

METHADONE MAINTENANCE THERAPY IN OPIATE USE DISORDER

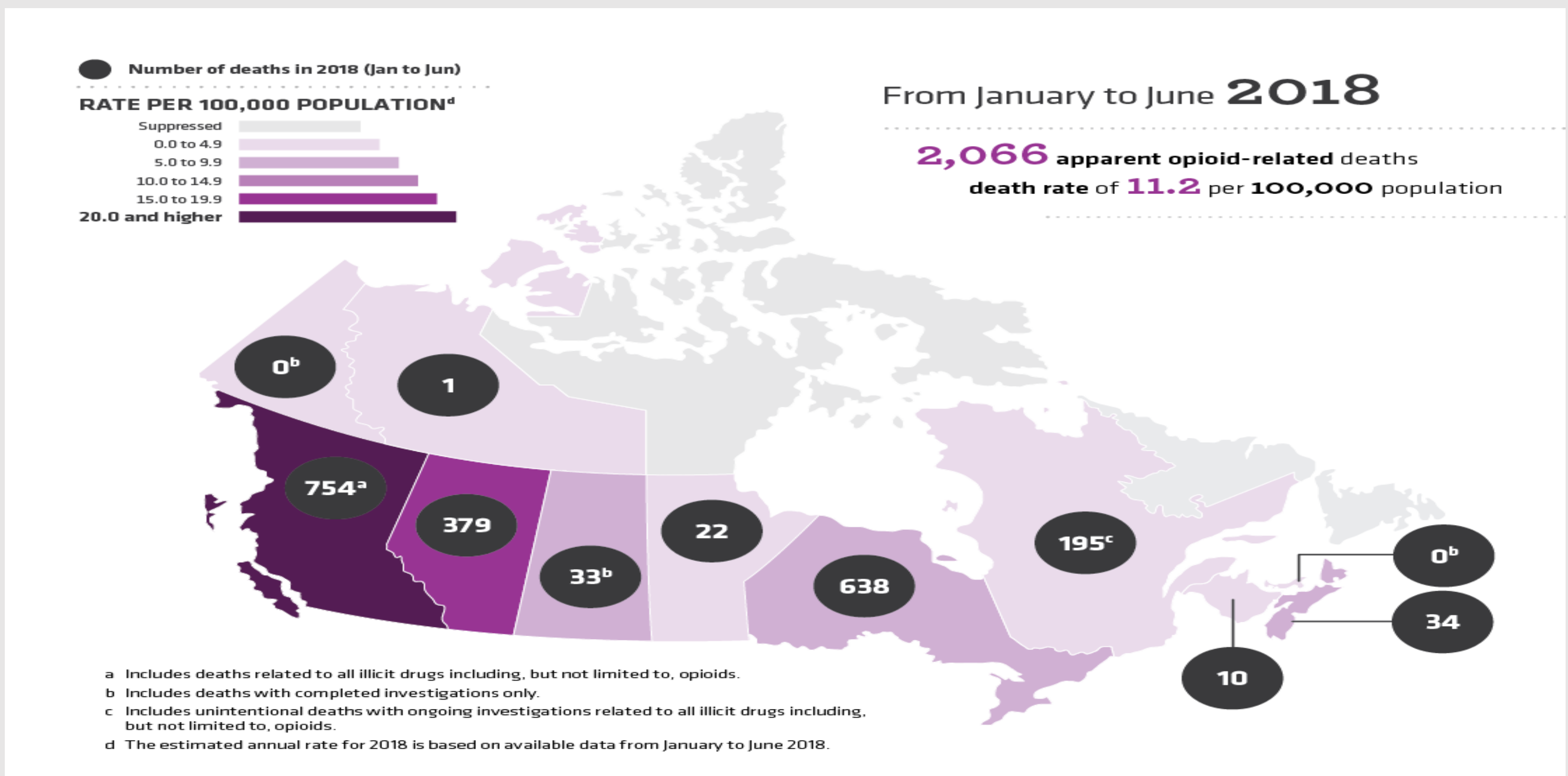
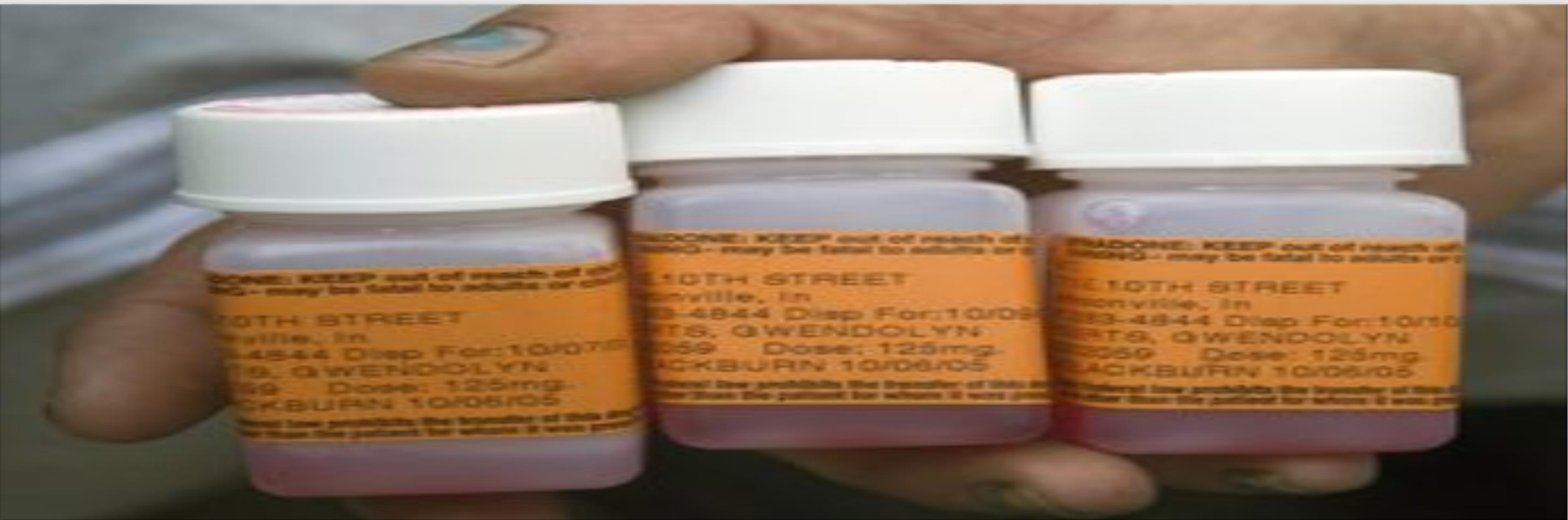
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CLINICAL QUESTION

Does methadone maintenance therapy improve abstinence rates in patients with opiate use disorder within the first twelve months of recovery?

BACKGROUND

In the 21st century, Canada has seen a significant rise in opioid related deaths stemming from opioid misuse and addiction (Hser et al., 2014). From January to June 2018, there were 2,066 people that lost their lives to an apparent opioid related death and of these deaths, 94% of these deaths were accidental in Canada (Government of Canada, 2018). Methadone maintenance therapy is a treatment option for persons with opioid use disorder to suppress illicit opioid use (Hser et al., 2014). The therapeutic benefits of methadone maintenance therapy has been well documented, however, treatment retention is questionable. Understanding the unique clinical characteristics to successful methadone maintenance therapy can decrease opioid related deaths in persons with opiate use disorder.



CRITICAL APPRAISAL OF THE LITERATURE

- Longer participation in methadone maintenance therapy is strongly associated with the reduction of illicit and non-prescribed drug use (White et al., 2014)
- Higher dosage of methadone was positively correlated with increased retention and abstinence (Hser et al., 2014)
 - Dosage of 60.1 – 120mg/d were 3.58 times more effective in retention compared to a dose of 10.1- 60mg/d (Proctor et al., 2015)
- Characteristics linked to poor retention in methadone maintenance therapy include being male, younger age, shorter duration of methadone maintenance therapy, polysubstance use, and high frequency of drug use
 - Retention is a critical indicator of positive outcomes
 - Proactive treatment should be directed towards persons who exhibit the above characteristics (White et al., 2014)

IMPLICATIONS FOR PRACTICE

- By understanding the relationship between methadone maintenance therapy and retention in relation to abstinence from illicit drug use, nurses can be more attune to the importance of implementing evidence based interventions to support clients
 - Identification of the characteristics that require more intensive therapy
 - Advocating for therapeutic dose ranges for methadone
- Implementing motivational enhancement techniques into methadone maintenance therapy (Proctor et al., 2015)
- Offering psychotherapeutic groups that target age groups and gender differences in recovery (Proctor et al., 2015)
- Nurses engaging in therapeutic conversations that focus on positive and trusting interactions enhance treatment retention (Vanderplasschen, Naert, Vander Laenen, & De Maeyer, 2015)

RECOMMENDATIONS

- Further research is needed to implement the standardization of methadone maintenance therapy to enhance and implement a standard of care
- Research is limited regarding the nurses role in methadone maintenance therapy

References

Government of Canada. (2018, December 12). *Opioids data, surveillance and research*. Retrieved from Government of Canada: <https://www.canada.ca/en/health-canada/services/substance-use/problematic-prescription-drug-use/opioids/data-surveillance-research/harms-deaths.html>

Hser, Y.-I., Saxon, A. J., Huang, D., Hasson, A., Thomas, C., Hillhouse, M., . . . Ling, W. (2014). Treatment retention among patients randomized to buprenorphine/naloxone compared to methadone in a multi-site trial. *Addiction, 109*(1), 79-87.

Proctor, S. L., Copeland, A. L., Kopak, A. M., Hoffmann, N. G., Herschman, P. L., & Polukhina, N. (2015). Predictors of patient retention in methadone maintenance treatment. *Psychology of Addictive Behaviors, 29*(4), 906-917.

Unknown (Photographer). (2017). *Unknown* [digital image]. Retrieved from <http://interactives.courier-journal.com/projects/a-city-recovers/treatment-options/>

Vanderplasschen, W., Naert, J., Vander Laenen, F., & De Maeyer, J. (2015). Treatment satisfaction and quality of support in outpatient substitution treatment: opiate users' experiences and perspectives. *Drugs: Education, Prevention and Policy, 22*(3), 272-280.

White, W. L., Campbell, M. D., Spencer, R. D., Hoffman, H. A., Crissman, B., & DuPont, R. L. (2014). Patterns of abstinence or continued drug use among methadone maintenance patients and their relation to treatment retention. *Journal of Psychoactive Drugs, 46*(2), 114-122.