

How do I talk to my doctor about treatment?

Talking to your doctor about medical treatment for OUD can be hard. Writing your questions before your appointment can be helpful. Here are some questions you might ask:

- How can medicine help my recovery?
- What medicine do you think is best for me? Why is it the best for me?
- What other steps should I take to help my recovery?



How long do I need to take medicine?

It depends. Many people take medicine every day for a long time, sometimes for the rest of their life. We don't ask people who take cholesterol medicine to stop when it's working. The same is true for the treatment of OUD and other long-term conditions.

What else do I need to know?

Can I become addicted to the medicines used to treat OUD?

Methadone and buprenorphine don't replace one addiction with another. When you're treated with these medicines at the right dose, they don't get you high. Instead, they lower opioid cravings and withdrawal. These medicines restore balance to your brain so you can heal and stay strong in your recovery.

What happens if I take an opioid while I'm taking one of the OUD treatment medicines?

Using a prescription opioid or recreational drugs while using medicines that treat addiction can be dangerous. This can cause trouble breathing, coma, and even death. Talk to your doctor if you have any questions or concerns. They may be able to prescribe options that don't interact, or they may change your dose. It's important to tell your doctor about all other medicines you use, including vitamins and herbs. Don't stop using any medicines without first talking to your doctor.

Where can I find more information?

For more information, please visit: https://dmh.mo.gov/ada/provider/medicationassistedtreatment.html.

Medicine can help you or a loved one recover from opioid use disorder



Recovery is real:

Medical treatment for opioid use disorder

This resource created by:





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What is medical treatment for opioid use disorder (OUD)?

Medical treatment for OUD is when your doctor gives you medicine to help you stop craving opioids. Heroin, OxyContin©, and Percocet© are examples of opioids. Specially trained physicians, psychiatrists, nurse practitioners, and physician assistants can all prescribe this medicine.



Is medicine all I need for my recovery?

It depends. You may need other services to help you get out of the cycle of addiction and rebuild your life, like:

- Talking to a counselor about what leads to your drug use
- Meeting with other people like you who are also in treatment
- Getting help to find sober housing and a job

What medicines are available?



You can get a tablet to take by mouth, or a film that dissolves under your tongue. Buprenorphine is a replacement for opioids like heroin.

Pros

- Lowers cravings for many people
- Helps people stay away from heroin and pills
- You can get a prescription to fill at your local pharmacy

Cons

- Can cause withdrawal if there are still a lot of opioids in your system
- May need to try different amounts to get the right dose
- Must be taken every day

This medicine is best for patients who are willing and able to take their medicine daily, as prescribed.



Methadone

Also called Methadose or Dolophine

Methadone usually comes as a liquid that you drink. It is a replacement for opioids like heroin. You must get methadone from an Opioid Treatment Program.

Pros

- Methadone has been used for many years
- There is a lot of evidence showing it lowers cravings and stops withdrawal

Cons

- You must take your dose every day at a supervised clinic for at least the first few months
- You'll need to be especially careful about dosing and not mixing with other drugs

This medicine is best for people who can go to a methadone clinic every day and for people who need something stronger than buprenorphine to help with cravings.



Also called Depade, Rivia, or Vivitrol

Naltrexone works differently. This medicine helps prevent you from getting cravings. You can get a monthly shot or a daily pill.

Pros

• If you get the shot, you only have to go to the doctor and take the medicine once a month

Cons

- You have a higher chance of overdose (compared to buprenorphine or methadone) if you stop taking it
- Opioids must be out of your system before starting this can take 7 to 10 days of not using

This medicine is best for people who have a less severe drug use history and have support from family, friends, or others.

To find treatment services near you, visit http://www.missouriopioidstr.org.