

MEDICATION ASSISTED TREATMENT

Improving Outcomes Through A Whole Person Approach

Medication Assisted Treatment (MAT) combines medications with counseling and behavioral therapies. MAT is effective in the treatment of Opioid Use Disorders (OUDs) and Alcohol Use Disorders (AUDs) and can help some people sustain recovery. MAT relieves the withdrawal symptoms and cravings that cause chemical imbalances in the body, thereby allowing people to better focus on long-term goals and recovery. MAT may be a key component for some people, especially when psychosocial methods alone have failed.

As nursing facilities admit an increasing number of residents with Substance Use Disorders (SUDs), it is important to know the available MAT options to promote abstinence and prevent relapse.

The Food and Drug Administration has approved several medications to treat AUDs and OUDs. These medications must be used under medical supervision, carefully monitoring for side effects. As with any medication, medical consultation must be sought before discontinuing use.

Medications for Alcohol Use Disorder (MAUD)

Acamprosate, Disulfiram, and Naltrexone are the most common medications used to treat AUDs. They do not provide a cure for the disorder but are most effective in people who participate in an MAUD program.

- **Acamprosate** is used for residents who are in recovery, no longer drinking alcohol and want to avoid further drinking. It prevents urges to drink alcohol but does not prevent withdrawal symptoms. The use of Acamprosate typically begins on the fifth day of abstinence, reaching full effectiveness in five to eight days. It comes in tablet form.
- **Disulfiram** treats chronic alcohol use and is most effective in residents who have stopped drinking alcohol or are in the initial stage of abstinence. It is often prescribed in a tablet form.
- **Naltrexone** blocks the euphoric effects and feelings of intoxication. It allows residents with AUDs to reduce alcohol use and avoid relapse. It comes in pill form or as an injectable.

Medications for Opioid Use Disorder (MOUD)

Buprenorphine, Methadone, and Naltrexone are used to treat OUDs to short-acting opioids such as heroin, morphine, and codeine, as well as semi-synthetic opioids like Oxycodone and Hydrocodone.

- **Buprenorphine** is used in agonist substitution treatment, which is a process for treating OUD that uses buprenorphine to substitute for a stronger full agonist opioid (such as heroin). It suppresses and reduces cravings. Buprenorphine comes in tablets, film, implant and as an injectable.
- **Methadone** changes how the brain and nervous system respond to pain. It lessens the symptoms of opiate withdrawal and blocks the euphoric effects. Methadone is available as a tablet, oral solution or injectable liquid.
- **Naltrexone** binds and blocks opioid receptors and opioid cravings. It comes in pill form or as an injectable.

This resource is for information purposes. It is not intended as a treatment recommendation from the Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF).

References:

[Substance Abuse and Mental Health Services Administration: Medications, Counseling, and Related Conditions](#)