

# Medication Assisted Treatment: Medication and Counseling Treatment

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Medication-Assisted Treatment (MAT) is the use of medications, in combination with counseling and behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders. Research shows that a combination of medication and therapy can successfully treat these disorders, and for some people struggling with addiction, MAT can help sustain recovery. MAT is primarily used for the treatment of addiction to opioids such as heroin and prescription pain relievers that contain opiates. The prescribed medication operates to relax brain reactions to the loss of the drug and thus physical urges to relapse and related discomfort. Some medications block the euphoric effects of alcohol and opioids, relieve physiological cravings, and body functions and quell the negative effects of getting used to life without the abused drug. Combining some of the medications used in MAT with anxiety medications can be fatal (Benzodiazepines, such as Xanax or valium).

## Opioid Treatment Programs (OTPs)

Opioid treatment programs (OTPs) provide MAT for individuals diagnosed with an opioid use disorder. These programs treat all aspects of chemical dependency as-well-as related health and psychological problems, occupational and educational problems, and family problems that can create stress and triggers to relapse or interrupt recovery. OTPs focus on improving the quality of life.

Federal law requires patients who receive treatment in an OTP to receive professional assessment and diagnosis to establish scientifically valid medical, counseling, vocational, educational, and other treatment services, including medication.

## Counseling and Behavioral Therapies

Under federal law, MAT patients must receive counseling, which could include different forms of behavioral therapy. These services start with a professional diagnosis in order to select scientifically valid counseling, and or psychotherapy interventions that are indicated and proven to be effective for the care of the patient. Additional diagnoses may follow from assessments that indicate that medical, vocational, educational interventions that are scientifically validate may be necessary to return the patient to health and well being.

## MAT Effectiveness

MAT is a "scientifically validated package of therapy and medication treatments" and has therefore proved to be clinically effective and to significantly reduce the need for inpatient detoxification services and to increase adherence or the ability to stick long enough to achieve positive effect for these individuals. MAT provides a more comprehensive, individually tailored program of medication and treatment for addiction. Like all modern treatment programs MAT also includes support services that address the needs of patients.

The ultimate goal of MAT is full recovery, including the ability to live a self-directed life. This treatment approach has been shown to:

- Improve patient survival
- Increase retention in treatment
- Decrease illicit opiate use and other criminal activity among people with substance use disorders
- Increase patients' ability to gain and maintain employment
- Improve birth outcomes among women who have substance use disorders and are pregnant

Research that MAT can lower risk of HIV or hepatitis C by reducing relapse.

## MAT and Patient Rights

Under the Confidentiality Regulation, 42 Code of Federal Regulations (CFR) 2, personally identifiable health information relating to substance use and alcohol treatment must be handled with a higher degree of confidentiality than other medical information.

## Medications Used in MAT

FDA has approved several different medications to treat opioid addiction and alcohol dependence. MAT medications help control the withdrawal symptoms and psychological cravings that stress and discomfort and can interrupt therapy. MAT programs provide a safe and controlled level of medication to overcome the use of an abused opioid. When provided at the proper dose, medications used in MAT have no adverse effects on intelligence, mental capability, physical functioning, or employability. MAT medications can only be dispensed through an approved program. Some of the medications used in MAT are controlled substances due to their potential for misuse.

### Opioid Dependency Medications

Methadone, buprenorphine, and naltrexone are used to treat opioid dependence and addiction to short-acting opioids such as heroin, morphine, and codeine, as well as semi-synthetic opioids like oxycodone and hydrocodone. People may safely take medications used in MAT for months, years, several years, or even a lifetime. Plans to stop a medication must always be discussed with a physician and the treatment team in the MAT program.

### **Buprenorphine**

Like methadone, buprenorphine suppresses and reduces cravings for the abused drug by providing partial effects. It can come in a pill form or under the tongue tablet.

### **Naltrexone**

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Naltrexone works differently than buprenorphine. If a person using naltrexone relapses and uses the abused drug, naltrexone blocks the euphoric and sedative effects of the abused drug and prevents feelings of euphoria.



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## Opium Overdose Prevention Medication

FDA approved naloxone (very different from naltrexone described above), an injectable drug used to interrupt an opioid overdose as an emergency stick pin to save addicted and overdosed individual's lives. According to the World Health Organization (WHO), naloxone is one of a number of medications considered essential to a functioning health care system.

## Alcohol Use Disorder Medications in MAT

Disulfiram, acamprosate, and naltrexone are the most common drugs used to treat alcohol use disorder. No medicine provides a cure for the disorder, but they act as a deterrent to relapse in an MAT program.

### **Disulfiram**

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Disulfiram is a medication that can assist effective treatment in chronic alcoholism. It is most effective in people who have already gone through detoxification or are in the initial stage of abstinence. It is tablet form and is taken once a day. Disulfiram should never be taken while intoxicated and it should not be taken for at least 12 hours after drinking alcohol. It works by causing nausea, headache, vomiting, chest pains, difficulty breathing after drinking even a small amount of alcohol and can last for an hour or more.

### **Acamprosate**

Acamprosate is a medication that typically begins on the fifth day of abstinence, reaching full effectiveness in five to eight days. It is offered in tablet form and taken three times a day, preferably at the same time every day. The medication's side effects may include diarrhea, upset stomach, appetite loss, anxiety, dizziness, and difficulty sleeping.

### **Naltrexone**

When used as a treatment for alcohol dependency, naltrexone blocks the euphoric effects and feelings of intoxication. This allows people with alcohol addiction to reduce their drinking behaviors enough to remain motivated to stay in treatment, avoid relapses, and take medications.

## MAT Medications and Child Safety

It's important to remember that if medications are allowed to be kept at home, they must be locked in a safe place away from children. Methadone in its liquid form is colored and is sometimes mistaken for a soft drink. Children who take medications used in MAT may overdose and die.

## Attestation:

I attest that this orientation to the MAT Program was explained to me and additional materials were made available to me about how both medications and treatment services and comprehensive assessment can benefit my rehabilitation and recovery.

I agree to a referral to the MAT Program for immediate appointment with program medical and psychological staff to start the assessment to help me chose the best medications and behavioral health interventions and additional services for me!

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Patient Signature

\_\_\_\_\_  
Staff Signature

Date:

While I have had the MAT orientation and understand that the staff recommends it for me, I am declining to participated in medication components of this program and am waiving my right to participate in the medication components of the program.

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Patient Signature

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Staff Signature

Date:

This form is for use at admission and as a part of the orientation to treatment and treatment planning choice and "patient centered treatment". As such, it must be scanned into the EHR in the patient records section.

