



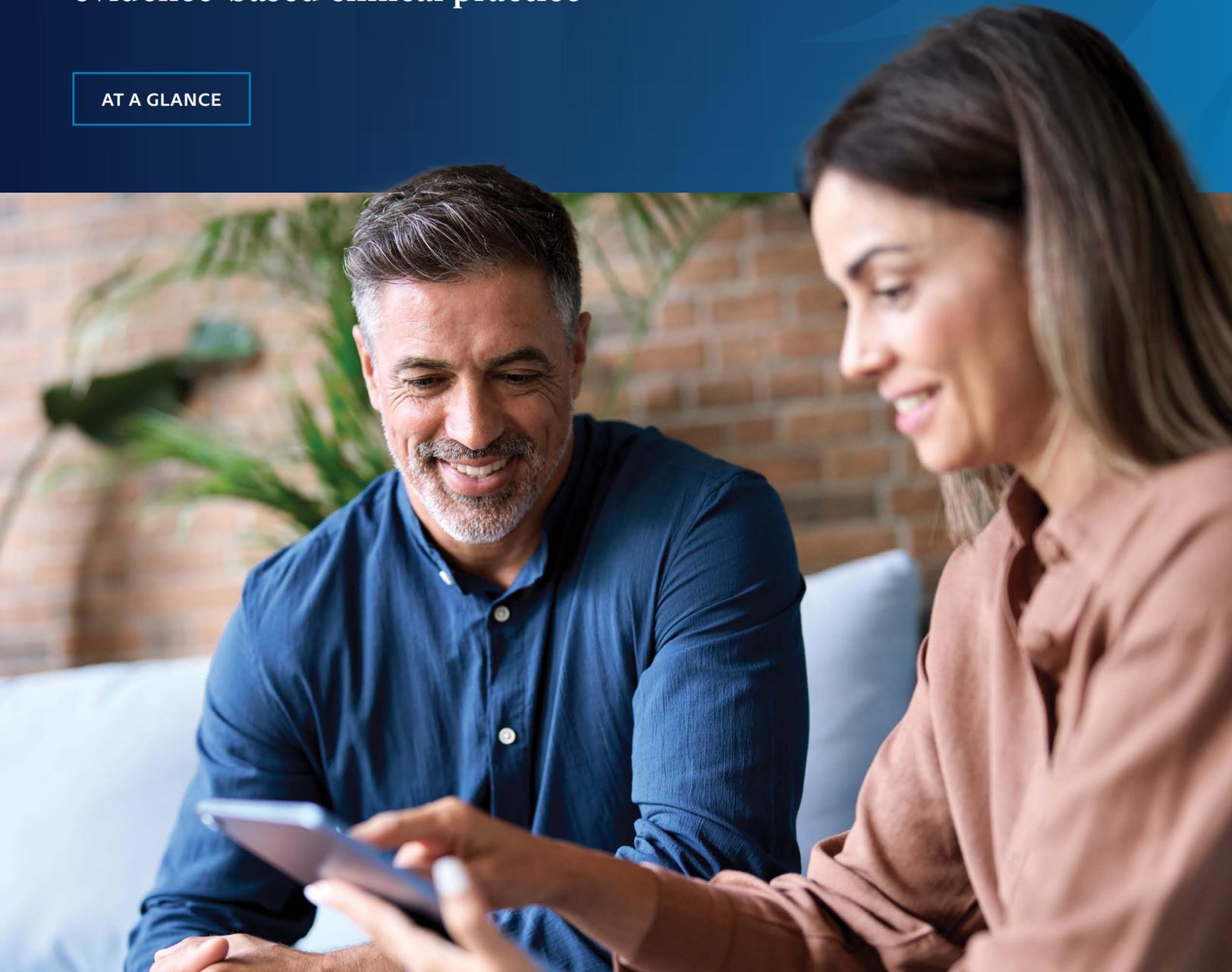
Substance Use Disorders  
Center of Excellence

# 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

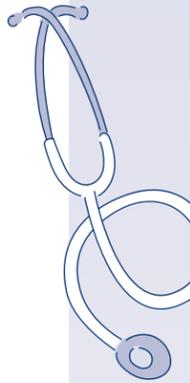
Medications for opioid use disorder (MOUD) are effective, evidence-based treatment options that can help reduce opioid use and support long-term recovery. Use this at-a-glance guide to compare medications and offer the right support to each person with opioid use disorder.

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### Medications for Opioid Use Disorder (MOUD)



		Naltrexone	Buprenorphine	Methadone
1	Route of administration and brand names?	<p>Oral tablet or capsule</p> <ul style="list-style-type: none"> <li>• ReVia™</li> <li>• Generic product</li> </ul> <p>Injection: intramuscular (IM), long-acting and extended release (four weeks)</p> <ul style="list-style-type: none"> <li>• Vivitrol™</li> </ul> <p><i>Research shows better outcomes with long-acting injection.<sup>1</sup></i></p>	<p>Oral sublingual <b>film</b> (buprenorphine-naloxone combination product)</p> <ul style="list-style-type: none"> <li>• Suboxone™</li> <li>• Generic product</li> </ul> <p>Oral sublingual <b>tablet</b> (buprenorphine-naloxone combination product)</p> <ul style="list-style-type: none"> <li>• Suboxone™</li> <li>• Zubsolv™</li> <li>• Generic product</li> </ul> <p>Oral <b>buccal film</b> (buprenorphine-naloxone combination; placed inside mouth between cheek and upper gum)</p> <ul style="list-style-type: none"> <li>• Bunavail™</li> <li>• Generic product</li> </ul> <p>Oral sublingual tablet (buprenorphine monoprodukt)</p> <ul style="list-style-type: none"> <li>• Subutex™</li> <li>• Generic product</li> </ul> <p>Injection: subcutaneous, extended release (buprenorphine monoprodukt)</p> <ul style="list-style-type: none"> <li>• Sublocade™</li> <li>• Brixadi™</li> </ul>	<p>Oral liquid suspension or concentrate</p> <ul style="list-style-type: none"> <li>• Methadose™</li> <li>• Generic product</li> </ul>
2	Mechanism of action?	<p><b>Opioid antagonist<sup>2</sup></b></p> <ul style="list-style-type: none"> <li>• 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)</li> <li>• No opioid-like activity</li> </ul>	<p><b>Partial opioid agonist<sup>2</sup></b></p> <ul style="list-style-type: none"> <li>• 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)</li> <li>• Has partial opioid-like activity</li> </ul>	<p><b>Full opioid agonist<sup>2</sup></b></p> <ul style="list-style-type: none"> <li>• 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)</li> <li>• Has full opioid-like activity</li> </ul>
3	Permitted treatment providers and locations?	<ul style="list-style-type: none"> <li>• Any licensed prescriber</li> <li>• All outpatient, inpatient and community-based locations</li> </ul>	<ul style="list-style-type: none"> <li>• Any prescriber licensed to prescribe Schedule III controlled medications</li> <li>• All outpatient, inpatient and community-based locations</li> </ul>	<ul style="list-style-type: none"> <li>• Any prescriber licensed to prescribe Schedule II and III controlled medications and only at certified and licensed opioid-treatment programs</li> </ul> <p>Exception: Methadone may be utilized for management of opioid use disorder (OUD) in acute-care hospitals under specific circumstances.<sup>3</sup></p>



Effects of each MOUD

Naltrexone

Buprenorphine

Methadone

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



Prescribing specifics for each MOUD		Naltrexone	Buprenorphine	Methadone
28	<b>FDA-approved age range?</b>	Ages 18 and up • “Off-label” for those younger than 18	Ages 16 and up • “Off-label” for those younger than 16	Ages 16 and up • “Off-label” for those younger than 16
29	<b>Recommended duration of treatment?</b> <i>Longer duration of MOUD treatment is associated with better outcomes, including reduced mortality.</i>	No maximum duration <sup>3</sup> • Risk of relapse and lethal overdose after discontinuation <sup>4</sup>	No maximum duration <sup>3</sup> • Risk of relapse and lethal overdose after discontinuation <sup>4</sup>	No maximum duration <sup>3</sup> • Risk of relapse and lethal overdose after discontinuation <sup>9</sup>
30	<b>Common side effects?</b> <sup>38, 39, 40</sup> <i>All forms of MOUD are generally safe and well-tolerated by most people.</i>	<ul style="list-style-type: none"> <li>Abdominal distress</li> <li>Anxiety</li> <li>Elevated liver enzymes</li> <li>Headache</li> <li>Injection-site pain (from injectable form of this MOUD)</li> <li>Insomnia</li> <li>Joint or muscle pain</li> <li>Tiredness</li> </ul>	<ul style="list-style-type: none"> <li>Back pain</li> <li>Constipation</li> <li>Insomnia</li> <li>Nasal congestion, sneezing, coughing</li> <li>Oral discomfort and/or dental problems (from oral forms of this MOUD)</li> <li>Injection site pain (from injectable form of this MOUD)</li> <li>Risk of misuse if not effectively supervised</li> </ul>	<ul style="list-style-type: none"> <li>Constipation</li> <li>Decreased respiration</li> <li>Difficulty with urination</li> <li>Dry mouth</li> <li>Multiple interactions with other medications</li> <li>QTc prolongation (abnormal heart rhythm)</li> <li>Sedation</li> <li>Risk of misuse if not effectively supervised</li> </ul>
31	<b>Contraindications?</b> <sup>3</sup> <i>i.e., symptoms, health conditions or circumstances which usually prevent use of MOUD</i>	<ul style="list-style-type: none"> <li>Allergy to this MOUD</li> <li>Active hepatitis</li> <li>Current tolerance to opioid agonists or partial agonists</li> <li>Individuals receiving opioid analgesics (painkillers) for medical conditions</li> <li>Individuals in acute opioid withdrawal</li> </ul>	Allergy to this MOUD	<ul style="list-style-type: none"> <li>Allergy to this MOUD</li> <li>Respiratory depression</li> <li>Severe bronchial asthma and/or elevated carbon dioxide</li> <li>Paralytic ileus (paralysis of intestine muscles, causing constipation)</li> </ul>
32	<b>Appropriate for use during pregnancy?</b>	Not recommended <sup>41</sup>	Strongly recommended <sup>41</sup> • Associated with improved outcomes for mother and infant <sup>3</sup>	Strongly recommended <sup>41</sup> • Associated with improved outcomes for mother and infant <sup>3</sup>
33	<b>Potential for diversion?</b> <i>i.e., being used for unintended purposes or illegal distribution</i>	None <sup>15</sup>	<ul style="list-style-type: none"> <li>Low, if monitored according to guidelines</li> <li>None, if long-acting injectable form of this MOUD is used<sup>15</sup></li> </ul>	Low, if monitored according to guidelines <sup>15</sup>
34	<b>Health insurance coverage?</b> <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"> <li>Generic forms are broadly covered by Medicaid, Medicare and private insurance.</li> <li>Non-generic forms frequently require prior authorization and/or have high co-insurance fees.</li> <li>There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.</li> </ul>	<ul style="list-style-type: none"> <li>Generic forms are broadly covered by Medicaid, Medicare and private insurance.</li> <li>Non-generic forms frequently require prior authorization and/or have high co-insurance fees.</li> <li>There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.</li> </ul>	<ul style="list-style-type: none"> <li>This medication is broadly covered by Medicaid, Medicare and private insurance.</li> <li>There may be different coverage for other components of treatment, such as administration of medication, drug screening, counseling and case management.</li> </ul>



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**How does MOUD support other components of comprehensive recovery, including informed choice?**

**All MOUDs help people:**

- 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.

**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:**

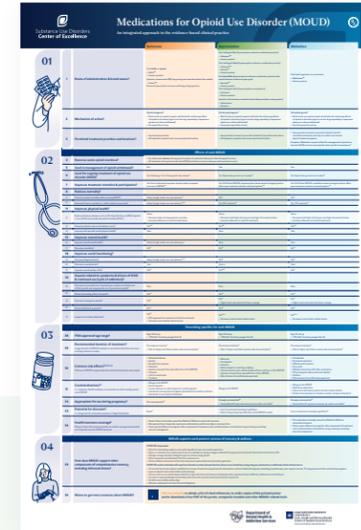
- Choose the best service options available from a menu of medical and psychosocial interventions, such as individual and group counseling, psychotherapy, peer-support services, 12-step groups and other mutual-help programs.
- Improve physical and mental health and functioning.
- Discover and use non-opioid-based 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.

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**Where to get more resources about MOUD?**

**Visit our website** to explore more resources and trainings for MOUD and other substance use disorders.

[case.edu/socialwork/ohio-sud-coe](https://case.edu/socialwork/ohio-sud-coe)



**Order your MOUD printed poster on our website.**

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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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