

Medicine Options for Opioid Use Disorder (OUD)



Opioid use disorder develops over time and is not a choice or a weakness. Medicine is the most effective treatment for this brain disorder.

If you have opioid use disorder, treatment with medicine can help you reduce or stop your opioid use, and reduce the risk of dying. Medicine can also lessen the cravings for opioids and help you engage with treatment. Medicine may be taken for as long as needed to support your personal recovery journey. A minimum of a year is highly recommended. Talk to your health care team about your treatment plan.

Medicine to consider as part of your treatment plan

	Buprenorphine*	Naltrexone injection	Methadone
How does it work?	<ul style="list-style-type: none"> Prevents and relieves opioid withdrawal Reduces craving Reduces effects of other opioids 	Blocks the effect of opioid drugs	<ul style="list-style-type: none"> Prevents and relieves opioid withdrawal Reduces craving
How do I take it?	<p>Oral: Dissolve under the tongue once daily or as told by prescriber.</p> <p>Injectable: Weekly or monthly</p>	Injected into the buttocks muscle every month	By mouth once daily
Where do I get it?	Can be prescribed by your primary care, mental health, or pain prescriber. Injection must be given in clinic.	Can be prescribed by your primary care, mental health, or pain prescriber. Must be given in clinic.	Methadone can only be used to treat opioid use disorder by licensed Opioid Treatment Programs (OTPs)

*Includes buprenorphine/naloxone, such as Suboxone®.

	Buprenorphine*	Naltrexone injection	Methadone
What are some of the side effects?	<ul style="list-style-type: none"> • Constipation • Upset stomach or vomiting • Feeling drowsy or sleepy 	<ul style="list-style-type: none"> • Nausea • Headache • Change in appetite • Constipation or diarrhea 	<ul style="list-style-type: none"> • Constipation • Upset stomach or vomiting • Feeling drowsy or sleepy
What rare but severe side effects should I report to my health care team?	<ul style="list-style-type: none"> • Extreme stomach pain, vomiting, or diarrhea • Dark or tea-colored urine • Light-colored stools • Yellowing of eyes or skin • Extreme sleepiness or falling asleep while doing activities 	<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"> • Allergic reaction or swelling • Chest tightness, heart palpitations, or trouble breathing • Extreme dizziness, weakness, or sweating • Cold, clammy skin • Slow or uneven heartbeat • Extreme sleepiness or falling asleep while doing activities

*Includes buprenorphine/naloxone, such as Suboxone®.



Drinking alcohol, taking drugs that are sedating, or taking any drugs without medical supervision can lead to overdose or death while on buprenorphine or methadone. Avoid alcohol and talk to your health care team about any medicines you are taking.

Return to or recurrence of opioid use 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 health care team about your treatment options.

Have naloxone available

Patients with opioid use disorder are at higher risk of overdose. If you stop treatment with medicine you may be at increased risk of a fatal overdose if you take an opioid again. This risk is greatest if you stop treatment with naltrexone injections. Help stay safe by having naloxone available. Naloxone is a medicine that can reverse the effects of opioids.



Know the signs of opioid 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.