

Medications for Opioid Use Disorder (MOUD) Patient Information on Medication Options

[SAMPLE]

This guide will help you understand medicines that can help recover from opioid use disorder. These medicines, called Medications for Opioid Use Disorder (MOUD), are important for your recovery.

There are three main types of medications used:

- Buprenorphine
- Naltrexone
- Methadone

Buprenorphine and naltrexone can be given by your regular health care provider during your visits. Methadone is only available at special places called Opioid Treatment Programs (OTPs) or “Methadone Clinics.” If methadone is right for you, your health care provider will refer you to one of these clinics.

This guide will explain each medication, including where to get them, how to use them, how they work, and their benefits and risks. Be sure to talk with your health care provider to make sure the treatment fits your needs and goals. It’s important to ask questions and be involved in making decisions about your treatment.

Overview of Buprenorphine Medications

BRAND NAME (GENERIC NAME)	HOW DO I TAKE IT?	GETTING STARTED	INFORMATION TO CONSIDER
Suboxone™ (Buprenorphine/ Naloxone)	<ul style="list-style-type: none"> ▪ Forms: You can get it as a film or a tablet ▪ How to Take: Sublingual—place it under the tongue and let it dissolve ▪ How Often: Daily ▪ Dosing Changes: You can adjust the dose by cutting the film or splitting the pills if directed to do so by your health care provider 	<ul style="list-style-type: none"> ▪ If you are using opioids, you need to wait until your withdrawal symptoms are strong or really uncomfortable before starting to take this medication. ▪ If you’re already taking buprenorphine, you don’t need to wait for withdrawal symptoms to start. 	<ul style="list-style-type: none"> ▪ These medications are the most common choice for patients who are starting MOUD. ▪ These medications cost less and are often covered by most insurance plans, including Medicare and Medicaid. ▪ You can find this medication at most pharmacies. You can get a prescription and take it at home. ▪ You do not need to visit a clinic each day as you do with other medication options. ▪ If you take Suboxone or Zubsolv, you won’t feel the effects of opioids if you use them afterward. ▪ Some patients prefer Zubsolv over Suboxone because they like the taste better. It also seems to dissolve faster than Suboxone. ▪ These medications can cause physical dependence, which means you can’t just stop taking them on your own. You need to work with your health care provider to slowly lower the amount you take.
Zubsolv™ (Buprenorphine/ Naloxone)			
Subutex (Buprenorphine)			
Sublocade™ (Buprenorphine Extended Release)	<ul style="list-style-type: none"> ▪ Forms: Administered as an injection (shot) ▪ How to Take: The injection is given under your skin by a medical provider. Sublocade can only be injected into your stomach, while Brixadi may be injected into your stomach, upper arm or buttocks. ▪ How Often: Either weekly or monthly—your health care provider will determine how often you will get the injection 	<ul style="list-style-type: none"> ▪ For Sublocade: You must be taking buprenorphine tablets/strips for at least 7 days before starting this medication. ▪ For Brixadi: You may begin to take this medication when you are start to feel withdrawal symptoms after 1 dose of Suboxone. 	<ul style="list-style-type: none"> ▪ These medications give you a steady amount of buprenorphine over time. ▪ Warning: It is very dangerous to try to give yourself these injections. Only trained medical staff should do it. ▪ These medications are NOT available in regular pharmacies. ▪ Your insurance company must approve these medications before your health care provider can prescribe them. ▪ Your health insurance might not pay for the full cost. Ask your health care provider how much you might need to pay for each prescription. ▪ These medications can cause physical dependence, which means you can’t just stop taking them on your own. You need to work with your health care provider to slowly lower the amount you take.
Brixadi™ (Buprenorphine Extended Release)			

Overview of Naltrexone Medications

BRAND NAME (GENERIC NAME)	METHOD OF ADMINISTRATION	GETTING STARTED	MEDICATION CONSIDERATIONS
ReVia,[™] Depade[™] (Naltrexone)	<ul style="list-style-type: none"> ▪ Forms: Comes as an oral tablet (taken by mouth) ▪ How Often: Daily 	<ul style="list-style-type: none"> ▪ Requires 7-10 day period of absolutely no opioid use for those currently using opioids in order to start safely. ▪ Increased risk of fatal overdose—strongly discouraged for those not yet consistently opioid-free. 	<ul style="list-style-type: none"> ▪ ReVia/Depade are not as effective in reducing cravings as buprenorphine and methadone. They are typically used to help manage cravings and maintain long-term abstinence from opioids, rather than for starting treatment. ▪ Your health care provider may refer you to an addiction specialist to make sure this medication is safe for you. ▪ It's important to take this medication exactly as prescribed; missing doses, delaying them, or stopping suddenly can increase the risk of a dangerous overdose. ▪ This medication is usually considered after you have been on another medication for a while and have gradually reduced or stopped using it. ▪ This medication does not cause dependence or withdrawal symptoms when stopped.
Vivitrol[™] (Naltrexone Extended Release)	<ul style="list-style-type: none"> ▪ Forms: Administered as a deep intramuscular injection (shot in the buttocks) ▪ How to Take: The shot is given in your buttocks by trained medical staff at your health care provider's office ▪ How Often: You will get the injection once a month 	<ul style="list-style-type: none"> ▪ Must be free of all opioids for 7-10 days before starting this medication. 	<ul style="list-style-type: none"> ▪ Vivitrol is not as effective as buprenorphine and methadone at reducing cravings. They are typically used to help manage cravings and maintain long-term abstinence from opioids, rather than for starting treatment. ▪ Your health care provider may refer you to an addiction specialist to make sure this medication is safe for you. ▪ It's often not available at regular pharmacies and is usually ordered through a specialty pharmacy, though some health plans might allow it to be filled at a regular pharmacy. ▪ Your insurance company must approve this medication before your health care provider can prescribe it. ▪ This medication does not cause dependence or withdrawal symptoms when stopped. It is not a controlled substance. However, you should not stop taking them on your own. You need to work with your health care provider to slowly lower the amount you take.

Overview of Methadone Medications

BRAND NAME (GENERIC NAME)	METHOD OF ADMINISTRATION	GETTING STARTED	MEDICATION CONSIDERATIONS
Dolophine[™] (Methadone)	<ul style="list-style-type: none"> ▪ Forms: Comes as an oral tablet, liquid, or wafer ▪ How to Take: Your health care provider can't prescribe this medication. You must go to a clinic with an Opioid Treatment Program (OTP) to get it every day. ▪ How to Often: Daily ▪ Dosing Changes: The clinic staff will gradually increase your dose over a few weeks to find the right amount for you. 	<ul style="list-style-type: none"> ▪ You must be willing and able to attend an OTP or methadone clinic every day when starting your treatment. 	<ul style="list-style-type: none"> ▪ This medication might be a good choice if you still crave opioids or use illegal opioids and want to stop, especially after trying buprenorphine or naltrexone. ▪ Most clinics with OTPs are open very early in the morning, but some also offer afternoon hours. ▪ After showing that you've been going to the clinic daily and have a safe place to store the medication, you might be allowed to take some doses home. ▪ Methadone is often covered by Medicare, Medicaid, and private insurance, and it usually costs less than other options. It also often includes counseling and other support for recovery. ▪ This medication causes physical dependence, which means you can't just stop taking them on your own. You need to work with your health care provider to slowly lower the amount you take.