



**Australian Government**

**Department of Health**

**Deputy Secretary**

Associate Professor John Allan  
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Dear Associate Professor Allan

**RE: request for revised clinical guidance to support safe and effective prescribing of antidepressants to paediatric and adolescent patients**

I am writing to draw your attention to a recent Therapeutic Goods Administration (TGA) review of antidepressant prescribing in paediatric and adolescent populations and to request your support in implementing the review's recommendations.

At the request of the Minister for Health, the Hon Greg Hunt MP, the TGA has initiated a review of the association between antidepressants and youth suicide in Australia. This follows the June 2020 publication of a review article by Martin Whitely, Melissa Raven and Jon Jureidini, in the journal *Frontiers in Psychiatry*, which proposed a causal relationship between antidepressant prescribing and youth suicide in Australia ([www.frontiersin.org/articles/10.3389/fpsyt.2020.00478/full](http://www.frontiersin.org/articles/10.3389/fpsyt.2020.00478/full)).

As part of our review, the TGA sought advice from the Advisory Committee on Medicines (ACM) in August on the following issues:

1. The current role of selective serotonin inhibitors (SSRIs) and selective noradrenaline reuptake inhibitors (SNRIs) in clinical practice in Australia for treating psychiatric disorders and developmental disorders in children, adolescents and young adults,
2. The strength of the current evidence for an association between use of antidepressants and rates of youth suicide in Australia, and
3. The need for additional risk minimisation measures to address any potential risk of suicide amongst children, adolescents and young adults prescribed SSRIs or SNRIs.

The ACM advised that there is a valid and important role for SSRIs and SNRIs in treating certain psychiatric and developmental disorders in children and adolescents in Australia, supported by professional evidence-based guidelines rather than TGA approved indications and Product Information documents (PI). However, the ACM also expressed concern that the use of antidepressants in children is increasing and identified a need for further prescriber education to support safe prescribing in paediatric and adolescent populations, especially regarding appropriate starting dosage and dose titration.

This need is especially relevant in general practice, where patients may often be independently managed by their GP for many months whilst awaiting specialist psychiatric or paediatric review.

The ACM noted that there is currently no clinical guidance on the RACGP website on the appropriate use of antidepressants in children and adolescents. The ACM advised that the development of joint clinical guidance by the RANZCP, RACP and RACGP would support the safe and effective prescribing of antidepressants in this population.

The TGA accepts the advice of the ACM and I therefore request that the RANZCP, together with RACGP and RACP, consider working together to develop new clinical guidance or revise the previous joint 2005 *Clinical Guidance on the use of Antidepressant Medications in Children and Adolescents* to better reflect the current evidence and provide additional guidance on appropriate starting dosage and dose titration, for use particularly in the primary care setting.

Please do not hesitate to contact me should you require further information.

Yours sincerely



Adj. Professor John Skerritt  
Health Products Regulation Group

7 October 2020