How do we make an evidence-based treatment referral?

Dr. Alexander Walley, Boston Medical Center

Dr. Sarah Wakeman, Massachusetts General Hospital
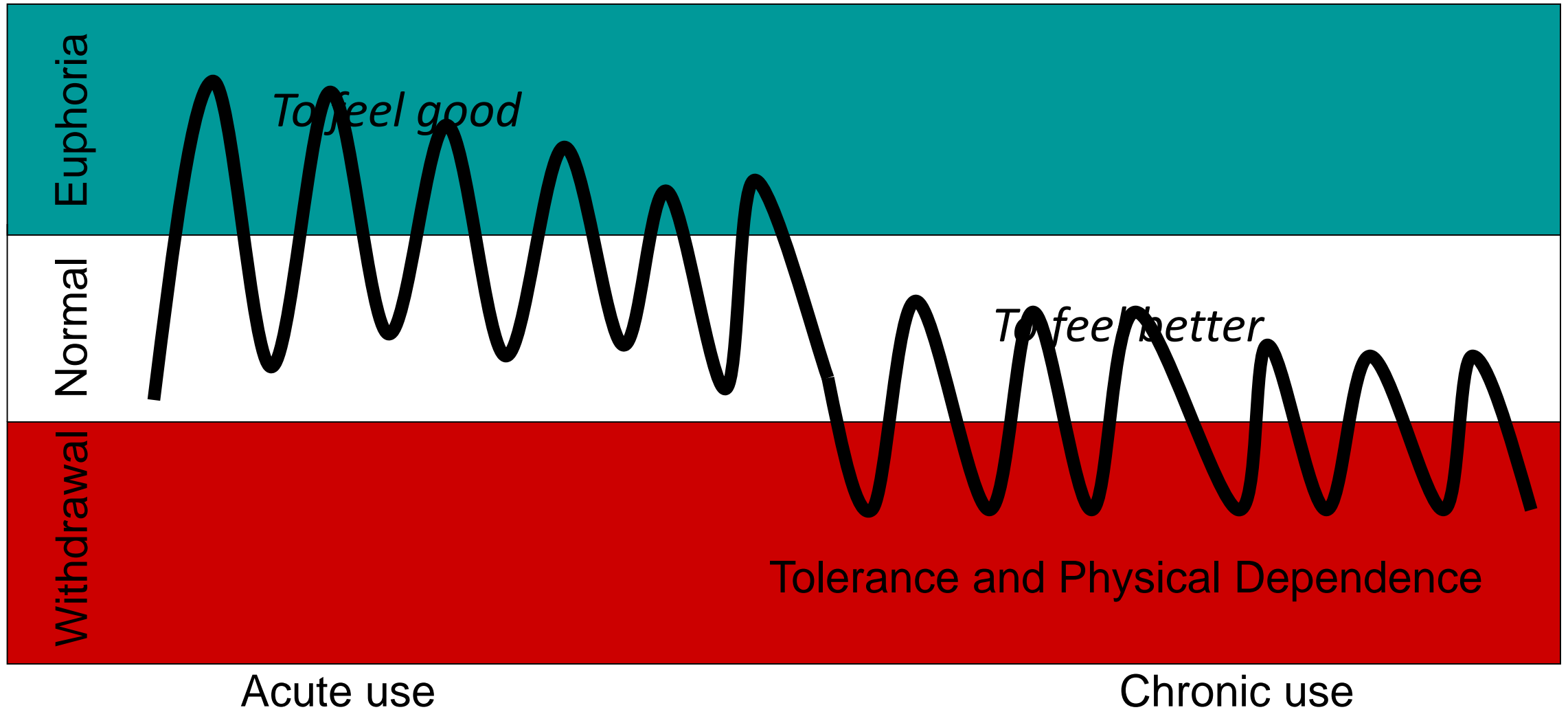
Dr. Shorta Yuasa, Lahey Health Behavioral Services

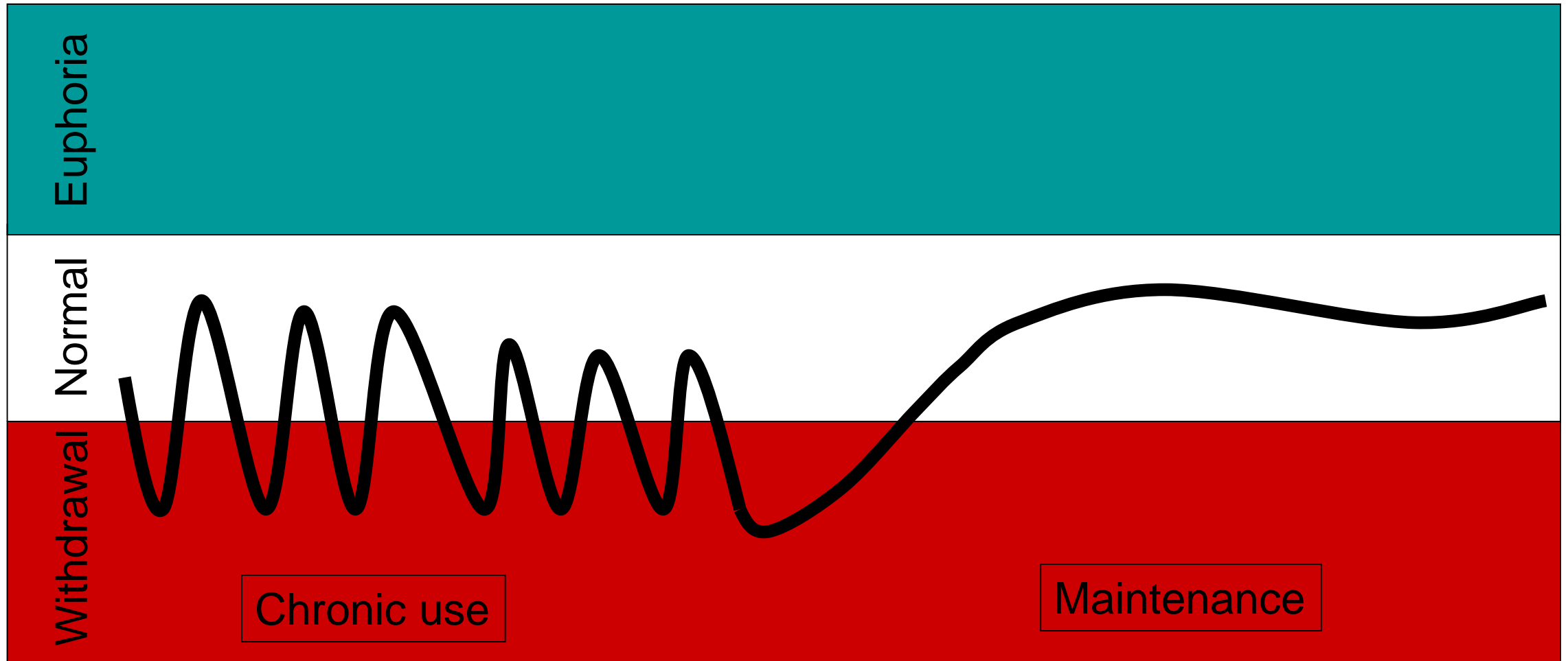**PAARI National Law Enforcement Summit**
Wednesday, December 6, 2017
10:15am-1100am

Why do people use opioids?

Maintenance Treatment for Severe Opioid Use Disorder

Goals of medication treatment for opioid use disorder

Relief of withdrawal symptoms	• Low dose methadone (30-40mg), buprenorphine
Opioid blockade	• High dose methadone (>60mg), buprenorphine, naltrexone
Reduce opioid craving	• High dose methadone (>60mg), buprenorphine, naltrexone
Restoration of reward pathway	• Long term (>6 months) • methadone, buprenorphine, naltrexone

Overdose deaths decrease when treatment increases

Methadone and Buprenorphine in Baltimore:
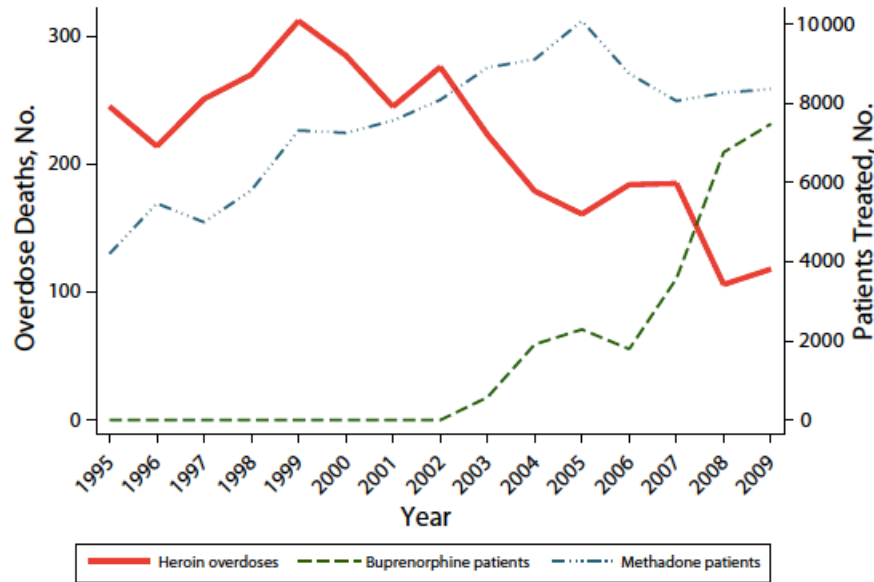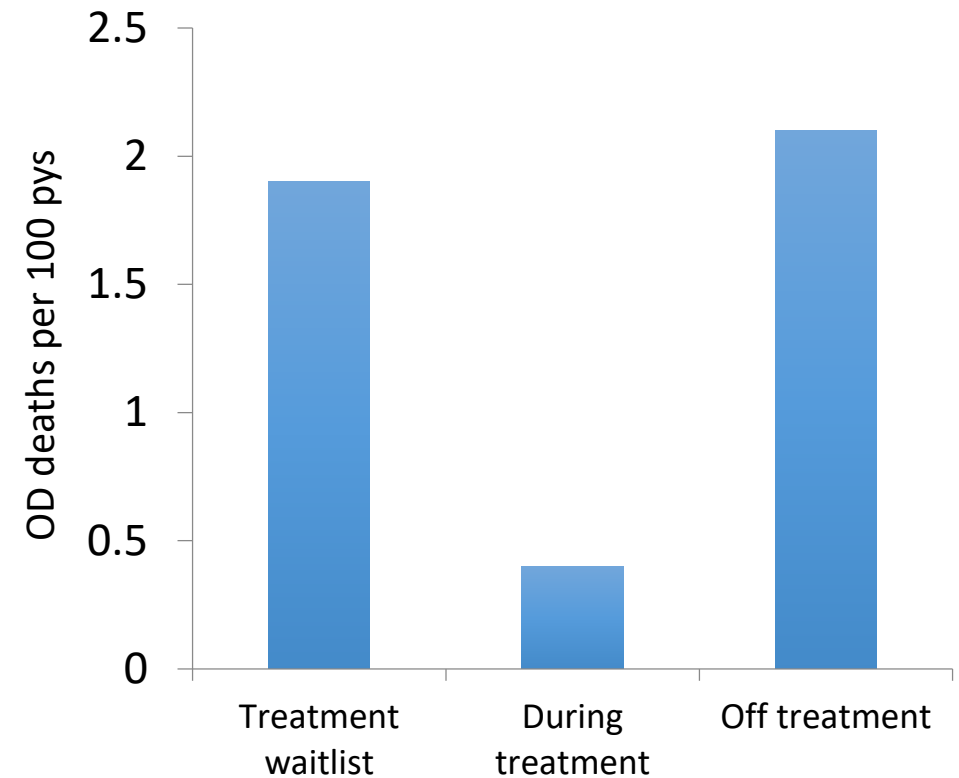Schwartz et al. AJPH 2013.

FIGURE 1—Heroin overdose deaths and opioid agonist treatment: Baltimore, MD, 1995–2009.
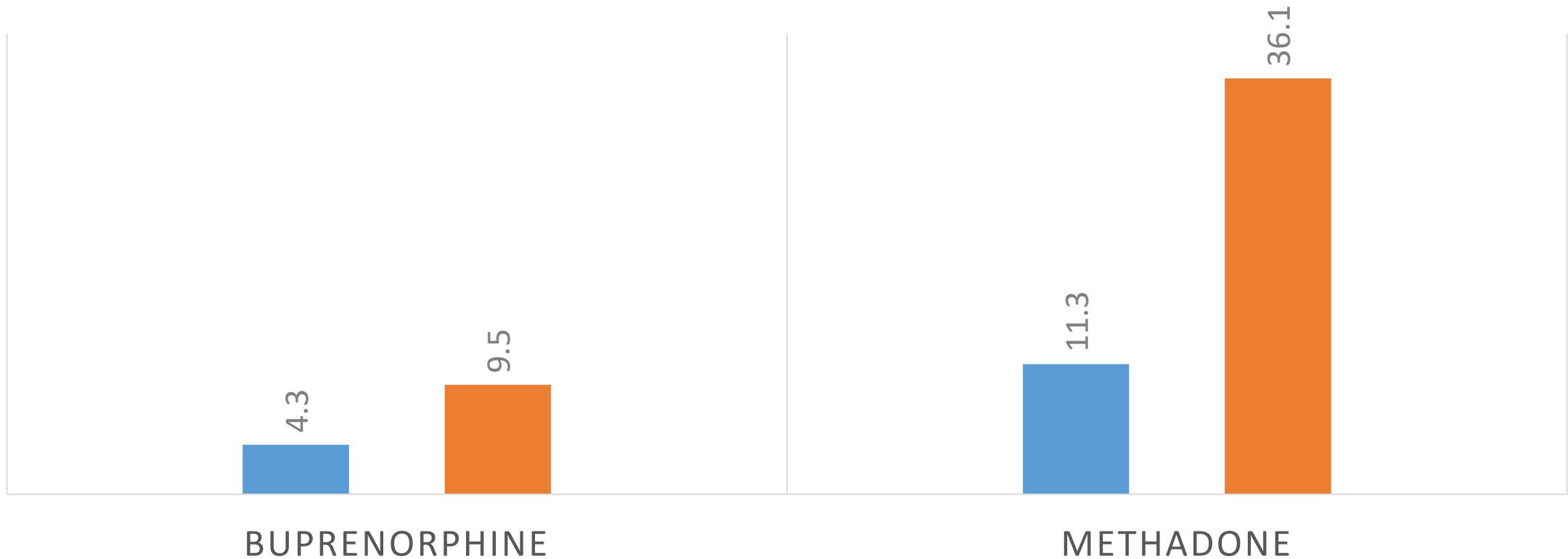
Methadone in Norway:
Clausen et al. Addiction 2009

Medication saves lives. People die when medication stops.

ALL CAUSE MORTALITY RATE PER 1000 PERSON YEARS, IN AND OUT OF TREATMENT

Sordo L, Barrio G, Bravo MJ, Indave BI, Degenhardt L, Wiessing L, Ferri M, Pastor-Barriuso R. Mortality risk during and after opioid substitution treatment: Systematic review and meta-analysis of cohort studies. BMJ 2017 Apr 26;357:j1550.

Opioid Detox Outcomes

- Low rate of retention in treatment

- High rates of relapse post treatment
    - < 50% abstinent at 6 months
    - < 15% abstinent at 12 months
    - Increased rates of overdose due to decreased tolerance

So, how long should maintenance treatment last?

Long enough

O'Connor PG JAMA 2005

Mattick RP, Hall WD. Lancet 1996

Stimmel B et al. JAMA 1977

Matching Patients to Maintenance Medications
– methadone, buprenorphine, naltrexone

- **The choice between methadone, buprenorphine or naltrexone depends upon:**
  - Patient preference - Past experience
  - Access to treatment setting
  - Ease of withdrawal
  - Risk of overdose