

Medications for Opioid Use Disorder



Opioid use disorder develops over time and is not a choice or a weakness. It is a brain disorder that needs treatment, just like other diseases such as diabetes and high blood pressure.

Medication treatment can help you stop or lower your opioid use if you have opioid use disorder. It can also lessen the craving for opioids and help you engage with treatment. Medication treatment may be needed for days, months, or years—as long as needed to support recovery. Talk to your provider about your treatment plan.

Medications to consider as part of your treatment plan

	Naltrexone injection	Buprenorphine*	Methadone
How does it work?	Blocks the effect of opioid drugs	<ul style="list-style-type: none"> Prevents and relieves withdrawal Reduces craving and the high from taking other opioids 	<ul style="list-style-type: none"> Prevents and relieves withdrawal Reduces craving and the high from taking other opioids
How do I take it?	Injected into the buttocks muscle every month	Dissolve under the tongue once daily. Talk to your doctor or pharmacist about other dosing forms available.	By mouth once daily
Where do I get it?	Prescribed by doctors or other qualified prescribers OR licensed Opioid Treatment Programs (OTPs)	Prescribed by doctors or other qualified prescribers OR licensed Opioid Treatment Programs (OTPs)	Methadone can only be used to treat opioid use disorder by licensed Opioid Treatment Programs (OTPs)

*Includes buprenorphine/naloxone, such as Suboxone®. Buprenorphine long-acting injectable and implant are also approved for OUD.

	Naltrexone injection	Buprenorphine*	Methadone
What are some of the side effects?	<ul style="list-style-type: none"> • Change in appetite • Back, muscle, or joint pain • Constipation or diarrhea <p>If you miss a dose or stop treatment with naltrexone, you may be at risk for a fatal overdose if you take an opioid again.</p>	<ul style="list-style-type: none"> • Constipation • Upset stomach or vomiting • Feeling drowsy or sleepy • Lower testosterone <p>Increased risk of overdose when combined with sedatives (including alcohol) and other opioids</p>	<ul style="list-style-type: none"> • Constipation • Upset stomach or vomiting • Feeling drowsy or sleepy • Lower testosterone <p>Increased risk of overdose when combined with sedatives (including alcohol) and other opioids</p>
What side effects should I report to my provider?	<ul style="list-style-type: none"> • Allergic reaction or swelling • Chest tightness or trouble breathing • Anxiety, trouble sleeping, depression, or unusual thoughts • Dark or tea-colored urine • Yellowing of eyes or skin 	<ul style="list-style-type: none"> • Extreme stomach pain, vomiting, or diarrhea • Dark or tea-colored urine • Light-colored bowel movements • Yellowing of eyes or skin 	<ul style="list-style-type: none"> • Allergic reaction or swelling • Chest tightness, heart palpitations, or trouble breathing • Extreme dizziness, weakness, or sweating • Seizures • Cold, clammy skin • Slow or uneven heartbeat

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Drinking alcohol or taking drugs that are sedating can lead to overdose or death while on buprenorphine or methadone. Please avoid drinking alcohol and talk to your doctor about any medications you are taking to make sure they are safe for you.

Return to use (or relapse) is not treatment failure. You may need multiple attempts to reduce or stop opioid use. This only means your treatment plan may need to be changed. Talk to your VA provider about your treatment options.

Have naloxone available.

Patients with opioid use disorder are at higher risk of overdose. Help stay safe by having naloxone available. Naloxone is an opioid reversal medication.



Know the signs of overdose:

- trouble breathing, slow or shallow breathing;
- snoring, gurgling, or choking sounds;
- extreme tiredness, heavy nodding, or loss of consciousness;
- clammy, sweaty skin or bluish or grayish lips, fingernails, or skin.