

New study examines addiction medicine treatment in Vietnam

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An assessment published this week in the journal *The Lancet HIV* provides new insight about an initiative to integrate treatment of opioid use disorder along with HIV in Vietnam.

The study marks one of the first scientifically robust assessments of a new model of treating HIV in lower or [middle income countries](#) where injection drug use is a major cause of HIV infection. It also suggests the importance of building support for peer and community connections to tackle the [opioid](#) epidemic that continues to ravage the United States in the midst of the COVID-19 pandemic.

The study was led by scientists and physicians at Hanoi Medical University and Oregon Health & Science University.

"Our study suggests that countries that want to expand treatment for opioid use disorder with buprenorphine should consider interventions to support retention on treatment directed at family networks, peers and community health workers," said co-author Todd Korthuis, M.D., M.P.H., a leader in [addiction medicine](#) at OHSU and the study's principal investigator.

Korthuis, professor of medicine ([general internal medicine](#) and geriatrics) in the OHSU School of Medicine, became involved in initiating the program in Vietnam after serving as a Visiting Fulbright Scholar in 2012-13.

The new study is the first multisite randomized trial to compare HIV clinic-based buprenorphine therapy compared with simply referring HIV patients to methadone clinics for opioid use disorder treatment. The study examined outcomes for opioid use disorder and for HIV, and how well participants stuck with treatment.

Researchers found that ongoing support is critical.

"We understand that addiction is a brain disease, so people have relapses," senior author Le Minh Giang, M.D., Ph.D., chair of global health at Hanoi Medical University, said in a podcast hosted by *The Lancet HIV*. "In many cases, the patients left the opioid use disorder treatment and then relapsed into drug use. That's problematic for people who don't have good support from clinical staff."

Buprenorphine, also known as Suboxone, can be prescribed and used outside a specialty addiction clinic, whereas methadone must be closely monitored in part because of a higher risk of overdose in unsupervised settings. Between July of 2015 and February of 2018, a total of 281 people were enrolled in a pilot project to treat people with buprenorphine—a first in Vietnam.

"It's a more flexible treatment than methadone maintenance," Korthuis said. "You can integrate it into HIV clinics and, theoretically, in primary care clinics. Methadone has to be very carefully controlled in a specialty setting."

The new study found that access to buprenorphine is essential for countries aiming to expand access to treatment for opioid use disorder, especially among patients also being treated for HIV.

"One of the things I was impressed with, is the very tight social fabric in Vietnam," Korthuis said in *The Lancet* podcast. "It's impossible not to overstate the role of the family, the role of the neighborhood and the role of the community in every aspect of life, including health care."

In fact, Korthuis is already implementing a similar outreach model in several rural counties in Oregon through an initiative funded by the National Institutes of Health. Known as Oregon HIV/Hepatitis and Opioid Prevention and Engagement, or Oregon HOPE, the initiative relies on peers who have recovered from addiction to engage their neighbors in prevention and treatment

services.

The program is currently active in several counties across southern and eastern Oregon.

"Community health workers who really know their neighborhoods are really good at engaging people in addiction treatment—and keeping them in treatment," Korthuis said.

More information: P Todd Korthuis et al, HIV clinic-based buprenorphine plus naloxone versus referral for methadone maintenance therapy for treatment of opioid use disorder in HIV clinics in Vietnam (BRAVO): an open-label, randomised, non-inferiority trial, *The Lancet HIV* (2021). DOI: [10.1016/S2352-3018\(20\)30302-7](https://doi.org/10.1016/S2352-3018(20)30302-7)

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