

Press Release

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SAFE Glen Cove Coalition: Study highlights Effectiveness of Methadone and Buprenorphine

A recent study conducted by the National Institute on Drug Abuse (NIDA) demonstrates the superior effectiveness of medication to treat opioid use disorder (OUD) to nonpharmacologic treatments.

A team of investigators reviewed insurance claims of more than 40,000 people age 16 and older diagnosed with OUD. They looked at data for six different treatment pathways, including (1) no treatment, (2) the medications buprenorphine or methadone, (3) the medication naltrexone, (4) inpatient detoxification or residential services, (5) intensive behavioral health, including intensive outpatient counseling or partial hospitalization, and (6) non intensive behavioral health, which included outpatient counseling. Scientists then reviewed follow up records of the patients receiving treatment at 3 and 12 months and compared their outcomes to those of people who received no treatment.

Only treatment with buprenorphine or methadone was associated with reduced risk of overdose at both time points. Treatment with either of these medications was associated with a 76% reduction in overdose at 3 months and a 59% reduction at 12 months. Compared with no treatment, buprenorphine or methadone treatment was also associated with a 32% and 26% relative reduction in serious opioid-related acute care use at 3 and 12 months, respectively. Serious opioid-related acute care use was defined as an emergency hospitalization with a primary opioid diagnosis code.

Despite these findings, treatment with buprenorphine or methadone is uncommon, recorded in only 12.5% of the patients in the study. The most common treatment pathway was non intensive behavioral health (59.3%), followed by inpatient detoxification or residential services (15.8%), not receiving any treatment (5.2%), receiving naltrexone (2.4%), and intensive behavioral health (4.8%). Non intensive behavioral treatment was also associated with reduced risk of overdose at 12 months and reduced risk of opioid-related acute care use, a finding that may reflect differences in the population of patients referred to this type of treatment. The researchers discuss barriers to the use of methadone and buprenorphine and suggest strategies for increasing their use.

The National Institute on Drug Abuse (NIDA) is a United States federal-government research institute whose mission is to "lead the Nation in bringing the power of science to bear on drug abuse and addiction". For more information please visit www.drugabuse.gov.

SAFE, Inc. is the only alcohol and substance abuse prevention, intervention and education agency in the City of Glen Cove. Its Coalition is conducting an opioid prevention awareness campaign entitled, "Keeping Glen Cove SAFE," in order to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about the Opioid Epidemic at www.safeglencove.org.