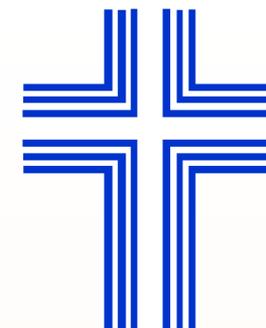


Buprenorphine/naloxone maintenance therapy: the effect of dose on two year retention in an office-based treatment program

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Purpose

- The buprenorphine/naloxone sublingual combination tablet (Suboxone) is the first medication for treating opioid dependence in an office-based setting.
- The advantages of Suboxone compared to methadone (Harris et al. 2000) include:
 - The convenience of a traditional pharmacy prescription.
 - Decreased potential for harm in the event of medication diversion or overdose.
 - Ease of dosage titration and brevity of eventual tapering off the medication.
 - Decreased impact on the patient's cognitive function.
- Few studies have examined the effectiveness of outpatient Suboxone protocols at one year post-induction (Kakko et al. 2003)
- The present study utilizes chart audits and telephone interviews at one year post-induction to:
 - Identify the effects of (a) patient characteristics and (b) treatment characteristics on **retention in the Suboxone protocol**.
 - Examine the effects of (a) patient characteristics, (b) treatment characteristics and (c) retention in the Suboxone protocol on **opiate complications**.
 - Characterize the effects of (a) thru (c) on **social, role and occupational dysfunction**.

Methods

- Patients consisted of 56 opiate dependant adults who met the criteria for admission (multiple failed attempts at abstinence, lack of uncontrolled major mental illness, and a stable living situation) and possessed the financial means for suboxone treatment.
- Chart reviews were conducted to obtain patient demographics, medical and drug abuse history, and information from the stabilization phase of treatment.
- Telephone interviews were then conducted and consisted of questions about current suboxone use, current illicit drug use, the presence of opiate complications, and questions measuring social, role and occupational dysfunction with the Shortened Inventory of Problems - Alcohol and Drugs (SIP-AD) (Blanchard, et al, 2003).

Results

Table 1: Demographic, Treatment and Outcome Characteristics of Study Patients

Demographic Characteristics	
Gender male	33 (59%)
Age at first visit	41.1 (12.0)
Race/ethnicity:	
Black	12 (21%)
Hispanic	1 (2%)
White	41 (73%)
Other	2 (4%)
Main opiate of abuse:	
Heroin	45 (80%)
Prescription	11 (20%)
Age of first use	28.4 (10.2)
Hepatitis C positive	19 (34%)
Previous psychiatric treatment	25 (45%)
Prior legal problems	31 (55%)
Employed at first visit	21 (38%)
Treatment Characteristics	
Finished intensive outpatient program	36 (64%)
Has a sponsor	10 (18%)
Outcomes	
Months of retention in the Suboxone protocol	9.7 (7.2)
Opiate complications scale	1.5 (1.1)
Social, role and occupational dysfunction scale	5.2 (6.2)

Notes: Mean (SD) unless marked number (percentage).

Table 2: Reduced Multivariable Regression for Retention in the Suboxone Protocol

Variable	Coefficient (95% CI)
Constant	5.5 (2.6, 8.4)
Finished intensive outpatient program	5.4 (1.7, 9.2)
Has a sponsor:	4.0 (-0.7, 8.7)

Notes: $F_{(2,53)} = 7.4, p = .002. R^2 = .22.$

Table 3: Reduced Multivariable Regression for the Opiate Complications Scale

Variable	Coefficient (95% CI)
<i>No demographic or treatment variables were related to score on the opiate complications scale.</i>	

Notes: $F_{(1,54)} = 0.2, p = .684. R^2 = .00.$

Table 4: Reduced Multivariable Regression for Social, Role and Occupational Dysfunction Scale

Variable	Coefficient (95% CI)
Constant	13.0 (8.8, 17.3)
Age of first use	-0.2 (-0.3, -0.1)
Previous psychiatric treatment	2.8 (0.1, 5.5)
Retention in the Suboxone protocol	-0.4 (-0.6, -0.2)

Notes: $F_{(3,52)} = 11.7, p < .001. R^2 = .40.$

Summary of Results

- Retention in the Suboxone Protocol**
 - No **demographic characteristics** were related to retention in the Suboxone protocol.
 - Patients who **completed the initial 6 week intensive outpatient program** remained in the Suboxone protocol about 6 months longer than those who did not.
- Opiate Complications**
 - No demographic or treatment characteristics were related to opiate complications measured in the follow-up interview.
- Social, Role and Occupational Dysfunction**
 - Later initiation into opiate use** was related to *less severe* dysfunction measured in the follow-up interview.
 - Having received psychiatric treatment** in the past *increased* dysfunction scores in the follow-up interview.
 - Retention in the Suboxone protocol** *reduced* dysfunction scores in the follow-up interview.

Conclusions

- Staying in the initial 6 week intensive outpatient program was related to remaining on Suboxone a year after treatment was initiated.
- No demographic or treatment characteristics were related to opiate complications measured in the follow-up interview.
- Remaining on Suboxone reduced social, role and occupational dysfunction as measured by the SIP-AD.

References

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