



Learning about opioid use disorder

Do you or a loved one:

- use opioids differently from the way they were prescribed?
- have problems stopping opioid use?
- crave opioids and take risks to get them?

Solutions are possible. Talk to your healthcare professional to get linked to treatment that could help.



Balanced information for better care

Steps you can take for yourself or a loved one today

For yourself:

- Find treatment services and information (see below).
- Take medication as prescribed to manage opioid use disorder.
- Avoid places and people that might trigger the desire to use drugs again.
- Talk about feelings and drug cravings.

For a loved one:

- Find treatment services and information (see below).
- Offer rides to treatment and support groups.
- Help find a place to live or get a job, if needed.
- Be understanding if use starts again, and help return to treatment quickly.

For help with treatment or a crisis

- **Call 1-800-662-HELP (4357)** to reach a 24-hour, free, confidential crisis center.
 - Get help from your primary doctor or other health care provider.
 - Go to the emergency room.
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Opioid use disorder (OUD) is problematic opioid use that negatively impacts a person's life

OUD is a long-term illness like asthma or diabetes. Using an opioid such as oxycodone (OxyContin, Percocet), hydrocodone (Vicodin), fentanyl, or heroin, whether by prescription or other means, can lead to OUD in some people.

OUD can affect every part of a person's life, such as the ability to make decisions, go to work, and have relationships.

Additional signs of OUD can include:

- continuing to use opioids even though they cause serious harm or problems
- craving opioids
- being unable to stop using opioids



**There is hope for recovery.
Medication and counseling can help
with managing OUD.**

Medication helps treat OUD

More than 2 million people have OUD, but only 1 in 5 get treatment.

The three medications available are:

1. Buprenorphine or buprenorphine/naloxone (such as Suboxone)

- can be prescribed by some primary care providers
- does not usually require daily clinic visits
- available by mouth, injection, or implant

2. Methadone

- only available through an opioid treatment program
- usually requires daily visits
- offered with programs to support recovery at these centers

3. Naltrexone (Vivitrol)

- can be prescribed by any health care professional
- given as a monthly injection

These medications can help a person with OUD stop misusing opioids. Medication can be combined with counseling. Counseling teaches new ways to cope with daily life, which can be lifesaving.

Common questions

Question	Answer
<i>Do medications to treat OUD replace one addiction with another?</i>	No. Medications to treat OUD last longer and are safer. They can lower a person's use of more dangerous drugs.
<i>Isn't addiction to opioids a bad moral choice?</i>	Addiction to opioids is a disease. Repeated opioid use can cause chemical changes in a person's brain that create a craving for these drugs. The risk can be increased in some people by genetic and environmental factors.
<i>Will treatment cure someone with OUD?</i>	Just as diabetes is not "cured" by the use of insulin, often people with OUD are not "cured" by medication, but are able to better manage their condition.

People with OUD can and do recover.

Recovery is a life-long process. People learning to recover from OUD often need to develop a whole new way to live and make new, positive relationships.

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These are general recommendations only; specific clinical decisions should be made by the treating clinician based on an individual patient's clinical condition.

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