



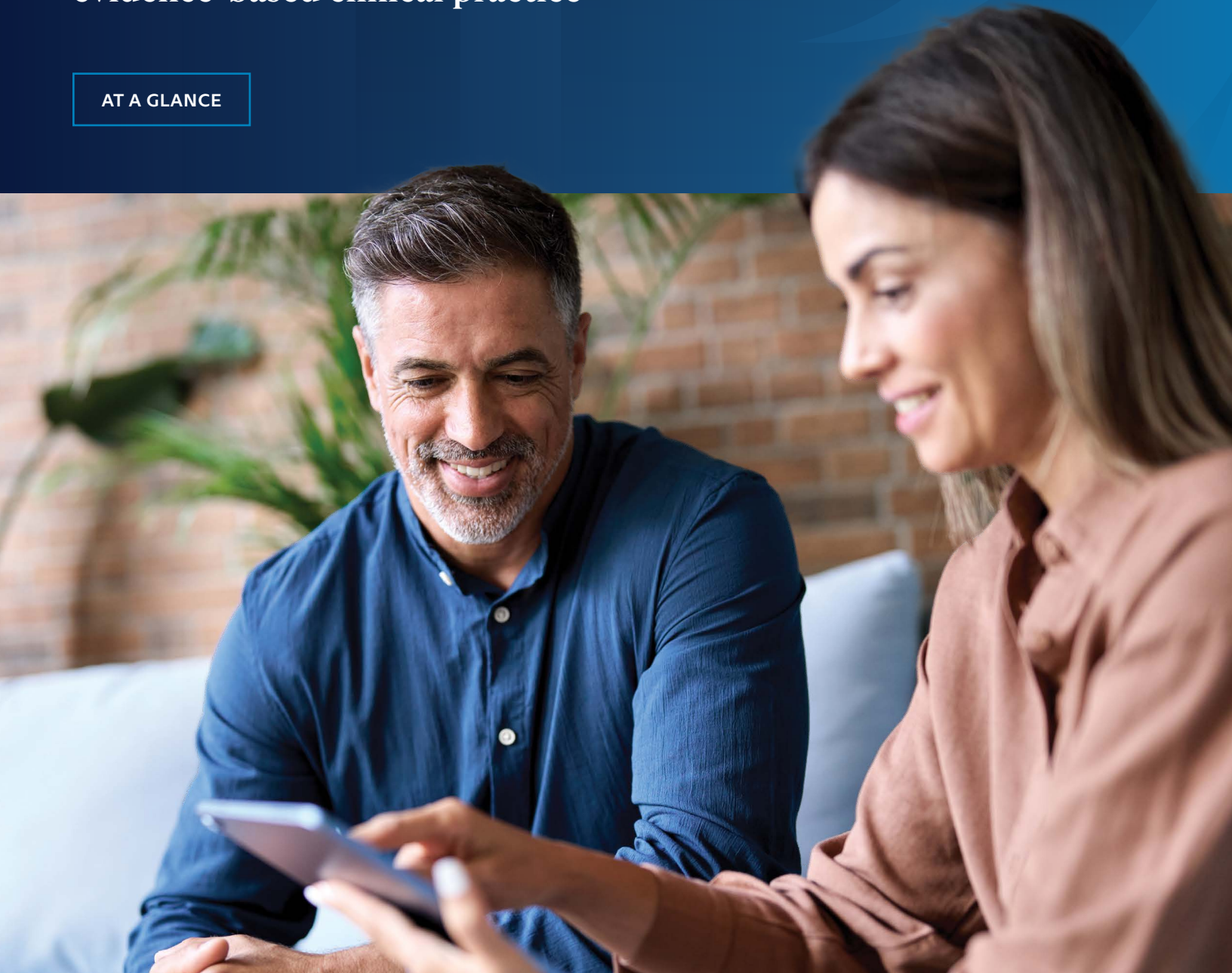
Substance Use Disorders
Center of Excellence

Medications for Opioid Use Disorder (MOUD)



An integrated approach to the
evidence-based clinical practice

AT A GLANCE




Prevent death.
Promote recovery.
Improve health.

ABOUT

Deliver MOUD with confidence

Medications for opioid use disorder (MOUD) are effective, evidence-based treatment options that can help reduce opioid use and support long-term recovery. Use this at-a-glance guide to compare medications and offer the right support to each person with opioid use disorder.

01 Medications for Opioid Use Disorder (MOUD)				
 1	Route of administration and brand names?	<div>Naltrexone</div> <div>Oral tablet or capsule<ul style="list-style-type: none">ReVia™Generic productInjection: intramuscular (IM), long-acting and extended release (four weeks)<ul style="list-style-type: none">Vivitrol™<i>Research shows better outcomes with long-acting injection.¹</i></div>	<div>Buprenorphine</div> <div>Oral sublingual film (buprenorphine-naloxone combination product)<ul style="list-style-type: none">Suboxone™Generic productOral sublingual tablet (buprenorphine-naloxone combination product)<ul style="list-style-type: none">Suboxone™Zubsolv™Generic productOral buccal film (buprenorphine-naloxone combination; placed inside mouth between cheek and upper gum)<ul style="list-style-type: none">Bunavail™Generic productOral sublingual tablet (buprenorphine monoprodukt)<ul style="list-style-type: none">Subutex™Generic productInjection: subcutaneous, extended release (buprenorphine monoprodukt)<ul style="list-style-type: none">Sublocade™Brixadi™</div>	<div>Methadone</div> <div>Oral liquid suspension or concentrate<ul style="list-style-type: none">Methadose™Generic product</div>
	2 Mechanism of action?	<div>Opioid antagonist²</div> <div><ul style="list-style-type: none">Binds to the mu-opioid receptor and blocks the reinforcing effects of opioids in the brain (urge to use the drug repeatedly to experience pleasure or relieve withdrawal)No opioid-like activity</div>	<div>Partial opioid agonist²</div> <div><ul style="list-style-type: none">Binds to the mu-opioid receptor and blocks the reinforcing effects of opioids in the brain (urge to use the drug repeatedly to experience pleasure or relieve withdrawal)Has partial opioid-like activity</div>	<div>Full opioid agonist²</div> <div><ul style="list-style-type: none">Binds to the mu-opioid receptor and blocks the reinforcing effects of opioids in the brain (urge to use the drug repeatedly to experience pleasure or relieve withdrawal)Has full opioid-like activity</div>
	3 Permitted treatment providers and locations?	<div><ul style="list-style-type: none">Any licensed prescriberAll outpatient, inpatient and community-based locations</div>	<div><ul style="list-style-type: none">Any prescriber licensed to prescribe Schedule III controlled medicationsAll outpatient, inpatient and community-based locations</div>	<div><ul style="list-style-type: none">Any prescriber licensed to prescribe Schedule II and III controlled medications and only at certified and licensed opioid-treatment programsException: Methadone may be utilized for management of opioid use disorder (OUD) in acute-care hospitals under specific circumstances.³</div>

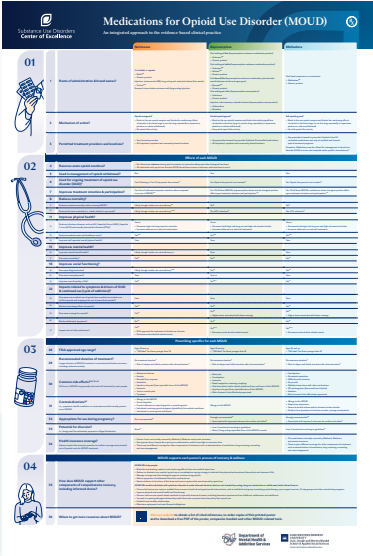
Effects of each MOUD

		Naltrexone		Buprenorphine		Methadone
4	Reverses acute opioid overdose?	<ul style="list-style-type: none">• No. Administer naloxone during opioid overdose to restore breathing and other biological functions.• All individuals with OUD should have access to naloxone and know how to use it.		<ul style="list-style-type: none">• No. Administer naloxone during opioid overdose to restore breathing and other biological functions.• All individuals with OUD should have access to naloxone and know how to use it.		<ul style="list-style-type: none">• No. Administer naloxone during opioid overdose to restore breathing and other biological functions.• All individuals with OUD should have access to naloxone and know how to use it.
5	Used in management of opioid withdrawal?	No ⁴		Yes ⁴		Yes ⁴
6	Used for ongoing treatment of OUD?	Yes. Following a 7-to-10-day opioid-free interval. ⁴		Yes. Opioid-free period is not needed. ⁴		Yes. Opioid-free period is not needed. ⁴
7	Improves treatment retention and participation?	Yes. Use of naltrexone improves retention when compared to no use of MOUD. ^{5,6}		Yes. Of all three MOUDs, buprenorphine shows second strongest positive effect upon treatment retention and participation. ^{5,6}		Yes. Of all three MOUDs, methadone shows strongest positive effect upon treatment retention and participation. ^{5,6}
8	Reduces mortality?					
9	Reduces overdose mortality while receiving MOUD?	Likely, though studies are contradictory ^{7,8}		Yes ⁹		Yes ⁹
10	Reduces all-cause mortality (i.e., death related to any cause)?	Likely, though studies are contradictory ^{10,11,12}		Yes, 66% reduction ¹³		Yes, 53% reduction ¹³
11	Improves physical health?					
12	Reduces infectious diseases, such as HIV, hepatitis B virus (HBV), hepatitis C virus (HCV) and sexually transmitted diseases (STDs)?	Yes ^{14,15} <ul style="list-style-type: none">• Decreases high-risk drug-injection activities• Increases adherence to antiviral medications		Yes ^{15,16} <ul style="list-style-type: none">• Decreases both high-risk drug use and high-risk sexual activities• Increases adherence to antiviral treatments		Yes ^{15,16} <ul style="list-style-type: none">• Decreases both high-risk drug use and high-risk sexual activities• Increases adherence to antiviral treatments
13	Reduces medical events and healthcare costs?	Yes ^{17,18}		Yes ^{17,18}		Yes ^{17,18}
14	Improves self-reported overall physical health?	Yes ¹⁹		Yes ¹⁹		Yes ¹⁹
15	Improves mental health?					
16	Improves overall mental health?	Likely, though studies are contradictory ^{20,21}		Yes ²²		Yes ²²
17	Decreases suicidality?	Yes ²³		Yes ²³		Yes ²³
18	Improves social functioning?					
19	Decreases illegal activities?	Likely, though studies are contradictory ^{24,25}		Yes ²⁶		Yes ²⁶
20	Decreases unemployment?	Yes ²⁷		Yes ^{27, 28}		Yes ²⁹
21	Improves overall quality of life?	Yes ²⁴		Yes ^{30,31}		Yes ³¹
22	Impacts on OUD symptoms and drivers and continued use (cycle of addiction)?					
23	Decreases non-medical use of opioids (non-medical use includes use of illicit opioids and inappropriate use of prescribed opioids)?	Yes ³²		Yes ³²		Yes ³³
24	Blocks intoxicating effects of opioids?	Yes ³⁴		Yes ³⁴		Yes ³⁴
25	Decreases cravings for opioids?	Yes ³⁵		Yes ³⁵ <ul style="list-style-type: none">• Higher doses associated with fewer cravings		Yes ³⁵ <ul style="list-style-type: none">• Higher doses associated with fewer cravings
26	Blocks withdrawal symptoms?	No ³⁴		Yes ³⁴		Yes ³⁴
27	Impacts use of other substances?	Yes ³⁶ <ul style="list-style-type: none">• FDA-approved for treatment of alcohol use disorder• Decreases acute alcohol-related events		Yes ^{36, 37} <ul style="list-style-type: none">• Decreases acute alcohol-related events		Yes ^{36, 37} <ul style="list-style-type: none">• Decreases acute alcohol-related events



		Naltrexone		Buprenorphine	Methadone
Prescribing specifics for each MOUD					
28	FDA-approved age range?	Ages 18 and up <ul style="list-style-type: none">“Off-label” for those younger than 18		Ages 16 and up <ul style="list-style-type: none">“Off-label” for those younger than 16	Ages 16 and up <ul style="list-style-type: none">“Off-label” for those younger than 16
29	Recommended duration of treatment? <i>Longer duration of MOUD treatment is associated with better outcomes, including reduced mortality.</i>	No maximum duration ³ <ul style="list-style-type: none">Risk of relapse and lethal overdose after discontinuation⁴		No maximum duration ³ <ul style="list-style-type: none">Risk of relapse and lethal overdose after discontinuation⁴	No maximum duration ³ <ul style="list-style-type: none">Risk of relapse and lethal overdose after discontinuation⁹
30	Common side effects? ^{38, 39, 40} <i>All forms of MOUD are generally safe and well-tolerated by most people.</i>	<ul style="list-style-type: none">Abdominal distressAnxietyElevated liver enzymesHeadacheInjection-site pain (from injectable form of this MOUD)InsomniaJoint or muscle painTiredness		<ul style="list-style-type: none">Back painConstipationInsomniaNasal congestion, sneezing, coughingOral discomfort and/or dental problems (from oral forms of this MOUD)Injection site pain (from injectable form of this MOUD)Risk of misuse if not effectively supervised	<ul style="list-style-type: none">ConstipationDecreased respirationDifficulty with urinationDry mouthMultiple interactions with other medicationsQTc prolongation (abnormal heart rhythm)SedationRisk of misuse if not effectively supervised
31	Contraindications? ³ <i>i.e., symptoms, health conditions or circumstances which usually prevent use of MOUD</i>	<ul style="list-style-type: none">Allergy to this MOUDActive hepatitisCurrent tolerance to opioid agonists or partial agonistsIndividuals receiving opioid analgesics (painkillers) for medical conditionsIndividuals in acute opioid withdrawal		Allergy to this MOUD	<ul style="list-style-type: none">Allergy to this MOUDRespiratory depressionSevere bronchial asthma and/or elevated carbon dioxideParalytic ileus (paralysis of intestine muscles, causing constipation)
32	Appropriate for use during pregnancy?	Not recommended ⁴¹		Strongly recommended ⁴¹ <ul style="list-style-type: none">Associated with improved outcomes for mother and infant³	Strongly recommended ⁴¹ <ul style="list-style-type: none">Associated with improved outcomes for mother and infant³
33	Potential for diversion? <i>i.e., being used for unintended purposes or illegal distribution</i>	None ¹⁵		<ul style="list-style-type: none">Low, if monitored according to guidelinesNone, if long-acting injectable form of this MOUD is used¹⁵	Low, if monitored according to guidelines ¹⁵
34	Health insurance coverage? <i>Always contact the insurance provider to confirm coverage and potential out-of-pocket costs for MOUD treatment.</i>	<ul style="list-style-type: none">Generic forms are broadly covered by Medicaid, Medicare and private insurance.Non-generic forms frequently require prior authorization and/or have high co-insurance fees.There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.		<ul style="list-style-type: none">Generic forms are broadly covered by Medicaid, Medicare and private insurance.Non-generic forms frequently require prior authorization and/or have high co-insurance fees.There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.	<ul style="list-style-type: none">This medication is broadly covered by Medicaid, Medicare and private insurance.There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.

		Naltrexone	Buprenorphine	Methadone
04	35	MOUD supports each person's process of recovery and wellness		
		<p>How does MOUD support other components of comprehensive recovery, including informed choice?</p> <p>All MOUDs help people:</p> <ul style="list-style-type: none"> Block the intoxicating, euphoric and reinforcing effects from non-medical opioid use. Reduce or eliminate non-medical opioid use as a maladaptive coping strategy to deal with the physical and emotional discomforts and stresses of life. Manage cravings and other biological urges to continue using opioids. Relieve symptoms of withdrawal that drive continued use. Restore balance to functions of the brain and nervous system that were harmed by opioid use. <p>All MOUDs enable individuals with opioid use disorder to make informed decisions that are not clouded by craving, drug use, intoxication or withdrawal, which allows them to:</p> <ul style="list-style-type: none"> Choose the best service options available from a menu of medical and psychosocial interventions, such as individual and group counseling, psychotherapy, peer-support services, 12-step groups and other mutual-help programs. Improve physical and mental health and functioning. Discover and use non-opioid-based methods to cope with stress and trauma, including traumatic experiences from childhood, adolescence and adulthood. Succeed in repairing damaged relationships with those who may have been harmed by their opioid use. Establish new, healthy relationships. Maintain employment and meet financial obligations. 		
04	36	<p>Where to get more resources about MOUD?</p> <p>Visit our website to explore more resources and trainings for MOUD and other substance use disorders.</p> <p>case.edu/socialwork/ohio-sud-coe</p>		



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Contributors

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Reviewers | Medical Advisory Group of the SUD COE

- Dana Vallangeon, MD, FASAM
- Justin Trevino, MD, DLFAPA
- Susan Painter, DNP, C-CNS, PMHCNS-BC
- Craig King, DNP, APRN, PMHNP-BC
- Morgan Wiggins, DNP, APRN-CNP, PMHNP-BC
- Samantha Petty, C-NP, PMHNP-BC

Staff of the SUD COE

- Ric Kruszynski, MSSA, LISW-S, LICDC-CS
- Deana Leber-George, MEd, LPCC-S
- Jenny Row, MSSA, LISW-S
- Amanda Kantaras, MEd, LPCC-S, LICDC
- Sarah Fulton, MA

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10 • Substance Use Disorders Center of Excellence

Medications for Opioid Use Disorders (MOUD): At-A-Glance • 11



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**Department of
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Addiction Services**



**CASE WESTERN RESERVE
UNIVERSITY**
Jack, Joseph and Morton Mandel
School of Applied Social Sciences
Center for Evidence-Based Practices