

The Affinity Team

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April 5, 2011

Medical Services
Dearborn County Jail
301 W. High Street
Lawrenceburg, Indiana 47025

RE: Daniel Brewington, DOB 11/16/1973

To Whom It May Concern:

This letter is to serve as verification for the current treatment of Mr. Brewington's Attention Deficit Disorder by the Affinity Center. He has been treated here for Attention-Deficit/Hyperactivity Disorder (ADHD) since December 2001 and, based on clinical necessity and careful medication titration trials, the current Ritalin dose (20mg, II and ½ tablets qid) as written affords optimal treatment of his symptoms. A lower dose is sub-therapeutic and would undermine his welfare. In addition to Ritalin, he is also prescribed Wellbutrin XL 300mg, I q. daily.

The FDA-recommended dosing guidelines for Ritalin, as all medications, are based on studies submitted by pharmaceutical companies in order to gain approval of their product's use. It is not the case that higher doses of FDA-approved medications have been found to be unsafe or contra-indicated, but rather that studies utilizing higher doses were not conducted in the process to gain approval.

The use of medication doses higher than approved by the FDA is not only a reasonable clinical approach for many patients but is particularly relevant in the treatment of adults with ADHD where off-label dosing typically constitutes the critical difference between sub-standard, ineffective care and the efficacious treatment of a debilitating disorder that has profound and pervasive effects on patient welfare. There is no longer any question about the positive dose effect for stimulant medications (which often exceed FDA-approved maximum dosing guidelines) or about the fact that adults benefit the most from these higher doses. Drs. Wilens, Biederman, and Spencer (leading experts in research and treatment of ADHD at Harvard Medical School and Massachusetts General Hospital) have articulated these findings both in the Affinity Center's professional conversations with them over the past 11 years as well as in their published work dating as far back as 2002.

Moreover, there is no empirical or clinical basis that supports the establishment of medication dispensing limits restricted to FDA-approved maximum dosing guidelines. These limits, which disallow off-label dosing, stand in the way of clinical judgment made

Paying attention is only part of it!

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in the practice of evidence based medicine.

Taking Ritalin as prescribed, which has proven efficacy for Mr. Brewington, represents dosing at 0.4 mg/kg/dose (wt= 125 kg) which is well within the maximum dose range of 0.8 mg/kg/dose indicated in clinical practice. This dose was arrived at through careful titration in which his heart rate and blood pressure as well as his cognitive functioning were carefully assessed. Failure to take the full prescribed dose of his medicine will result in inadequate treatment and will cause undue suffering for him.

Sincerely,

Douglas Logan, MD

The Affinity Center