What's next?

Learn more about OUD and how to use this brochure:

learnabouttreatment.org

Find naloxone and overdose info: stopoverdose.org

More information on medications:

samhsa.gov/medication-assisted-treatment

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This brochure provides basic information for educational purposes. Speak with a health care professional to make an informed decision that best fits your needs including learning the risks and benefits of all treatment options.

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Your preferences

Setting:
Dosing frequency:
Clinic visit frequency:
Counseling:
Support group:
Medication options:
Other:

About OUD

What is opioid use disorder?

Opioid use disorder (OUD) is a long term medical condition. People with the condition are physically dependent on opioids <u>and</u> have brain changes that affect their thinking, priorities, and relationships.

OUD can come back if not treated properly. You may need to try more than one type of treatment to find what works best for you.

What can medications do for me?

Medications are proven to work the best at treating opioid use disorder.

They help:

- · Manage craving and withdrawal.
- · Reduce illicit opioid use.
- Decrease the risk of having an overdose.

Medications can provide stability, allowing people to address other things in their lives.

You <u>can</u> be in recovery and be on medications at the same time.



Medications
for
Opioid Use
Disorder

Treatment options



There are **three** places where you can get medications for opioid use disorder:

Opioid treatment program (OTP)

- Methadone, buprenorphine, or naltrexone available.
- Highly structured—counseling and supervised dosing may be required.

Medical office/Primary care

- Buprenorphine or naltrexone available.
- Familiar medical office setting.
- Less structure (often weekly or monthly visits, some don't require counseling).
- · Appointment often needed.

Community program

- Buprenorphine or naltrexone available.
- Other services may be offered (syringe exchange, housing supports, etc.).
- May have drop-in visits.

Methadone

Buprenorphine

Naltrexone

How does this medication work?

- Methadone is a **full** opioid medication.
- The more you take the more you will feel its effects.
- Manages cravings and withdrawal by binding to opioid receptors.

- Buprenorphine is a **partial** opioid medication.
- Has a ceiling effect, so above a certain dose you stop feeling more of its effects.
- Manages cravings and withdrawal by binding to opioid receptors.

- Naltrexone is an opioid blocker.
- It is not an opioid, so you won't feel an opioid effect.
- Helps manage cravings for some people.

Does it lower my risk of dying? Based on research that tracked outcomes in the real world.

- Lowers risk of death by about 50%.
- Lowers risk of death by about 50%.
- Has not been shown to lower the risk of death.

How long does it last, and how do I take it?

- Lasts about 24 hours and is taken by mouth.
- Lasts about 24 hours, usually taken by mouth (implant or injection possible).
- An injection that lasts for 28 days.
 You can't use any opioids for 7-10 days before taking naltrexone.

Where can I get it, and how often do I need to go?

- Dispensed only at opioid treatment programs.
- You will need to visit the OTP 6 days a week to start, but this can decrease over time.
- Can be prescribed by a medical provider and picked up at a pharmacy, or dispensed at some opioid treatment programs.
- Visits vary from daily to monthly.

- Prescribed and given by a medical provider, or provided at an opioid treatment program.
- Visits vary from weekly to monthly.

Will I need to go to counseling?

- Requires regular urine drug testing and counseling.
- Most providers require urine drug testing and some require counseling.
- Some providers require urine drug testing and counseling.