

MEDICATION-ASSISTED TREATMENT

addressing the biological, psychological, and social aspects of opioid use disorder

MAT = medication + behavioral therapies
stabilization

enabling people to function without physiological symptoms of opioid use disorder -
cravings and withdrawal

MAT » **engagement**

helping stabilized people focus on psychosocial aspects of their recovery

behavioral change

stabilizing and engaging people in psychosocial treatment long enough for behavioral
changes to occur

Currently, there are
three medications
approved by the
FDA for the
treatment of opioid
use disorders.

How do
they work?

Methadone

Methadone is a synthetic opioid agonist that eliminates withdrawal symptoms and relieves drug cravings by acting on opioid receptors in the brain - the same receptors that other opioids such as heroin, morphine, and opioid pain medications activate. Although it occupies and activates these opioid receptors, it does so more slowly than other opioids and, in an opioid-dependent person, treatment doses do not produce euphoria.*

Buprenorphine

Buprenorphine is a partial opioid agonist, meaning that it binds to those same opioid receptors but activates them less strongly than full agonists do. Like methadone, it can reduce cravings and withdrawal symptoms in a person with an opioid use disorder without producing euphoria.*

Common Brands: Subutex and
Suboxone

Naltrexone

Naltrexone is an opioid antagonist, which means that it works by blocking the activation of opioid receptors. Instead of controlling withdrawal and cravings, it treats opioid use disorder by preventing any opioid drug from producing rewarding effects such as euphoria.*

Common Brand: Vivitrol

How
dispensed?

Dispensed by a certified Opioid
Treatment Program.

Administered daily, usually by
a liquid dose.

Prescribed by a physician, nurse
practitioner, or physician assistant who
has received a special waiver and
training, and by certified Opioid
Treatment Programs.

Taken as a sublingual pill or strip (daily),
implant (every six months), or a monthly
injection.

Injected monthly in a
physician's office, certified
Opioid Treatment Program, or
licensed treatment program.

Must be off all opioids for 7-14
days prior to use.

Are they
effective?

Based on a review of the scientific literature conducted by the National Academies of Sciences, Engineering, and Medicine, its 2019 consensus study concluded that the FDA-approved medications "are effective and save lives." Further, the report concludes that "long-term retention on medications is associated with improved outcomes."

* Quoted from the National Institute on Drug Abuse Website

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