

# MEDICATIONS FOR OPIOID USE DISORDER

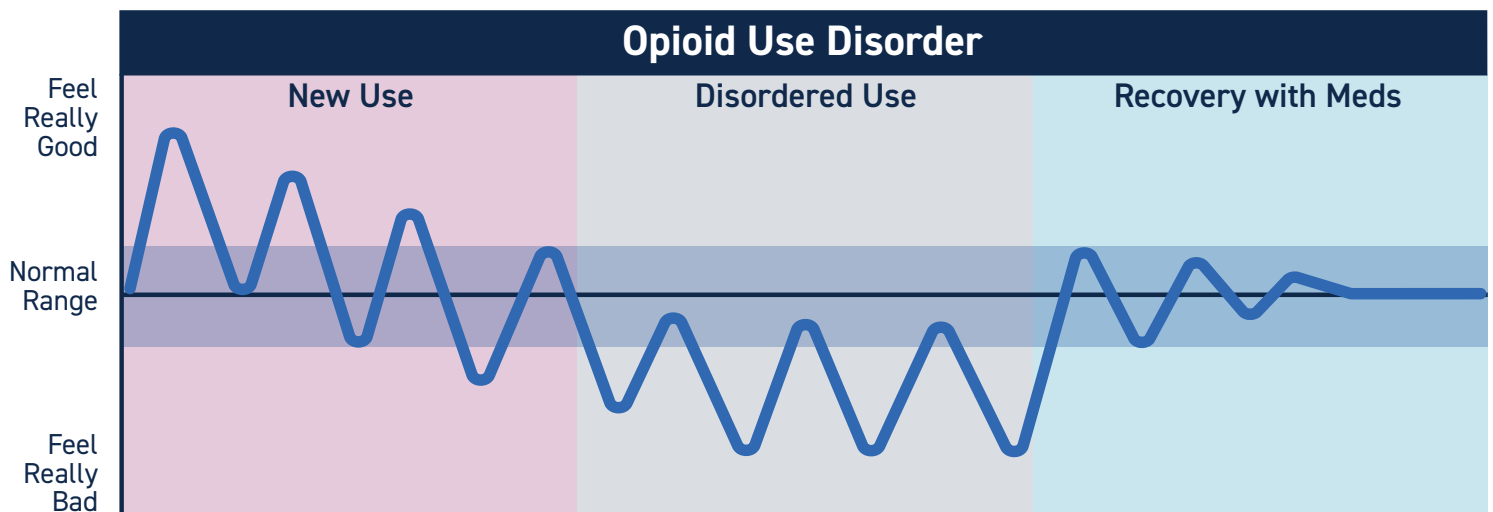
Medication for opioid use disorder (MOUD) is the gold standard for [treatment of opioid use disorder](#) (OUD). Decisions about MOUD must be made between a provider and the patient.

OUD is a type of substance use disorder that occurs when the recurrent use of [opioids causes clinically significant impairment](#), including health problems, disability, and failure to meet major responsibilities at work, school, or home. A person with OUD may experience physical dependence and withdrawal, but a person who is experiencing physical dependence doesn't necessarily meet the criteria for a OUD diagnosis. OUD is more akin to what most people would call "addiction," but a more defined, clinical term is clearer and less stigmatizing. OUD can range from mild to severe.

**MOUD has been found to be better than other forms of substance use disorder care at reducing hospitalizations and preventing deaths, both related to opioids and other causes.**

Abstinence-only treatment, that is, treatment that does not incorporate buprenorphine or methadone, is not protective against overdose, and if the individual is pregnant, can increase miscarriage risk. A person may continue to use substances while taking MOUD, though their use often becomes less chaotic as a result. Because of this, harm reduction strategies should be offered to people with OUD. Harm reduction strategies include using with other people, using a low dose and using slowly, and having naloxone available to reverse overdose. The use of other substances while taking an MOUD does not mean that treatment isn't working or is a failure. People's lives may stabilize in other areas, such as work, parenting, school, or interpersonal relationships, before they stop using substances. This stabilization period can take weeks to months; it is not uncommon for people to take MOUD for years (or the rest of their lives) after this initial stabilization period.

The [image below](#) shows how opioid use disorder develops and then stabilizes with medication.



There are three FDA-approved MOUDs. Duration and type of MOUD Treatment for OUD should be determined by a provider and the patient. Adults and adolescents experiencing OUD can benefit from MOUD.

## Methadone

This medication has been available the longest in this country and therefore has the most evidence to support its use. It is highly effective at treating OUD. It is only available at opioid treatment programs, also known as methadone clinics. When a person first begins treatment, they need to attend the clinic every day to take their dose of medication in person with an observer. Methadone has been shown to reduce all causes of death, including death due to opioids.

## Buprenorphine (often referred to by the trade name Suboxone)

This medication has been approved for use in the United States since 2000 and has strong evidence to support its use. It is available at opioid treatment programs, primary and behavioral health care settings, and other outreach programs throughout the state. Buprenorphine is available as a daily medication taken sublingually (under the tongue) or as a long-acting injectable either weekly or monthly. Buprenorphine has been shown to reduce all causes of death, including death due to opioids.

## Long-acting naltrexone (also referred to by the trade name Vivitrol)

This medication has been approved to treat opioid use disorder since 2010. Naltrexone not reduce overdose risk or overall mortality risk. It is available at opioid treatment programs, primary and behavioral health care settings, and other outreach programs throughout the state. It is a long-acting injection that lasts one month. The oral form of naltrexone is not approved to treat opioid use disorder. This medication also treats alcohol use disorder.

In Washington, patients can find MOUD using the [Washington Recovery Helpline MOUD locator tool](#). This tool identifies prescribing institutions and providers that can be sorted by types of MOUD and health coverage.

The following table shows the risks and benefits of the three types of MOUD. Additional information can be found in this [brochure from the University of Washington](#).

Medication	Risk of Overdose and Other Causes of Death	Other Benefits	Notes
Methadone	Reduces overdose risk; reduces deaths by other causes	Helps manage cravings and withdrawal symptoms	Methadone is preferred by many patients and is considered the most effective, but it is difficult to use because regulations require them to visit a clinic each day. This makes transportation necessary and creates access barriers.
Buprenorphine	Reduces overdose risk; reduces deaths by other causes	Helps manage cravings and withdrawal symptoms	Buprenorphine is easier to get from providers, but there is not enough available in most communities.
Naltrexone	Does not reduce overdose risk or overall mortality risk	May help manage cravings	Reduces tolerance to opioids and increases the risk of overdose if a relapse occurs.