

Management of Patients with Opioid Dependence: A Review of Clinical, Delivery System, and Policy Options



The New England Comparative Effectiveness Public Advisory Council
**An Action Guide for Management of Opioid
Dependence: Next Steps for Patients and Families**

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Completed by:
The Institute for Clinical and Economic Review



Introduction

About this Guide

Evidence from clinical effectiveness reviews is critical to judgments that patients, clinicians, and health insurers must make about treatment choices and coverage policies. Yet that evidence is often not translated in a way that is helpful to inform health care decisions. This document is a companion policy guide designed to help patients with opioid dependence and their friends and family members make use of the results from a recent evidence review and meeting results, titled [“Management of Patients with Opioid Dependence: A Review of Clinical, Delivery System, and Policy Options”](#). This report formed the basis for the deliberations and votes of the New England Comparative Effectiveness Public Advisory Council (CEPAC) – an independent body composed of physicians, methodologists, and patient/public members that meets in a public, transparent forum to provide objective guidance on how information from evidence reviews can best be used by regional decision-makers to improve the quality and value of health care services.¹ The report pulls together the best available evidence on the effectiveness and value of management strategies for the treatment of opioid dependence from the published literature, findings from interviews with expert stakeholders, new survey results benchmarking the status of treatment in New England, and public testimony.

CEPAC held its meeting on management options for opioid dependence on June 20, 2014 in Burlington, VT. During the meeting, CEPAC voted on the comparative clinical effectiveness and value of different treatment approaches, and explored how best to apply the evidence to practice and policy with a distinguished Policy Expert Roundtable of patient advocates, clinical experts, and policy leaders from across New England.

This guide is intended to provide patients with the best available information on treatment options for opioid dependence, based on the published literature and expert experience. The content provided here is for informational purposes only, and it is not designed to replace professional medical advice.

About ICER and CEPAC

The Institute for Clinical and Economic Review (ICER) is an independent non-profit health care research organization dedicated to improving the interpretation and application of evidence in the health care system. The New England Comparative Effectiveness Advisory Council (CEPAC) is one of ICER’s two core programs. CEPAC is a regional body whose goal is to provide objective, independent guidance on the application of medical evidence to clinical practice and payer policy decisions across New England. Backed from a consortium of New England state health policy leaders, CEPAC holds public meetings to consider evidence reviews of a range of topics, including clinical interventions and models for care delivery, and provides judgments regarding how the evidence can best be used across New England to improve the quality and value of health care services. ICER manages the day-to-day operations of CEPAC as one of its core programs designed to translate and implement evidence reviews to improve their usefulness for patients, clinicians, payers, and policymakers. For more information about CEPAC, please visit cepac.icer-review.org.

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1. Understand that opioid dependence is a chronic, relapsing brain disease that can be treated and managed with medical care.

“Opioid” is a term that refers to a broad class of drugs. Medications commonly used to manage pain, such as oxycodone, hydrocodone, and Vicodin, contain opioids. Heroin is also a type of opioid. Opioids work by binding to parts of the brain known as receptors. When the opioid comes into contact with these receptors, the person using the opioid experiences a decreased sense of pain and a “high,” euphoric feeling.

What is dependence?

Physical opioid dependence is a chronic condition that occurs after regular use of opioids. The brain adapts to using the drug, and develops a physical need for regular doses. Even if the opioids you are taking have been prescribed to you by a doctor, it is still possible to become dependent. A person who is dependent may grow tolerant to opioids, meaning that they need to use more of the drug to achieve the same feeling. Opioid-dependent individuals may also experience signs of withdrawal when they try to stop using the drug. These signs might include pain in the muscles and bones, vomiting, chills, and an inability to sleep, and individuals may begin taking more of the drug to ease these symptoms. A person dependent on opioids may keep using the drug even if they know that it is harmful, and may feel unable to stop using the drug even if they have tried to quit.

The resources in the table below are provided to help you better understand opioid dependence and to recognize when you or a friend or family member may have the condition:

Information on Opioid Dependence	
Facts from the National Institute on Drug Abuse (NIDA)	http://www.wellnessproposals.com/mental-health/handouts/drugs-and-addiction/pain-medications-09.pdf
Painkiller Abuse Facts from NIDA	http://www.easyread.drugabuse.gov/painkiller-abuse-facts.php
Heroin Abuse Facts from NIDA	http://www.easyread.drugabuse.gov/heroin-facts.php
Opioid Information from NIDA	http://www.drugabuse.gov/publications/research-reports/prescription-drugs/opioids/it-safe-to-use-opioid-drugs-other-medications

2. Learn about the various treatment options for opioid dependence, and ask your doctor which treatment may be right for you. Decisions about medication, counseling, and other social supportive services should be based on a consideration of your individual health care needs and goals.

Opioid dependence can be managed and treated with appropriate medical care. Many types of treatment programs exist that differ in length of time and treatment setting, and whether or not medication is used. **In general, treatment with a medication such as methadone or buprenorphine has been shown to be more effective than treatment without medication, and long-term treatment usually has better results for patients than short-term treatment.** This may not be true for all patients, however, so it is important that you work with your doctor to figure out the best treatment option for you. There is no “one-size fits all” approach to managing opioid dependence, and sometimes patients have to try a few different treatments before finding one that works.

The sections below are designed to help you understand some of the main treatment options available. Use this information to start a conversation with your doctor about which approach is right for you.

Types of Treatment

- **Short-term managed withdrawal (often referred to as “detoxification”):**

Short-term withdrawal management programs focus on helping patients to stop all opioid use, typically within 30 days. Short-term withdrawal management programs may or may not involve the use of medication to assist in detoxification.

Though longer term maintenance programs are recommended for most people, **short-term withdrawal approaches with a focus on stopping the use of drugs and medication may be a good fit for people who:**

- Have not been using opioids for a long time
- Have family and friends to support them throughout their recovery

Though short-term withdrawal may work well for some patients, it is important to discuss this option carefully with your doctor. Many people who enter into a short-term program that is not well-suited to their individual needs have a high chance of relapsing, or restarting their use of opioids after treatment.

- **Medication-Assisted Maintenance Therapy:**

Maintenance therapy is the most effective treatment option for most patients with opioid dependence. Maintenance therapy means that people remain on a medication, typically methadone or Suboxone®, for a longer period of time. The options for medication are explained in more detail below.

Different patients may remain in maintenance therapy for different periods of time. Some people remain on the medication for the rest of their life. Others slowly reduce the amount of medication they take with the close supervision of a doctor, and may eventually stop taking the medication altogether. This slow decrease in medication is known as a taper. If you are considering a taper, you should work closely with your doctor to ensure that it is done safely and in a way that will not disrupt your treatment. Relapses are common after a taper and are a sign that you should work with your doctor to restart your medication. If you begin to crave opioids after you have tapered, you should tell your doctor immediately.

Types of medication

Medication is often an essential part of treatment programs. Medications used in maintenance therapy can help to reduce your cravings for opioids, so that you feel less of a need to take the drugs. They can also block the effect that opioids have on your brain, so that you do not experience the same “high.” Each medication comes with different benefits and potential harms, so it is important to consider which option is best for you. The information and resources below can help you understand the different types of medication and talk with your doctor about what method is right for you.

Methadone

Methadone is a medication that has been used to treat patients with opioid dependence for close to 50 years. Methadone is provided in specialized clinics called “Opioid Treatment Programs,” or OTPs. Methadone is usually not available for take-home use, meaning that people must go to clinic to receive their daily dose of medication.

The amount of medication you take, as well as the length of time you’ll be on the medication, may be different for each patient. When you begin treatment, you’ll work with a doctor to figure out the best individualized plan for your treatment.

What are the advantages of methadone?

- Reduces cravings for opioids
- Reduces euphoric effect of opioids

Are there risks or side effects?

Treatment with methadone does come with some side effects. People taking methadone most commonly experience:

- Constipation
- Irregular heartbeats
- Sweating
- Can be addictive

Taking more methadone than is prescribed, or using other drugs while on methadone, can lead to overdose. Methadone should always be taken as your as prescribed by your doctor.

Who are the best candidates for methadone treatment?

The structure and routine of daily visits to a methadone clinic may be beneficial for some people. In general, methadone is often the best option for:

- Patients with higher opioid tolerance levels and more severe dependence
- Patients with longer histories of dependence
- Patients with limited social support, such as friends or family

However, many patients without these characteristics have been successful with methadone.

The resources below provide more information on methadone therapy.

Resources for More Information on Methadone	
Centers for Disease Control and Prevention Fact Sheet	http://www.cdc.gov/idu/facts/methadonefin.pdf
Patient Information from the Center for Addiction and Mental Health (CAMH)	https://knowledgex.camh.net/amhspecialists/resources_families/Pages/methadone_dyk.aspx
Quick Facts on Methadone from CAMH	https://knowledgex.camh.net/amhspecialists/resources_families/Pages/methadone_therapy.aspx
Patient Information Booklet on Methadone	http://www.fhi360.org/sites/default/files/media/documents/Patient%20Information%20Booklet%20on%20Methadone%20Maintenance%20Therapy.pdf

Buprenorphine

Buprenorphine is a medication that can be taken alone or in combination with another medication called naloxone. When combined with naloxone, this medication is known as Suboxone®.

Suboxone® works in a similar way to methadone to satisfy cravings for opioids. It comes in the form of a small film or pill that you place under your tongue once every day. Doctors with a specialized license are able to prescribe Suboxone® from their office and can give patients up to a 30-day supply.

What are the advantages?

- Decreased cravings
- Blocks pleasurable effects of opioids
- No daily clinic visits

Are there risks or side effects?

- Headache
- Sweating
- Possible liver problems
- Use of benzodiazepines while taking Suboxone® can lead to overdose
- Suboxone® should not be taken if you are pregnant, but other forms of buprenorphine are safe for pregnant women

The resources below provide additional information on buprenorphine and Suboxone®.

Information on Buprenorphine and Suboxone®	
Suboxone® Information	http://www.suboxone.com/
Substance Abuse and Mental Health Services Administration Buprenorphine Information	http://buprenorphine.samhsa.gov/about.html
Read stories of people who have used Buprenorphine for treatment	http://www.naabt.org/true_stories.cfm

Oral Naltrexone

Naltrexone is a type of medication that blocks the effects of opioids. If you use opioid while on Naltrexone, they will not provide the same euphoric feeling they once did. Naltrexone is given to patients who have not used opioids in at least 7 days. You should not take naltrexone if you have used opioids in the last 7 days, or if you are at risk of using opioids, as naltrexone can increase your risk of an overdose if taken with opioids. Naltrexone is taken once per day as a pill. A monthly injection of naltrexone called Vivitrol® is also sometimes used, though its effects are less proven.

Information on Oral Naltrexone	
The Facts about naltrexone for Treatment of Opioid Addiction	http://store.samhsa.gov/shin/content//TheFactsaboutNaltrexoneforTreatmentofOpioidAddiction.pdf

Finding Treatment

Unfortunately, treatment can be difficult to find in some areas of New England. Laws place limits on the number of patients that physicians can treat with Suboxone® or buprenorphine, and many clinics providing methadone have long waiting lists. The resources below can help you to find treatment near you.

Treatment Locators	
Substance Abuse and Mental Health Services Administration (SAMHSA) Opioid Treatment Program Locator	http://dpt2.samhsa.gov/treatment/directory.aspx
Suboxone® Treatment Locator	http://www.suboxone.com/treatment-plan/find-a-doctor
Buprenorphine Locator	http://www.buprenorphine.samhsa.gov/bwns_locator/index.html
Register for the Buprenorphine Patient-Physician Treatment Match	https://www.treatmentmatch.org/patients.cfm
SAMHSA 24/7 Treatment Hotline	1-800-662-HELP (4357)
Methadone Clinic Locator	http://www.methadonecliniclocator.com

Goal Setting

Setting goals for yourself is a good way to stay motivated throughout your recovery. Every patient will have different goals based on their own unique circumstances. Sharing your personal goals with your doctor can also help them to better understand your needs and to develop a treatment plan that will help you to reach your goals. Resources to help you form goals for your treatment are provided below.

Goal Setting Tips and Worksheets	
Creating SMART Goals	http://www.choosehelp.com/topics/recovery/smart-goal-setting
SAMHSA Goal Setting for Real Life- Goal recommendations	http://www.samhsa.gov/recoverytopractice/RTP-Contribution-Detail-For-Goal-Setting%20for%20a%20Real%20Life-99.aspx

3. Understand your options for counseling, social support services, and peer support programs that may assist in your recovery.

Opioid dependence often involves many behavioral, emotional, and social factors. Supportive services such as addiction counseling, sober housing, or peer support can help you to manage all of the factors of dependence. While social supportive services may not be helpful or necessary for everyone, they can be helpful to many patients.

- **Addiction Psychologists and Counselors**

For some patients, psychologists and counselors are important in supporting recovery.

Psychologists and counselors can help you to address the emotional aspects of addiction and can offer coping strategies throughout recovery. When looking for a psychologist or counselor, check that they have experience working with addiction. Some resources for finding addiction counselors are provided in the table below.

Search for an addiction psychologist or counselor in your state	
American Academy of Addiction Psychiatry	http://www.aaap.org/patient-resources/find-a-specialist/
Psychology Today	http://therapists.psychologytoday.com/rms/
US News Health	http://health.usnews.com/doctors/location-index/addiction-psychiatrists

- **Peer Support**

Peer support programs allow you to connect with your peers in recovery, either in person or online. Share your goals, fears, or concerns with treatment, and support one another in recovery. The resources on the following page can help you to find peer support online or in your area.

Peer Support	
Narcotics Anonymous	http://www.na.org/
SMART Recovery New England	http://www.smartne.org/meetings.html
Buprenorphine Discussion and Support Forum	http://www.addictionsurvivors.org/vbulletin/forumdisplay.php?f=45
Learn2Cope Discussion Forum	http://www.learn2cope.org/forum/
In The Rooms online community	http://www.intherooms.com/
“We Speak Methadone:” A NAMA Recovery Forum	http://methadone.org/wespeakmethadone/
MARS Project: Peer-Based Recovery Support	http://marsproject.org/
Vermont Recovery Network: Recovery Coaches	https://vtrecoverynetwork.org/coaching.html

Information for Families

Addiction is a disease that affects not just the person using drugs, but also their family and friends. Coping with a family member's addiction may be difficult, and you may be unsure of how to talk to them about their substance abuse. Resources are provided below that provide guidance on numerous topics for families of people with opioid dependence, including tips for starting a conversation with a loved one about their suspected opioid dependence and how to find them the help they need.

Resources for Parents of Youth with Drug Dependence	
Intervention eBook: What to do if your child is drinking or using drugs	http://www.drugfree.org/wp-content/uploads/2012/04/2014-intervention_guide.pdf
Treatment eBook: How to find the right help for your child with an alcohol or drug problem	http://www.drugfree.org/wp-content/uploads/2012/04/treatment_guide-2014.pdf
Medication-Assisted Treatment: An eBook for Parents & Caregivers of Teens & Young Adults Addicted to Opioids	http://www.drugfree.org/wp-content/uploads/2014/05/MAT_EBOOK_2014v2.pdf
Have a Conversation, Not a Confrontation: Talking to your child about drug use	http://www.drugfree.org/wp-content/uploads/2014/05/Have-a-Conversation-Not-a-Confrontation.pdf
Resources for Families	
Recovery For Families	http://www.drugfree.org/wp-content/uploads/2014/05/Recovery-for-Family-Members.pdf
What Is Substance Abuse Treatment: A Booklet for Families	http://store.samhsa.gov/product/What-Is-Substance-Abuse-Treatment-A-Booklet-for-Families/SMA14-4126
Family Therapy Can Help for People in Recovery from Mental Illness of Addiction	http://store.samhsa.gov/product/Family-Therapy-Can-Help-For-People-in-Recovery-From-Mental-Illness-or-Addiction/SMA13-4784
Alcohol and Drug Addiction Happens in the Best of Families	http://store.samhsa.gov/product/Alcohol-and-Drug-Addiction-Happens-in-the-Best-of-Families/SMA12-4159