



MEDICATION ASSISTED TREATMENT

MODULE 14

ALLIED TRADES ASSISTANCE
PROGRAM

PREVENTATIVE EDUCATION:
SUBSTANCE USE DISORDER

Medication Assisted Treatment

- How do you return from a drug addiction?
 - Most people cannot do it alone and need help getting back to a normal, healthy life. One important form of help is called Medication Assisted Treatment (MAT).
 - These parts of treatment are as equally important: Counseling services, Support from family and friends and Self-Help programs (AA/NA/CA).

Types of Medication Assisted Treatment:

- Methadone
- Naltrexone
- Buprenorphine



METHADONE

Other Names: Dolophone & Methadose

METHADONE

What is it?

- Methadone reduces withdrawal symptoms in individuals addicted to heroin or other narcotic drugs without causing the "high" associated with the drug addiction.
- Used for treatment since the 1960's
- Purpose:
 - To improve function
 - Lessen symptoms and discomfort
 - Lower the rate of mortality associated with addiction
- Drug Class: Opioid

How does it work?

- Methadone works by changing how the brain and nervous system respond to pain. It lessens the painful symptoms of opiate withdrawal and blocks the euphoric effects of opiate drugs such as heroin, morphine and codeine, as well as semi-synthetic opioids like oxycodone and hydrocodone.
 - The length of methadone treatment should be a minimum of 12 months.
 - Methadone is offered in pill, liquid and sublingual tablet
 - Some patients may require treatment for years.
 - Even if a patient feels that they are ready to stop methadone treatment, it must be stopped gradually to prevent withdrawal.



Side Effects of Methadone

- Difficulty breathing or shallow breathing
- Lightheaded or faint feeling
- Hives or rash
- Swelling of the face, lips, tongue or throat
- Chest pain
- Fast or pounding heartbeat
- Hallucinations or confusion

Is it safe?

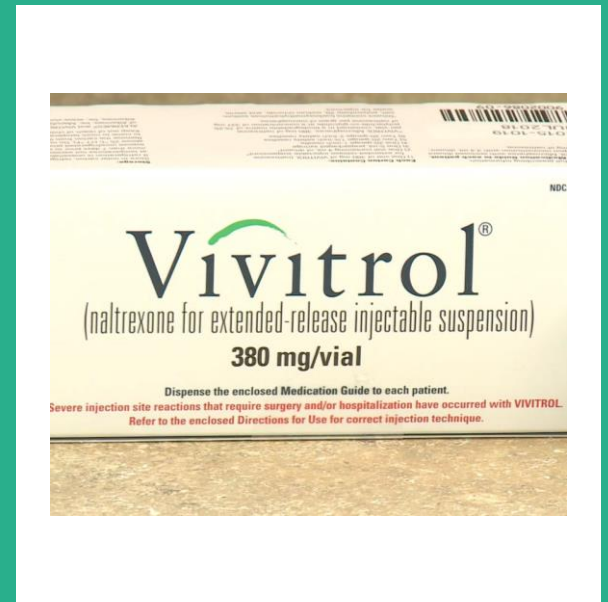
- When taken as prescribed, methadone is very safe and will not cause any damage to the body or brain.

Naltrexone

Other Names: Vivitrol, ReVia, Depade

Naltrexone

Naltrexone blocks opioids (heroin, Morphine, Codeine, etc.) from acting on the brain which then does not allow the body to feel the high from the substance.



Frequently Asked Questions:

- Why would I choose Naltrexone over other Forms of medication assisted treatment?
 - Naltrexone may be a good choice if you are completely past withdrawal and highly motivated to stay in recovery. It may also be recommended if you are in an early stage of opioid addiction.
- How often do I have to take this medication?
 - Naltrexone comes in pill form to be taken every 1-3 days. It is also available in extended-release injectable form (Vivitrol). This is administered by your treatment provider or a physician once a month.
- Naltrexone/Vivitrol can be a life long form of treatment unlike other forms of Medication Assisted Treatment

Is Naltrexone Addictive?

Naltrexone is NOT addictive and NOT an Opioid.
You can stop taking it at any time with no signs of symptoms
of withdrawal.

Side Effects

People taking naltrexone may experience side effects. If an individual is experiencing side effects, they should consult their health care provider to adjust the dose or change the medication. Side effects include:

- Upset stomach or vomiting
- Diarrhea
- Headache
- Nervousness
- Sleep problems/tiredness
- Joint or muscle pain



9 ON YOUR SIDE AT 6PM

**ON YOUR
SIDE**

TANYA O'ROURKE

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9 ON
YOUR
SIDE
abc wcpo.com

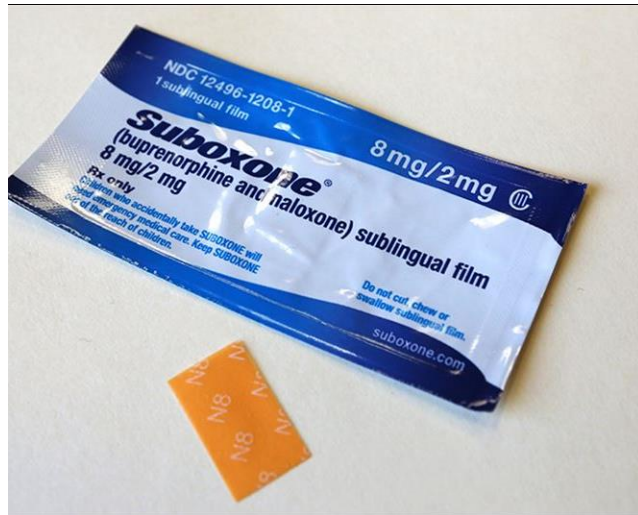
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Buprenorphine

Other Names: Suboxone & Subutex

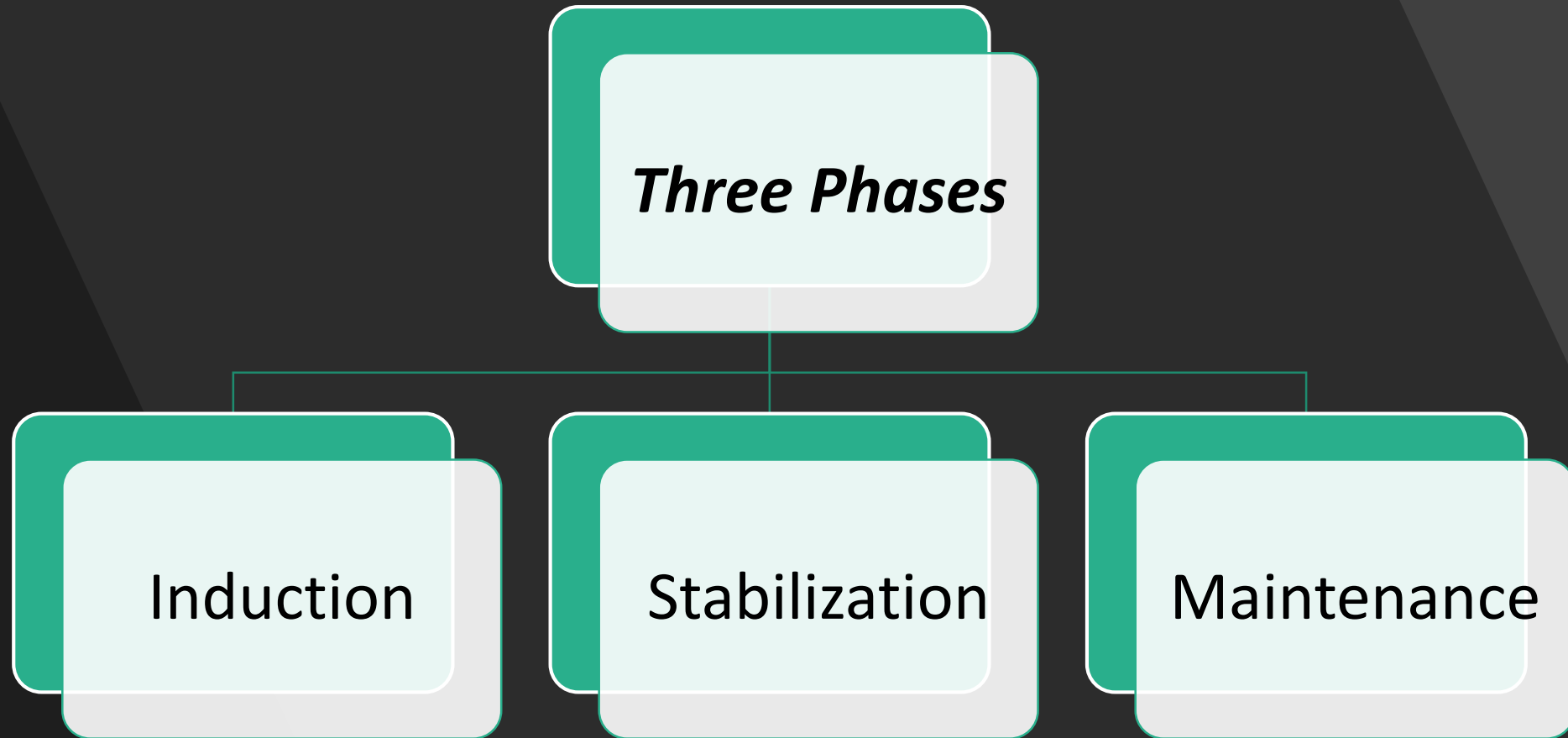
Buprenorphine



- Approved in October 2002 by the Federal Drug Administration (FDA)
- Buprenorphine is used in medication-assisted treatment (MAT) to help people reduce or stop their use of heroin or other opiates, such as morphine.
- Different types of Buprenorphine products include:
 - Bunavail (buprenorphine and naloxone) buccal film
 - Suboxone (buprenorphine and naloxone) film
 - Zubslov (buprenorphine and naloxone) sublingual tablets
 - Buprenorphine-containing transmucosal products for opioid dependency

Due to buprenorphine's opioid effects, it can be misused, particularly by people who do not have an opioid dependency. Naloxone is added to buprenorphine to decrease the likelihood of diversion and misuse of the combination drug product. When these products are taken as sublingual films, buprenorphine's opioid effects dominate and naloxone blocks opioid withdrawal.

Entering a Buprenorphine Treatment Program



The Induction Phase

The Induction Phase is the medically monitored startup of buprenorphine treatment performed in a qualified physician's office or certified OTP using approved buprenorphine products. The medication is administered when a person diagnoses with opioid dependency has abstained from using opioids for 12 to 24 hours and is in the early stages of opioid withdrawal. It is important to note that buprenorphine can bring on acute withdrawal for patients who are not in the early stages of withdrawal and who have other opioids in their bloodstream.

The Stabilization Phase

Stabilization begins after a patient has discontinued or greatly reduced their use of the problem drug, no longer has cravings and experiences few, if any, side effects. The buprenorphine dose may need to be adjusted during this phase. Due to the long-acting agent of buprenorphine, once patients have been stabilized, they can sometimes switch to alternate-day dosing instead of dosing every day (as directed by your physician).

The Maintenance Phase

Occurs when a patient is doing well on a steady dose of buprenorphine. The length of time of the maintenance phase is tailored to each patient and could be indefinite. Once an individual is stabilized, an alternative approach would be to go into a medically supervised withdrawal, which makes the transition from a physically dependent state smoother. People then can engage in further rehabilitation—with or without MAT—to prevent a possible relapse.

Are you a candidate for treatment?

- Have you been diagnosed with an opioid dependency?
- Are you willing to follow safety precautions for the treatment?
- Have you been cleared of any health conflicts with using buprenorphine?
- Have you reviewed other treatment options before agreeing to buprenorphine treatment?

Treatment of opioid dependency with buprenorphine is most effective in combination with counseling services, which can include different forms of behavioral therapy.

Side effects

Side effects from Buprenorphine are similar to those of opioids and can include:

- Nausea, vomiting, and constipation
- Muscle aches and cramps
- Cravings
- Inability to sleep
- Distress and irritability
- Fever

When taken as prescribed, buprenorphine is safe and effective.

Naloxone

Other Names: Narcan & Evzio

Naloxone

Act 139 of 2014 passed a new law that allows anyone who thinks they can help someone during an overdose get a prescription for naloxone and use it on another person in an emergency situation.

Used to rapidly reverse the life-threatening effects of opioid overdose

Ex: prescription pain medication, Heroin

Naloxone Administration

1. **INTRANASAL:** by spraying medication into the nose
2. **AUTO INJECTOR:** a pre-filled, ready to use dose of the medication that gives a shot by pressing the medicine against a person's upper leg
3. **INTRAMUSCULAR:** by giving a person a shot with a needle



**Good Samaritan Laws
Save Lives**



**Don't Be Afraid to Call
911**

Frequently Asked Questions

- **How do I obtain Naloxone?**

Naloxone can not be purchased over the counter. You will need to get a prescription from a Physician and take it to the drug store.

- **I am concerned about liability, am I protected?**

Legal risk goes away when you have taken these steps prior to administering Naloxone:

- You believe the person is suffering from an opioid overdose
- You have completed a brief training
- Before or right after giving naloxone, you called 911 for medical help

- **Where do I get an approved online training?**

<http://www.getnaloxonenow.org/>

Someone is there to HELP

- Mother/Father
- Grandparents
- Brother/sister
- Spouse/Partner
- Aunt/Uncle
- Cousin
- Therapist
- Coach/Teammate
- Co-worker/Boss/EAP
- Teacher/Classmate
- Priest/Rabi/Minister
- Neighbor
- Stranger





If you or someone you know is suffering from substance use disorder or mental health issues, reach out to someone for assistance.

~Your EAP can help~

www.alliedtrades-online.com

<http://www.drugs.com/methadone.html>

<http://www.methadonetreatmentcenter.com/just-what-is-methadone#3>

<http://www.ncbi.nlm.nih.gov/books/NBK64246/>

<https://store.samhsa.gov/shin/content/SMA12-4444/SMA12-4444.pdf>

www.youtube.com/watch?v=a8M_JfE5nkE