

Evekeo

(amphetamine sulfate)

Full Prescribing Information

DailyMed Drug Information

Forms/Strengths

- **Tablets:** 5 mg, 10 mg

Dosing

- **Age:** ≥ 3 y/o
- **Onset:** ~ 30-60 minutes
- **Duration:** 4-6 hours
- **Considerations:** Take the first dose on awakening. Additional doses may be given at intervals of 4-6 hours.
- **Initial Dose:**
 - **3-5 y/o:** 2.5 mg daily
 - **6+ y/o:** 5 mg once or twice daily
- **Titration:**
 - **3-5 y/o:** 2.5 mg weekly
 - **6+ y/o:** 5 mg weekly
- **Max Dose:** 40 mg/day

Quick Facts

- Increases synaptic dopamine and norepinephrine by enhancing presynaptic release
- Improves focus, attention, and impulse control
- Immediate-release formulation for rapid onset
- Unique racemic amphetamine sulfate formulation
- Common side effects: decreased appetite, insomnia, increased blood pressure, headache

Indications

- **ADHD** (ICD-10: F90.0)
 - **Narcolepsy**: G47.419
 - Exogenous Obesity: E66.9
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Off-Label Uses

- N/A
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How to Take

- Take **once or twice daily**, as directed, with the **first dose in the morning**.
 - Can be taken **with or without food**; high-fat meals may delay absorption.
 - Swallow **tablet whole** with water; do not crush or chew.
 - If using the **oral suspension**, **shake well before each use** and measure with an appropriate dosing device.
 - Avoid taking **late in the day** to prevent insomnia.
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Side Effects

- **Insomnia, decreased appetite, weight loss, increased heart rate, elevated blood pressure, potential for psychotic or manic symptoms, peripheral vasculopathy.**
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Monitoring / Labs

- **Cardiovascular**: Baseline and routine monitoring of heart rate and blood pressure.
 - **Growth in Pediatrics**: Regular monitoring of height and weight to detect growth suppression.
 - **Psychiatric Symptoms**: Observe for mood changes, anxiety, or psychosis.
 - **Abuse Potential**: Monitor for misuse or diversion.
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Education

- **When to Call the Doctor:**

- Severe **mood changes, aggression, or suicidal thoughts**.
- Chest pain, rapid heartbeat, shortness of breath (**cardiovascular concerns**).
- Uncontrolled movements, tics, or worsening anxiety.
- Numbness, coldness, or color changes in fingers or toes (**circulatory issues**).
- Unexplained weight loss or **delayed growth in pediatric patients**.

- **Safety Tips:**

- **Monitor blood pressure and heart rate**, especially in patients with cardiovascular risk.
- Use caution in patients with **anxiety, bipolar disorder, or psychosis**, as symptoms may worsen.
- Avoid **caffeine and other stimulants**, which may amplify side effects.
- Ensure **adequate hydration and nutrition**, as appetite suppression is common.
- **Tapering may be required** if discontinuing after long-term use.

- **Parent Tips for Pediatric Patients:**

- **Encourage a nutrient-dense diet** to counteract appetite suppression.
 - Administer in the **morning before school** for optimal effect.
 - Monitor **school performance and behavioral changes**.
 - Observe for **sleep disturbances**; adjust timing if necessary.
 - Communicate regularly with **teachers and caregivers** about medication effects.
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Additional Information

- **Contraindications:**

- **Hypersensitivity** to amphetamines or formulation components.
- **Use within 14 days of MAOI therapy** (risk of hypertensive crisis).
- Symptomatic **cardiovascular disease, moderate-to-severe hypertension, hyperthyroidism, glaucoma**.
- **History of substance use disorder**, unless benefits outweigh risks.

- **Pregnancy:**

- **Category C**; use only if benefits outweigh risks.
- May cause **neonatal withdrawal symptoms** or **low birth weight**.

- **Lactation:**

- **Excreted in breast milk; not recommended** due to potential infant exposure.

- **Drug Interactions:**

- **Serotonergic drugs** (e.g., SSRIs, SNRIs, MAOIs) increase **serotonin syndrome risk**.
 - **Acidifying agents** (e.g., ascorbic acid) may reduce drug absorption.
 - **Alkalinizing agents** (e.g., sodium bicarbonate) may increase amphetamine levels.
 - May potentiate **hypertensive effects** of certain medications (e.g., decongestants, beta-agonists).
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