A New Alternative to Methadone for Those Addicted to Heroin

VISN 1 MIRECC investigator, Thomas Kosten, M.D., has recently completed a series of studies on the usefulness of buprenorphine for treatment of heroin addiction. Like methadone, buprenorphine is taken orally and substitutes for heroin. People addicted to heroin do not need to experience withdrawal symptoms to start buprenorphine and they no longer need to use needles. Methadone is currently the mainstay of heroin treatment in the U.S. but drawbacks include need for daily dosing, availability only in specially licensed programs and potential for overdose or diversion if those addicted to heroin are allowed to take methadone home. Because of these restrictions over half of heroin users in the U.S. live too far from a methadone program to be able to obtain treatment. Buprenorphine has unique properties that make it safe for less restricted use such as in primary care medical settings. First, overdose risk is reduced because there is a ceiling on buprenorphine's heroin-like effects and the pills used for heroin treatment are mixed with a heroin blocker that is active only if users try to inject the drug. Second, buprenorphine is longer-acting than methadone and can be administered three times weekly rather than daily. These features translate into making buprenorphine safer for take-home dosing or less frequent clinic visits if dispensed by a clinic or pharmacy. Also, legal restrictions requiring special licensing for methadone maintenance will not apply for buprenorphine treatment, enabling its prescription by any physician. Final approval by the Food and Drug Administration is expected this Fall. Buprenorphine holds the promise for expanding treatment for heroin dependence in the VA system because methadone maintenance is currently available at only a fraction of VA hospitals.