
    - Mood changes, hallucinations, or unusual behavior.
    - Severe headache, blurred vision, or confusion (**possible hypertensive rebound if stopped abruptly**).
  - **Safety Tips:**
    - Monitor **blood pressure and heart rate** regularly.
    - Avoid **alcohol and sedatives**, which may enhance drowsiness.
    - Rise slowly from sitting or lying positions to prevent dizziness.
    - Do not **suddenly discontinue**, as this may lead to **rebound hypertension**.
    - Be cautious when driving or operating machinery until individual response is known.
  - **Parent Tips for Pediatric Patients:**
    - May cause **daytime drowsiness**; consider giving the **larger dose at bedtime**.
    - Monitor for **irritability, behavioral changes, or mood swings**.
    - Encourage **hydration and salt intake** if dizziness occurs.
    - Ensure the child does not engage in **high-risk activities (e.g., climbing, swimming unsupervised) if excessively drowsy**.
    - Keep in **child-proof packaging** to prevent accidental overdose.
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## Additional Information

- **Contraindications:**
  - **Hypersensitivity** to clonidine or formulation components.
  - Use with caution in patients with **severe heart disease, bradycardia, or hypotension**.
- **Pregnancy:**
  - **Category C**; use only if benefits outweigh risks.
  - May cause **neonatal withdrawal symptoms**.
- **Lactation:**
  - **Excreted in breast milk**; use with caution due to potential effects on infant blood pressure.
- **Drug Interactions:**
  - **CNS depressants** (e.g., alcohol, benzodiazepines) may increase sedation.
  - **Beta-blockers** may enhance bradycardia; caution if discontinuing either drug.
  - **Stimulants (e.g., amphetamines)** may counteract clonidine's effects.

- **Antihypertensive medications** may lead to excessive blood pressure lowering.
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