

Toward a Standard of Care in the Treatment of Opioid Dependence

Ned Presnall, LCSW
Executive Director
Clayton Behavioral

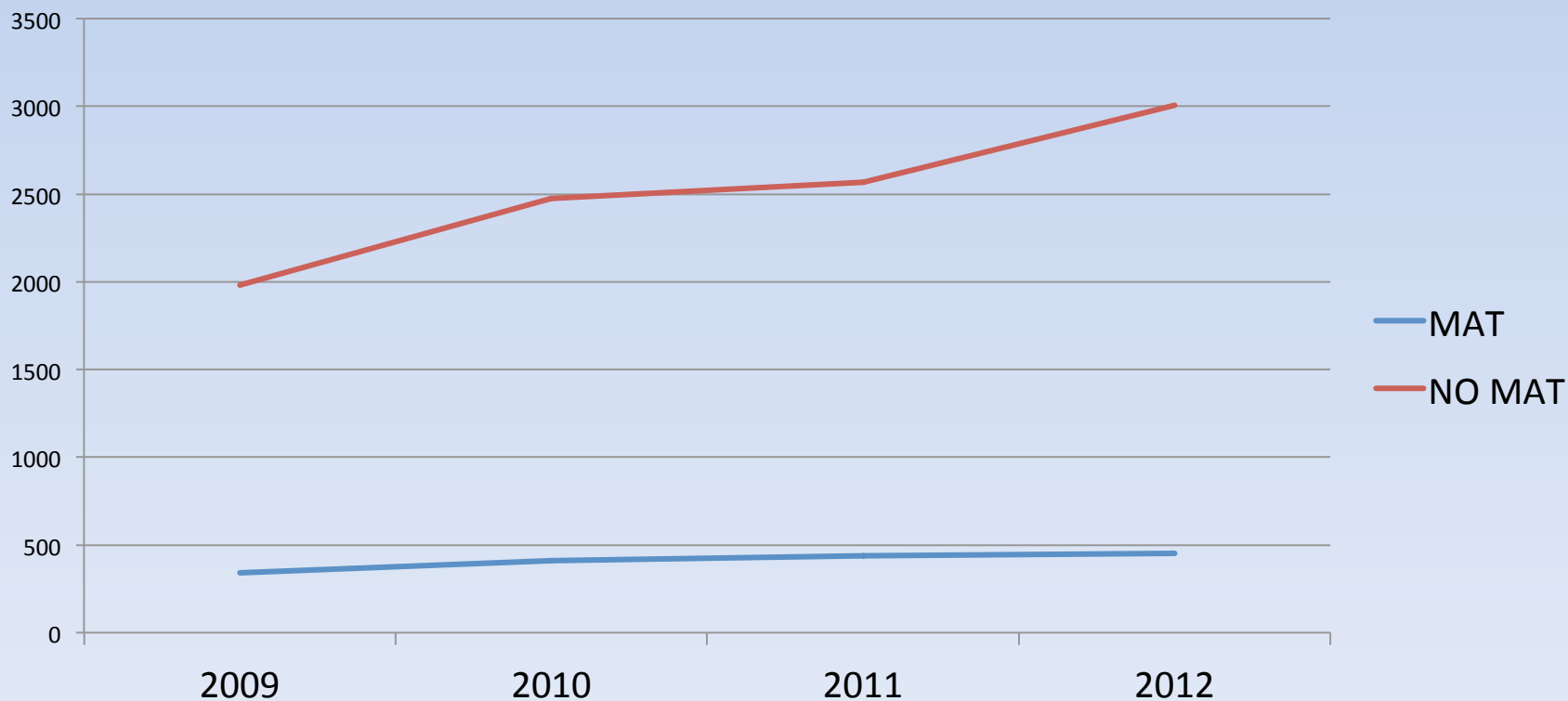
ned@claytonbehavioral.com

314-222-5896

Methadone and buprenorphine maintenance are considered the gold standard of care by:

Substance Abuse and Mental Health Administration
American Society of Addiction Medicine
World Health Organization

Number of persons with primary IV heroin use entering treatment by MAT status, MO 2009-2012

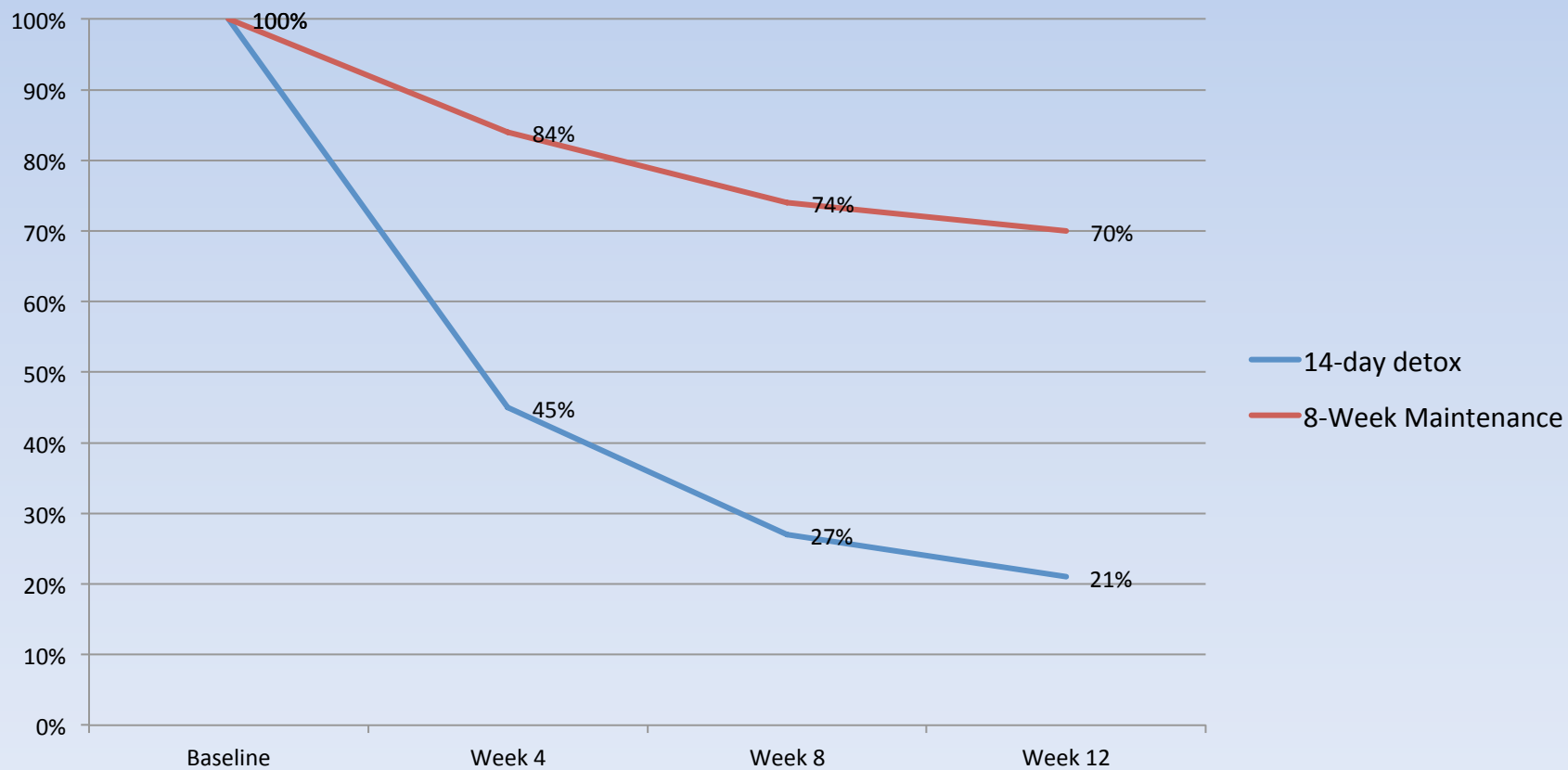


154 youth age 14-21 enter psychosocial treatment for opioid dependence randomized to:

- 14-day suboxone detox
- 8 weeks of maintenance followed by a 4 week taper

Woody GE, Poole SA, Subramaniam G, et al. Extended vs Short-term Buprenorphine-Naloxone for Treatment of Opioid-Addicted Youth: A Randomized Trial. *JAMA : the journal of the American Medical Association*. 2008;300(17):2003-2011. doi:10.1001/jama.2008.574.

Retention in Treatment





Traditional Treatment Culture

173 persons in office-based maintenance Suboxone treatment, followed for six months.

No time limit on their use of Suboxone.

Parran TV, Adelman CA, Merkin B, et al. Long-term outcomes of office-based buprenorphine/naloxone maintenance therapy. *Drug and Alcohol Dependence*. 2010;106(1):56-60. doi:10.1016/j.drugalcdep.2009.07.013.

At 18 months, the 76% of patients on continuous Suboxone

less likely to report

- using any substance
- using heroin
- damaging a close relationship
- doing regretful or impulsive things
- hurting family
- experiencing negative personality changes
- failing to do things expected of them
- taking foolish risks
- being unhappy
- having money problems

more likely to report

- AA “home group”
- “sponsor”
- attending 3+ 12-step meetings per week
- to have been employed at baseline
- to be employed at follow-up