

OPIOID USE DISORDER

Medications for Opioid Use Disorder

Opioid use disorder develops over time and is not a choice or a weakness.

It is a brain disease that needs treatment, just like other diseases such as diabetes and high blood pressure.

Treatment works!



Medications to Consider as Part of Your Treatment Plan

	Methadone	Buprenorphine ⁺	Naltrexone Injection
How does it work?	<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 	Blocks the effect of opioid drugs
How do I take it?	By mouth once daily	Dissolve under the tongue once daily. Talk to your doctor or pharmacist for other options.	Injected into the buttocks muscle every month
Where do I get it?	Methadone can only be prescribed for opioid use disorder by certified programs (known as Opioid Treatment Programs or OTPs)	Licensed Opioid Treatment Programs (OTP) OR Prescribed by doctors or other prescribers with a DEA waiver (examples: primary care, mental health, addictions treatment)	Licensed Opioid Treatment Programs (OTP) OR Prescribed by doctors or other prescribers (examples: primary care, mental health, addictions treatment)

+ Includes Buprenorphine/Naloxone

Veterans Crisis Line
1-800-273-TALK (8255) or Text - 838255

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

+ Includes Buprenorphine/Naloxone

While you're on these medicines

- Do not drink alcohol or take sedatives, tranquilizers, or other drugs that slow breathing (such as benzodiazepines)
- Ask your provider for naloxone (emergency medication used to reverse an opioid overdose)

Signs of an overdose (too much medication)

- Trouble breathing, slow or shallow breathing
- Snoring, gurgling or choking sounds
- Extreme tiredness or heavy nodding
- Clammy, sweaty skin or bluish or grayish lips, fingernails or skin

Length of treatment and relapses

- You may take the medication for days, months, or years—as long as is needed to prevent relapse. Talk to your provider about your treatment plan
- A relapse does not mean treatment has failed, it means a change in your treatment plan is needed.