ABOUT YOUR MEDICINE

Clonidine

Catapres, Catapres-TTS, Kapvay, Onyda XR, Duraclon, a non-stimulant medicine that dials down the body's alarm response

This medicine settles restlessness, tics, and racing bodies, and it often makes falling asleep much easier.

WHAT IT TREATS	HOW YOU TAKE IT	WHEN IT WORKS	HABIT FORMING
ADHD, tics, sleep, withdrawal	Often at bedtime	Sleep in days; ADHD 2-4 wk	No; but do not stop suddenly

This medicine carries **no special FDA safety warning** of that kind.

WHAT THIS MEDICINE DOES

- **Clonidine** quiets the body's fight-or-flight system, which eases restlessness, tics, and trouble settling at night.
- The long-acting tablet and liquid are approved for ADHD from age **6**, on their own or added onto a stimulant.
- It is also used to help with sleep onset, with tics, and to ease the physical symptoms of withdrawal from other drugs.
- It is a blood pressure medicine at heart, which is why sleepiness and a lightheaded feeling come with the territory.

HOW TO TAKE IT

- If the day is split into two doses, the larger one usually goes at bedtime so the sleepiness lands overnight.
- Swallow long-acting tablets whole. Crushing or chewing releases the whole thing at once and can drop blood pressure hard.
- Shake the liquid form well before measuring, and use the syringe or cup that came with it, never a kitchen spoon.
- Missed a dose? Take it when you remember unless the next one is close. Do not double up to catch back up.
- Store it up high and locked. One tablet swallowed by a toddler is a poisoning emergency, not a small mistake.

WHAT TO EXPECT

- Help with falling asleep often shows up within a few days, while the ADHD benefit builds over **2 to 4 weeks**.
- The amount goes up in small weekly steps, so give the schedule time rather than expecting a fast answer.
- Working well looks like a calmer body, fewer explosive moments, and bedtimes that stop being a nightly battle.
- Sleepiness is heaviest in the first couple of weeks and then eases for most people. Bedtime dosing is the usual fix.
- Expect blood pressure and pulse checks at visits, since this medicine lowers both on purpose.

COMMON SIDE EFFECTS

- Sleepiness affects **3 or 4 out of 10** people. It is the main reason the bigger share of the day goes at bedtime.
- Dizziness when standing is common. Get up in stages, sit first, and keep fluids up, especially in hot weather.
- Dry mouth is very common. Sip water, use sugar-free gum, and keep up with brushing and dental visits.
- Headache and irritability show up early for some people and usually settle within the first few weeks.
- Feeling flat, low, or having very vivid dreams can happen. Report it, since it can look like the condition getting worse.
- The weekly patch can leave an itchy red patch of skin. Rotating the spot each time helps a lot.

CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Fainting, or a pulse so slow it makes you feel sick: call **911** and do not take another dose until you are seen.
- A child who swallowed extra tablets and is drowsy, floppy, or breathing slowly: call **911** right away.
- Chest pain, trouble breathing, or confusion that comes on quickly: go to the emergency room now.
- New or worse thoughts of hurting yourself, or a sudden deep low mood: call or text **988**, or call today.

WHAT TO AVOID

- Never stop it suddenly. Blood pressure can rebound sharply, with pounding headache, shakiness, and a racing heart.
- If you also take a beta-blocker and both are coming off, the beta-blocker is stopped first. Follow the exact plan.
- Alcohol, opioids, sleep aids, and sedating allergy medicines stack on the drowsiness. Check every new one first.
- Other blood pressure medicines add to the drop. Tell every prescriber and pharmacist that you are on this.
- Do not drive or use machines until you know how sleepy it makes you, and be careful getting up at night.

STOPPING IT SAFELY

- Stopping is done in small steps over days to weeks, following the schedule your prescriber writes out for you.
- The taper exists to prevent rebound: blood pressure and heart rate can climb higher than they were before.
- If illness, vomiting, or a lost bottle means doses are being missed, call your prescriber instead of just stopping.
- It is not habit forming and not a controlled medicine, so refills are more straightforward than with a stimulant.

QUESTIONS TO ASK

- Is this meant mainly for sleep, for ADHD symptoms, or for both?
- How much of the daily amount should go at bedtime versus during the day?
- What is my exact taper plan if we ever stop this medicine?
- How should I store this so a younger child cannot possibly reach it?

Where this information comes from

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NOTE

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.