

Metabolic Monitoring Guide for Therapists of Children Taking Antipsychotic Medication

Why Metabolic Monitoring Matters

Second-generation antipsychotics (SGAs) are an important component of treatment for many children and adolescents with serious psychiatric disorders, including schizophrenia, bipolar disorder, irritability associated with autism spectrum disorder, severe aggression, and other conditions when clinically indicated [2]. When appropriately prescribed, SGAs can significantly improve psychiatric symptoms, emotional regulation, and overall functioning.

Despite their therapeutic benefits, SGAs are associated with significant metabolic adverse effects, including weight gain, insulin resistance, hyperglycemia, dyslipidemia, hypertension, and metabolic syndrome [3]. Evidence demonstrates that children and adolescents are more susceptible than adults to antipsychotic-induced weight gain and metabolic abnormalities, particularly during the first several months of treatment [5,6]. Because many metabolic abnormalities develop without noticeable symptoms, routine monitoring is essential for early identification and intervention [1]. Routine metabolic monitoring is an evidence-based standard of care that supports safer prescribing, facilitates early intervention, and promotes the long-term physical health of children and adolescents receiving second-generation antipsychotic medications [1,2].

Current Evidence-Based Monitoring Recommendations

Clinical practice guidelines recommend obtaining baseline metabolic measurements before initiating or as soon as possible after starting an SGA and repeating laboratory monitoring approximately 12 weeks after treatment initiation. Continued monitoring including annual glucose/HbA1c and lipid monitoring should occur at least annually thereafter, with more frequent assessment based on clinical findings, medication changes, or patient risk factors [1,2].

Why Therapist Advocacy Matters

While therapists neither prescribe SGAs nor laboratory testing, therapists play a role in ensuring metabolic monitoring occurs throughout treatment. Although metabolic screening is recognized as a standard component of safe antipsychotic prescribing, national quality measures continue to demonstrate that many children receiving SGAs do not complete recommended laboratory monitoring [1]. Therapists should educate parents and guardians of children and adolescents taking antipsychotic medications regarding the importance of following up with their prescriber, the purpose of metabolic monitoring and the importance of ensuring that recommended laboratory testing is completed. Therapists

may also follow-up with the prescriber to ensure recommended laboratory testing has been ordered.

References

- [1] Agency for Healthcare Research and Quality. (2019). *Metabolic screening for children and adolescents on antipsychotics*. <https://www.ahrq.gov/pqmp/measure/metabolic-monitoring-antipsychotics.html>
- [2] American Academy of Child and Adolescent Psychiatry. (2011). *Practice parameter for the use of atypical antipsychotic medications in children and adolescents*. *Journal of the American Academy of Child & Adolescent Psychiatry*, 50(9), 976–990.
- [3] American Diabetes Association, American Psychiatric Association, American Association of Clinical Endocrinologists, & North American Association for the Study of Obesity. (2004). Consensus development conference on antipsychotic drugs and obesity and diabetes. *Diabetes Care*, 27(2), 596–601.
- [4] BC Children's Hospital. (2025). *Patient and family guide: Second-generation antipsychotics*. <https://www.bcchildrens.ca/sites/default/files/2025-01/patient-family-guide-second-generation-antipsychotics.pdf>
- [5] Correll, C. U., Manu, P., Olshanskiy, V., Napolitano, B., Kane, J. M., & Malhotra, A. K. (2009). Cardiometabolic risk of second-generation antipsychotic medications during first-time use in children and adolescents. *JAMA*, 302(16), 1765–1773.
- [6] Hasnain, M. (2021). Addressing obesity in patients taking antipsychotics. *Psychiatric Times*. <https://www.psychiatrictimes.com/view/addressing-obesity-patients-taking-antipsychotics>