

Brand Name	ON		QC	
	Listing Status	Criteria	Listing Status	Criteria
Amphetamine-Based Psychostimulants				
Dexedrine	Full Benefits	Notes: Patients greater than 6 years of age diagnosed with ADHD according to DSM-IV criteria and where symptoms are not due to other medical conditions which affect concentration, and who require 12-hour continuous coverage due to academic and/or psychosocial needs, and who meet the following: 1) Patients who demonstrate significant and problematic disruptive behaviour or who have problems with inattention that interfere with learning; AND 2) Prescribed by or in consultation with a specialist in pediatric psychiatry, pediatrics or a general practitioner with expertise in ADHD; AND 3) Have been tried on methylphenidate immediate release (IR) or methylphenidate slow release (SR) or Dexedrine IR, and have experienced unsatisfactory results due to poor symptom control, side effects, administrative barriers, or societal barriers. Administrative barriers include: - inability of a school to dose the child at lunch; - the school lunch hour does not coincide with the dosing schedule; - poor compliance with noon or afternoon doses; - the patient is unable to swallow tablets. Societal barriers include: - the patient or patient's caregiver(s) has(have) a history of substance abuse or diversion of listed immediate-release alternatives; - the patient or patient's caregiver(s) is/are at risk of substance abuse or diversion of listed immediate-release alternatives.	Full Benefits	
Dexedrine Spansule	Full Benefits	Notes: Patients greater than 6 years of age diagnosed with ADHD according to DSM-IV criteria and where symptoms are not due to other medical conditions which affect concentration, and who require 12-hour continuous coverage due to academic and/or psychosocial needs, and who meet the following: 1) Patients who demonstrate significant and problematic disruptive behaviour or who have problems with inattention that interfere with learning; AND 2) Prescribed by or in consultation with a specialist in pediatric psychiatry, pediatrics or a general practitioner with expertise in ADHD; AND 3) Have been tried on methylphenidate immediate release (IR) or methylphenidate slow release (SR) or Dexedrine IR, and have experienced unsatisfactory results due to poor symptom control, side effects, administrative barriers, or societal barriers. Administrative barriers include: - inability of a school to dose the child at lunch; - the school lunch hour does not coincide with the dosing schedule; - poor compliance with noon or afternoon doses; - the patient is unable to swallow tablets. Societal barriers include: - the patient or patient's caregiver(s) has(have) a history of substance abuse or diversion of listed immediate-release alternatives; - the patient or patient's caregiver(s) is/are at risk of substance abuse or diversion of listed immediate-release alternatives.	Full Benefits	
Adderall XR	Listed, General Benefit with Therapeutic Notes (deemed interchangeable with generic)	Notes: Patients > 6 years of age diagnosed with ADHD according to DSM-IV criteria and where symptoms are not due to other medical conditions which affect concentration, and who require 12-hour continuous coverage due to academic and/or psychosocial needs, and who meet the following: 1) Patients who demonstrate significant and problematic disruptive behaviour or who have problems with inattention that interfere with learning; AND 2) Prescribed by or in consultation with a specialist in pediatric psychiatry, pediatrics or a general practitioner with expertise in ADHD; AND 3) Have been tried on methylphenidate immediate release (IR) or methylphenidate slow release (SR) or Dexedrine IR or Dexedrine SR (Spansules), and have experienced unsatisfactory results due to poor symptom control, side effects, administrative barriers, or societal barriers. Administrative barriers include: - inability of a school to dose the child at lunch; - the school lunch hour does not coincide with the dosing schedule; - poor compliance with noon or afternoon doses; - the patient is unable to swallow tablets. Societal barriers include: - the patient or patient's caregiver(s) has(have) a history of substance abuse or diversion of listed immediate-release alternatives; - the patient or patient's caregiver(s) is/are at risk of substance abuse or diversion of listed immediate-release alternatives.	Listed, Exception Status, facilitated access (code)	http://www.ramq.gouv.qc.ca/SiteCollectionDocuments/professionnels/medicaments/codes-medicaments-exception/SN.pdf (page 1)
Vyvanse	Listed, General Benefit with Therapeutic Notes	Notes: Patients greater than or equal to 6 years of age diagnosed with ADHD according to DSM-IV criteria and where symptoms are not due to other medical conditions which affect concentration, and who require 12-hour continuous coverage due to academic and/or psychosocial needs, and who meet the following: 1) Patients who demonstrate significant and problematic disruptive behaviour or who have problems with inattention that interfere with learning; AND 2) Prescribed by or in consultation with a specialist in pediatric psychiatry, pediatrics or a general practitioner with expertise in ADHD; AND 3) Have been tried on methylphenidate immediate release (IR) or methylphenidate slow release (SR) or Dexedrine IR or Dexedrine SR (Spansules), and have experienced unsatisfactory results due to poor symptom control, side effects, administrative barriers, or societal barriers. Administrative barriers include: - inability of a school to dose the child at lunch; - the school lunch hour does not coincide with the dosing schedule; - poor compliance with noon or afternoon doses; - the patient is unable to swallow tablets. Societal barriers include: - the patient or patient's caregiver(s) has(have) a history of substance abuse or diversion of listed immediate-release alternatives; - the patient or patient's caregiver(s) is/are at risk of substance abuse or diversion of listed immediate-release alternatives.	Exception status, facilitated access (code) (excluding 10mg dose, not yet listed)	VYVANSE is listed in quebec on the RAMQ List of Medications as an exception drug for the following recognized indication: For treatment of persons suffering from attention deficit disorder and in who the use of short-acting methylphenidate or dexamphetamine has not properly controlled the symptoms of the disease. Before it can be concluded that these treatments are ineffective, the stimulant must have been titrated optimally, unless there is proper justification
Methylphenidate-Based Psychostimulants				
Generic Ritalin	Full Benefits	Stimulant medication should only be used when diagnostic criteria for narcolepsy or attention deficit disorder have been met and when stimulant medication has been demonstrated to produce clinical benefits. The use of conventional-release medication should almost always precede the use of extended-release preparations.	Full Benefits	
Generic Ritalin SR	Full Benefits	Stimulant medication should only be used when diagnostic criteria for narcolepsy or attention deficit disorder have been met and when stimulant medication has been demonstrated to produce clinical benefits. The use of conventional-release medication should almost always precede the use of extended-release preparations.	Full Benefits	
Biphentin	Conditional Benefit	older than 6 yrs with ADHD, require continuous 12h coverage, and fail/intolerant of IR or SR MPH, or IR or SR dextramphetamine	Medicament d'exception	Children and adolescents with ADHD who failed/did not tolerate IR MPH or dextramphetamine
Concerta	General Benefit with Therapeutic Notes	Stimulant medication should only be used when diagnostic criteria for narcolepsy or attention deficit disorder have been met and when stimulant medication has been demonstrated to produce clinical benefits. The use of conventional-release medication should almost always precede the use of extended-release preparations (refer to formulary website for detailed notes)	Children - teens (SN103); Adult (SN132)	To treat children, adolescents and adults with attention deficit disorder who have not obtained good control of the disease's symptoms with short-acting methylphenidate or dexamphetamine. Before concluding that these treatments are ineffective, the stimulant must be dosed optimally, unless there is a relevant reason for not doing so.
Generic ER	General Benefit (same as therapeutic notes)		Same codification as Concerta	
Non Psychostimulants - Selective Norepinephrine Reuptake Inhibitor				
Strattera	Restricted		Restricted	
Generic	Restricted		Restricted	
Non Psychostimulant - Selective Alpha Adrenergic Receptor Agonist				
Intuniv	Not Listed	N/A	Listed, Exception status	http://www.ramq.gouv.qc.ca/SiteCollectionDocuments/professionnels/medicaments/Annexe-9.pdf (page 80)