

Medication Assisted Treatment for Opioid Addiction: Challenges & Opportunities



American Association for the Treatment of Opioid Dependence, Inc.

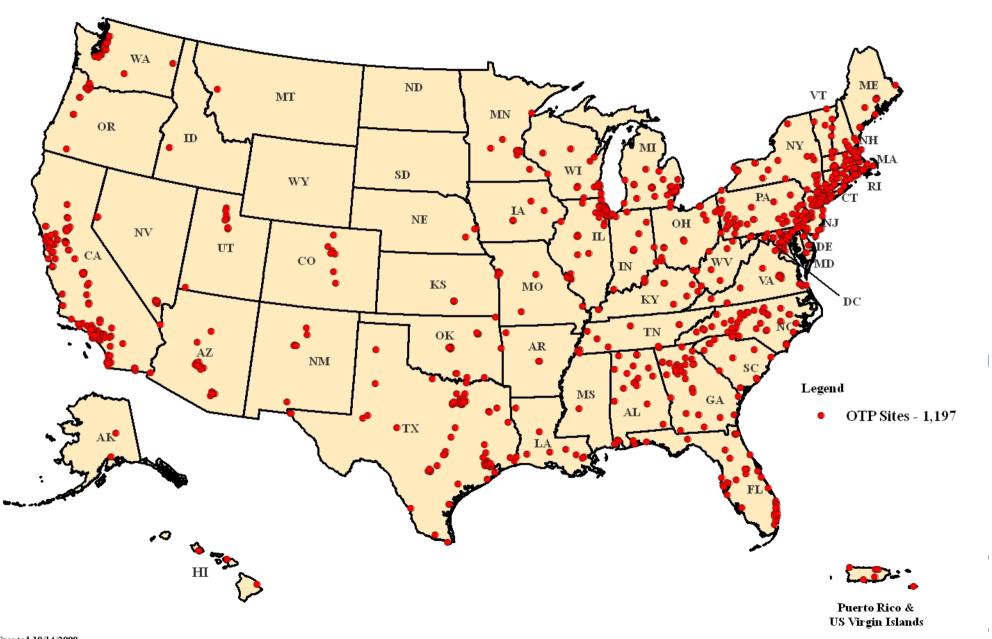
Expanding Access to Quality Addiction Treatment Services

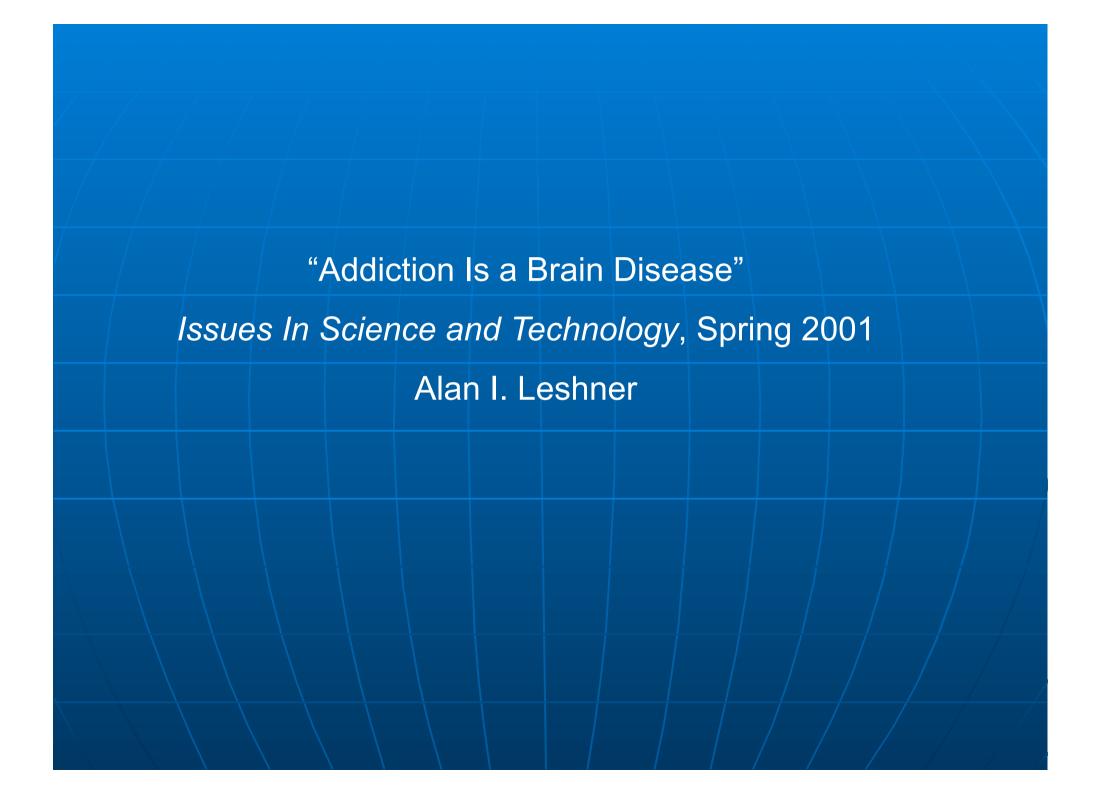
Mark W. Parrino, M.P.A.

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Kyiv,

Center for Substance Abuse Treatment Concentration of OTP Sites in United States





"A core concept that has been evolving with scientific advances over the past decade is that drug addiction is a brain disease that develops over time as a result of the initially voluntary behavior of using drugs. The consequence is virtually uncontrollable compulsive drug craving, seeking and use that interferes with, if not destroys, an individual's functioning in the family and in society. This medical condition demands formal treatment."

Issues In Science and Technology, Spring 2001

Principles of Drug Addiction Treatment: A Research-Based Guide National Institute on Drug Abuse National Institutes of Health May 2009

"Addiction affects multiple brain circuits, including those involved in reward and motivation, learning and memory, and inhibitory control over behavior. Some individuals are more vulnerable than others to becoming addicted, depending on genetic makeup, age of exposure to drugs, other environmental influences and the interplay of all these factors."

NIDA

Medication-Assisted Treatment For Opioid Addiction in Opioid Treatment Programs

A Treatment Improvement Protocol TIP 43





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A Treatment Improvement Protocol
TIP 43

U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
2005

"Discussions about whether addiction is a medical disorder or a moral problem have a long history. For decades, studies have supported the view that opioid addiction is a medical disorder that can be treated effectively with medications administered under conditions consistent with their pharmacological efficacy, when treatment includes comprehensive services, such as psychosocial counseling, treatment for co-occurring disorders, medical services, vocational rehabilitation services and case management services."

Matching Patients to Individual Needs

- No single treatment is appropriate for all individuals
- Effective treatment attends to multiple needs of individual, not just his/her drug use
- Treatment must address medical, psychological, social, vocational and legal problems

Source: National Institute on Drug Abuse (NIDA)

Duration of Treatment

- Depends on patient problems/needs
- Less than 90 days is of limited/no effectiveness for residential/outpatient setting
- A minimum of 12 months is required for methadone maintenance
- Longer treatment is often indicated

Source: National Institute on Drug Abuse (NIDA)

"The problem was one of the rehabilitating people with a very complicated mixture of social problems on top of a specific medical problem, and that (practitioners) ought to tailor their programs to the kind of problem they were dealing with. The strength of the early programs as designed by Marie Nyswander was in their sensitivity to individual human problems. The stupidity of thinking that just giving methadone will solve a complicated problem seems to me beyond comprehension."

Lifetime and Recent Prevalence of Psychiatric Symptoms Among Male Methadone Maintenance Patients

Psychiatric Symptoms

	Percent With Symptom	
Serious depressions	Lifetime	Past 30 days
Serious anxiety	48.3	16.6
Hallucinations	51.7	22,9
Difficulty Understanding, concentrating, remembering	8,6	2.3
Trouble controlling violent behavior		
Thoughts of suicide	28.0	16.6
Suicide attempt	24.9	7.9
	15.3	3.5
Had one or more symptoms	8.5	0.4
Valid cases – 567	68.4	35.4

Source: Ball and Ross. The Effectiveness of Methadone Maintenance Treatment



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