The management of complex trauma in children and adolescents is difficult because of its multidimensional nature. Research in this area is particularly challenging and very few clinical studies are available. Clonidine is used off-label in France for this indication.

The aim of this work is to study the prescribing practices of clonidine in children and adolescents with complex trauma: the pre-therapeutic assessment, the targeted symptoms, the galenic formulation and the tolerance.

### Materials-Méthods

- Creation of a questionnaire
- Validation of the questionnaire by the referent child psychiatrist
- National distribution of the questionnaire via the mailing of different psychiatry networks
- Extraction of the answers and descriptive analysis of the data collected

### Results

- **Status of respondents to the questionnaire**
  - Pharmacists: 58%
  - Psychiatrists: 38%
  - Residents in psychiatry: 1%
- **Distribution of responses by regions**
  - Mainly the Auvergne-Rhône Alpes and Ile-de-France regions
- **Good or bad tolerance of Clonidine?**
  - 16% Good
  - 84% Bad
- **Systematic pre-therapeutic assessment?**
  - 28% Yes
  - 72% No
- **Observation of clinical efficacy?**
  - 24% Yes
  - 76% No
- **Galenic form of Clonidine**
  - Tablets: 81%
  - Oral solution (hospital preparation): 7%
  - Patch 0.2mg/24h (ATU): 12%

### Discussion/Conclusion

Preliminary data seem to indicate that clonidine could have a positive clinical impact on certain symptoms of complex trauma. A multicenter, double-blind clinical study, Clonidine versus placebo, on a larger sample and taking into account the environmental context of the child, could make it possible to confirm or not this hypothesis.