

*Preventive Medicine Associates*

**Outpatient De-Addiction Guidelines and  
Recommendations**

# Introduction

De-addiction is an important first step in substance abuse treatment. It has three goals: initiating abstinence, reducing withdrawal symptoms and severe complications, and retaining the patient in treatment. Ongoing treatment is needed thereafter to maintain abstinence.

Pharmacologic treatment for de-addiction often involves substituting a long acting agent for the abused drug and then gradually tapering its dosage. In addition adjunctive medication to control abstinence symptoms and craving may be used. The desirable qualities for outpatient medications include administration by mouth, low potential for abuse and overdose, and low incidence of side effects. Adequate dosages of appropriate substitute medications are important. Patients often safely attain abstinence without pharmacologic intervention, however, and the threshold for pharmacotherapy differs among abused drugs. The need for medication is signaled by both symptoms and signs in patients withdrawing from alcohol, by severe objective signs in those withdrawing from stimulants, and by specific signs and symptoms during withdrawal in those withdrawing from opioids.

Outpatient management is appropriate for patients with mild-to- moderate withdrawal symptoms who have no important coexisting conditions and have a support person willing to monitor their progress closely. The emergence of serious complications, including delirium tremens among patients dependent on alcohol or depression with suicidal ideation or psychotic symptoms among patients dependent on stimulants or opioids, demands inpatient treatment. In addition, coexisting psychiatric and medical disorders must be managed. Care must be supportive and nonjudgmental, yet assertive.

During de-addiction, behavioral interventions for ongoing treatment of these chronic relapsing disorders may be started. Such interventions should be more sophisticated than simple referral to self-help groups. Effective treatments include contingency management, motivational enhancement and cognitive therapies.

The De-addiction guidelines used by Preventive Medicine Associates were developed from published treatment guidelines, some of which are included in the appendix and extensive clinical experience of Dr. Punyamurtula S. Kishore,