



COMPLIANCE WITH BUPRENORPHINE-MEDICATION ASSISTED THERAPY DECREASES DRUG USE AMONG OPIATE ADDICTS: A RANDOMIZED CONTROLLED TRIAL

Joseph Tkacz, M.S.; Charles Ruetsch, Ph.D

Background/Objective

There is an increased risk for poly-substance abuse among persons diagnosed with opiate dependence. The current analysis examined drug use among a national sample of opiate addicts before and after treatment with buprenorphine-medication assisted therapy (B-MAT). All patients were randomly-assigned to B-MAT (i.e. controls) or B-MAT plus a patient support compliance-enhancement program (i.e. intervention).

Methods

Subjects (N=909) were recruited from cases seeking B-MAT, meeting study eligibility criteria, and completing a baseline survey. Subjects were randomly assigned to receive B-MAT or B-MAT plus a telephonic patient support medication compliance program. Measures included the Addiction Severity Index, Opioid Treatment Index, and Treatment Services Review collected at baseline, 1, 2, 3 and 6 months. For this study, subjects who were compliant with medication were compared to subjects who were non-compliant on usage of licit and illicit substances. Compliance was defined as taking medication ≥ 22 days out of previous 28 days.

Results

Though results will focus on the 6 month data point, 3 month data are presented here. Compared to compliant subjects, non-compliant subjects were significantly more likely to use the following substances: alcohol (52% vs. 37%), alcohol just to get intoxicated (24% vs. 13%), heroin (24% vs. 5%), methadone (10% vs. 2%), other opiates (33% vs. 10%), cocaine (10% vs. 4%), amphetamines (6% vs. 2%), and cannabis (28% vs. 17%); p 's < .01.

Conclusions

Results indicate that, in addition to less opiate use, subjects who were compliance with B-MAT also used a variety of other substances significantly less than subjects who were non-compliant. These results are particularly important given the number of opiate addicts who abuse multiple substances, and the high costs associated with drug addiction (e.g. treatment, prison, crime, etc.).

Source of Funding

Reckitt Benckiser Pharmaceuticals provided financial support for this research.