camh Centre for Addiction and Mental Health

Opioid agonist therapy

Information for clients

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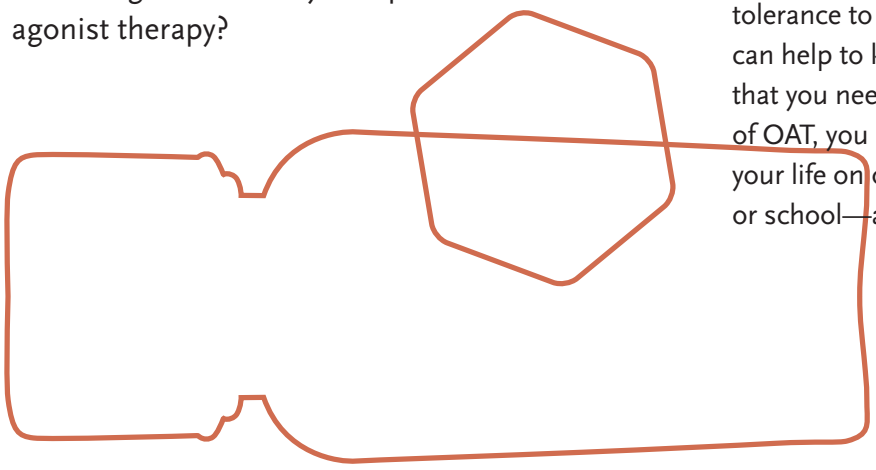


What is opioid agonist therapy?

Opioid agonist therapy (OAT) is an effective treatment for addiction to opioid drugs such as heroin, oxycodone, hydromorphone (Dilaudid), fentanyl and Percocet. The therapy involves taking the opioid agonists methadone (Methadose) or buprenorphine (Suboxone). These medications work to prevent withdrawal and reduce cravings for opioid drugs. People who are addicted to opioid drugs can take OAT to help stabilize their lives and to reduce the harms related to their drug use.

How does opioid agonist therapy work?

Methadone and buprenorphine are long-acting opioid drugs that are used to replace the shorter-acting opioids the person is addicted to. Long-acting means that the drug acts more slowly in the body, for a longer period of time. By acting slowly, it prevents withdrawal for 24 to 36 hours without causing a person to get high. OAT also helps to reduce or eliminate cravings for opioid drugs.

Treatment works best when combined with other types of support, such as individual or group counselling.

How will opioid agonist therapy make me feel?

When you first start treatment, you may feel lightheaded or sleepy for a few days, but you will quickly develop a tolerance to these effects. OAT won't get you high, but it can help to keep away the physical cravings—the feeling that you need to get high. Once you're on a stable dose of OAT, you should feel "normal" and be able to focus your life on other aspects of your life—like work, family or school—and taking care of yourself.

Because opioid agonist therapy is a long-acting medication, it may take four or five days for you to feel the full effect of an adjustment in your dose.

How is opioid agonist therapy taken?

Methadone comes in the form of a drink. The type of buprenorphine most commonly used for addiction treatment is called Suboxone. It is a pill that is absorbed under the tongue. Suboxone also includes naloxone, which can cause withdrawal if it is injected. Naloxone is added to help prevent the abuse of buprenorphine.

Your doctor will give the pharmacy a prescription for your opioid agonist therapy. When you first start on OAT, you will be asked to go to your pharmacy each day to take the medication. You can begin to take home some doses once your treatment and life are stable. This usually takes about two months. Take-home doses are called "carries."

Will opioid agonist therapy help with pain relief?

If your pain is caused by withdrawal symptoms, there is a good chance that it will go away with OAT. OAT may relieve other types of pain for a few hours after you take your dose. If your dose has been stabilized and pain continues to be an issue, talk with your doctor about other options to improve pain control.

Does opioid agonist therapy have any side-effects?

Only some people who take OAT experience side-effects, and when they do, it is usually early in treatment, and when they are on a higher dose. Side-effects tend to be stronger with methadone than buprenorphine.

Side-effects can include constipation, excessive sweating, dry mouth, changes in sex drive, drowsiness and weight gain. Talk with your doctor about anything you experience that might be a side-effect.

Can opioid agonist therapy interact with other drugs?

Methadone and buprenorphine can interact with other medications. Always tell your pharmacist or doctor about all other drugs you are taking, including medications and herbal remedies.

Mixing methadone or buprenorphine with other drugs that depress the central nervous system can be extremely dangerous. Avoid other opioids, alcohol and benzodiazepines (e.g., Ativan, Xanax, Restoril, Valium, clonazepam). Taking these is especially risky when you first start OAT. Using other drugs while taking OAT can also cause your dose of OAT to wear off more quickly, meaning you could experience withdrawal.

Are there any safety risks with opioid agonist therapy?

Trained health care professionals follow strict guidelines to deliver methadone and buprenorphine as OAT. Thorough research has been done on these drugs to establish their safe use. People take OAT for years without any ill effects.

However, methadone and buprenorphine are powerful drugs. They can be extremely dangerous if taken by someone for whom they are not prescribed. Never sell or give away any of your dose. Children are particularly at risk. Even a small amount can be fatal for a child. Always store your carries in a locked box.

All opioid drugs have a risk of overdose. The risk is higher with methadone than with buprenorphine. The

risk is especially high when you start treatment, and if you stop taking opioids for a while and then start again. Mixing opioids with other drugs also increases the risk of overdose.

Early signs of overdose include problems with co-ordination and balance, trouble speaking, slurring, and feeling sleepy or "nodding off" throughout the day. Advanced signs include bluish colour in the lips and fingers, eyes with very small pupils, not being able to wake up, deep snoring or gurgling sounds and slow, erratic breathing. *Any signs of overdose should be treated as a medical emergency: Call 911!*

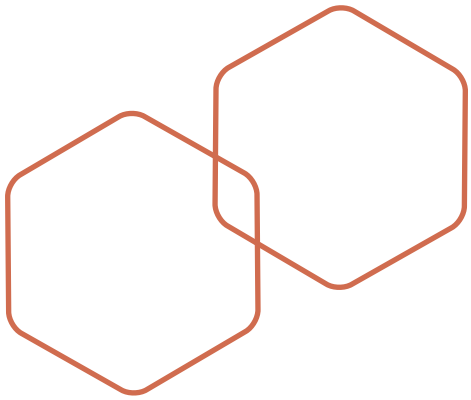
Naloxone is a medication that can reduce the effects of overdose temporarily and allow time for medical help to arrive. It is now available in a kit for injection or as a nasal spray. Anyone who takes opioids should have naloxone on hand for friends or family to administer in an emergency. Ask your doctor, pharmacist or public health unit where you can get naloxone.

How long should I stay on opioid agonist therapy?

How long OAT will be helpful to you depends in part on how much time you need to deal with the issues that led you to opioid use in the first place. These issues could be emotional, such as having experienced trauma, or they could be physical, such as feeling chronic pain from an injury or illness. It also depends on your biology. Long-term opioid use has been shown to make changes to the brain that can make it very difficult for people to live without opioids.

Stopping OAT before you are ready carries a high risk of relapse and of overdose. Continuing OAT over a longer term helps to keep you safe. People who start OAT usually continue with the treatment for at least a year or two. Some continue for many years. How long you stay in treatment depends on what is right for you.

For more detailed information on opioid agonist therapy, see the CAMH publication *Making the Choice, Making It Work: Treatment for Opioid Addiction*, available online or in print at store.camh.ca.



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