

For prescription drug addiction treatment, buprenorphine maintenance trumps detoxification

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For treating patients with prescription opioid dependence in primary care, buprenorphine maintenance therapy is superior to detoxification, according to a new study by Yale School of Medicine researchers published in the Oct. 20 issue of *JAMA Internal Medicine*.

Prescription [opioid dependence](#) has been increasing for the last 15 years and now surpasses heroin dependence. Doctors are also writing more prescriptions for pain management, which has led to higher experimentation and addiction rates, according to lead author David Fiellin, M.D., professor of internal medicine at Yale School of Medicine.

"Primary care physicians lack evidence-based guidelines to decide between detoxification or providing patients with ongoing [maintenance therapy](#)," said Fiellin.

Fiellin and his colleagues conducted a 14-week randomized clinical study of 113 patients with prescription opioid dependence. Patients randomly received either buprenorphine detoxification or ongoing buprenorphine maintenance therapy. Buprenorphine is a medication used to treat addiction. Study participants in the detoxification group received six weeks of stable doses of buprenorphine followed by three weeks of tapering doses. All patients received physician and nurse support and drug counseling for all 14 weeks.

The team found that patients in the detoxification group tested positive for illicit opioid use more often than those in the maintenance group. Patients who received ongoing buprenorphine were less likely to use illicit opiates. Few of the patients in the detoxification group stayed in treatment or were able to abstain after the medication was discontinued.

"For prescription opioid dependence, buprenorphine detoxification is less effective than ongoing maintenance treatment, and increases the risk of overdose and other adverse events," said Fiellin. "We found that a number of providers were offering patients buprenorphine detoxification. This is not consistent with how the disease process works."

"It is very common for patients seeking treatment to request [detoxification](#)," said Fiellin. "They want to be off of everything as soon as possible as opposed to considering long-term treatment, but unfortunately there's no quick fix for the disease. The majority of [patients](#) will do better if they receive ongoing maintenance treatment."

More information: *JAMA Internal Medicine*, [DOI: 10.1001/jamainternalmed.2014.5302](#)

Provided by Yale University

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