

Press Release

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FOR IMMEDIATE RELEASE

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**SAFE Glen Cove Coalition: Long-Lasting Medications May Improve Treatment Satisfaction in Individuals with Opioid Use Disorder**

A commentary from leaders at the National Institute on Drug Abuse (NIDA), part of the National Institutes of Health, discusses a new study showing that an extended-release injection of buprenorphine, a medication used to treat opioid use disorder, was preferred by patients compared to immediate-release buprenorphine, which must be taken orally every day. Extended-release formulations of medications used to treat opioid use disorder may be a valuable tool to address the current opioid addiction crisis and reduce its associated mortality.

It is well established that medications used to treat opioid use disorder are highly effective in preventing relapse into drug taking, facilitating recovery, and preventing overdoses. However, retention rates for these drugs are quite low, and 40% to 50% of patients treated with methadone or buprenorphine relapse within six months of starting treatment. Though extended-release formulations of these drugs are at least as efficacious as the daily, immediate release formulations, little is known about what patients want, and how they respond to different approaches to this treatment.

The new study conducted a randomized trial to compare patient-reported outcomes for daily sublingual buprenorphine treatment (tablets given under the tongue) to a weekly or monthly injection of extended-release buprenorphine for opioid use disorder. The researchers found that the extended-release injection of buprenorphine was well-tolerated, acceptable to patients, and produced generally more positive patient-reported outcomes (including overall patient satisfaction, effectiveness, and convenience) compared to daily oral buprenorphine. There were no significant differences in illicit opioid use or side effects between the two study groups.

NIDA researchers note that, too often, patient voices have been left behind in medication development. They argue that using patient preferences and patient-reported outcomes as measures of interest, rather than drug abstinence, fills an important research gap and may prove to be useful in medication trials moving forward. NIDA also maintains extended-release formulations may offer particular benefits in settings where patients have difficulty accessing consistent care – such as justice settings, populations experiencing homelessness, and in rural communities – as well as in reducing fentanyl-related overdoses in the current opioid epidemic.

However, they stress that patient-reported outcomes for these treatment options should be studied in other systems of care to determine whether these findings are consistent.

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](http://www.drugabuse.gov).

The SAFE Glen Cove 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](https://www.facebook.com/safeglencovecoalition) or visit SAFE's website to learn more about the Opioid Epidemic at [www.safeglencove.org](http://www.safeglencove.org)