



Choices in Opioid Addiction

- 1. Continue Using**
- 2. Abstinence**
- 3. Buprenorphine/Methadone**

Addiction:

1. Loss of control or fighting for control.
2. Craving and compulsion to find and use your drug – no longer interested in previous activities and work.
3. Negative consequences, but can't stop using.

Choices in Opioid Addiction

1.

Continue Using

Most often,

↑ Use

↓ Control

↑ Consequences

Harm to Relationships

2.

Abstinence

Requires Time, Change, Practice

Requires:

- Knowledge of Self and Relationships
- Knowledge of Addiction
- New Habits and Coping Skill
- New Values and Perspective on Life
- May require Residential Treatment
- Taking care of yourself; service to others
- Practice and Learning
- Avoid Old/Slippery Friends, Places, Things, Habits, Alcohol, other Drugs

3.

Methadone/Buprenorphine

Stay on Opioid Agonist Therapy for Months or Years

Choices after Time

Stay on Methadone or Buprenorphine Indefinitely at same or lower dose

Taper off Slowly

Consider Abstinence When:

- Patient is young
- Oral opioids; no injection use
- Use < 6 -12 months
- Stable supportive family/work environment
- Patient's choice
- Patient's circumstances (finances, rural environment, etc.)
- < 30mgs of morphine equivalent per day

Consider buprenorphine/methadone when:

- Relapses after past treatment
- Injection use
- Polysubstance abuse
- Social stressors and instability
- Chronic pain complicated by addiction
- Patient's choice/patient circumstances
- Significant physical health problems from drug abuse
- Pregnancy
- Addicted family members
- \geq 30mgs morphine equivalent