

PUNYAMURTULA KISHORE SAYS "WE HAVE TO DO BETTER"

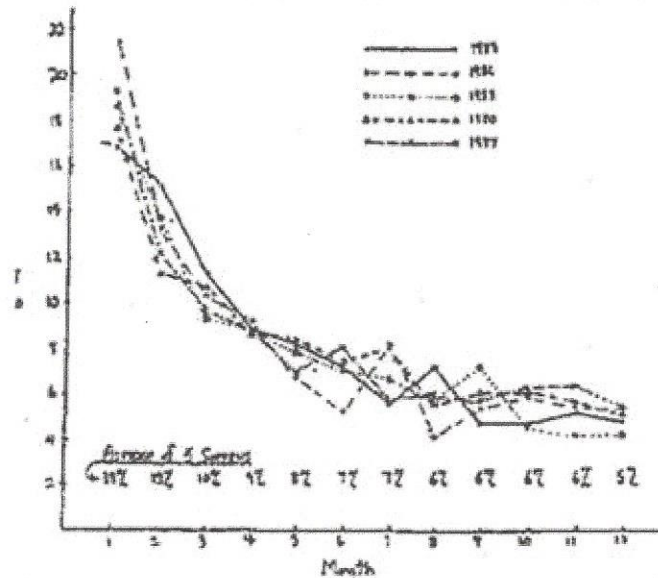
HOME 33 YEARS LATER TIDAL WAVE COSTS SOCIETY RATE

Success Rate vs. Survival Rate

ALCOHOLISM TREATMENT QUARTERLY

FIGURE C-1

% of those coming to AA within the first year
that have remained the indicated number of months



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Contact Info:
Phone: 617-738-4640
PSX@pmaai.net

Medication Assisted Recovery (MAR) with Extended Release Naltrexone (XR-NTX/Vivitrol®) for Poly-Substance Dependence: Case Series 2006-2010

Principal Author: Punyamurtula Kishore, MD, MPH, FASAM
Co-Principal Authors (Alphabetically): William Burke, MD, Johannah Heaphy, Pharm D, Carter Petty, MA, William McAuliffe PhD, Gabrielle Mottola, Drilon Saliu, Pharm D

Preventive Medicine Associates Inc.
PO Box 470799
Brookline, MA 02445



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Introduction

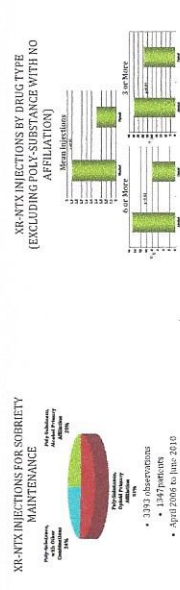
In Massachusetts in 2009 there were 89,152 admissions for substance abuse treatment as reported by SAMHSA. 23.9% of those were for alcohol, 47.7% were for heroin and other opiates, and 28.4% were for various other agents.^{1,7} While substance abusers may have a primary affiliation with one agent, studies over the past few decades have shown that the majority have poly-substance dependence, abusing multiple agents on a regular basis.⁸ Addicts often seek out additional drugs to increase balance or maintain the effects of drugs they are already taking.⁵ A primary obstacle for treatment of substance use disorders is the high relapse rate. Medication assisted recovery reduces cravings, blocks the feeling of high, and shields against impulsive use.^{1,9} A medication that can aid in the maintenance of the opiate-free state is naltrexone. It blocks opiate receptors in the brain and is a specific opiate antagonist. Naltrexone is also a good example of an ant craving medication used in the treatment of alcoholism.^{10,11} Studies have found that the effectiveness of oral naltrexone varied according to patient compliance with the medication regimen.^{4,6,11} Experiences with extended release injectable naltrexone (XR-NTX/Vivitrol) for sobriety maintenance is outlined.



Hoffman, V., M.D., A.A. M., F.A.S.A.M.
M.D., A.A. M., F.A.S.A.M.
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M.D., A.A. M., F.A.S.A.M.
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Methods

Preventive Medicine Associates Inc. (PMAI) has been treating patients since 1996 with oral naltrexone (Revia®) for alcohol dependence^{12,13} and has had significant but limited success with directly observed therapy (DOT).¹⁴ Previous to 1996, the principal author had used naltrexone (Revia®) for sobriety maintenance of opiate dependent patients since 1978.^{15,16,17} Subsequent to FDA approval in 2006, PMAI began using extended release injectable naltrexone (XR-NTX/Vivitrol) for poly-substance abuse with primary affiliation for alcohol, opiates, or other combinations. Following detoxification, patients were first given oral naltrexone for one week to test motivation. Appropriate candidates were given XR-NTX. Between 2006-2010, 3393 observations were made on 1347 patients in an outpatient, primary care setting who had a primary affiliation with alcohol, opiates, or other combinations.



Results

- Consistent with results reported by SAMHSA,¹⁷ we found that 51% of our population were poly-substance abusers with a primary affiliation for opiates, 25% were poly-substance abusers with a primary affiliation for alcohol, and 24% were poly-substance abusers with other combinations.
- 49.2% of the patients received 1 injection, 32.1% received 3 or more injections.
- The ratio of males to females receiving XR-NTX injections is 1.5 to 1. In comparison, in addiction treatment admissions to programs throughout MA the ratio males to females receiving treatment is 2.4 to 1.³
- Poly-substance users with a primary affiliation for alcohol received a mean of 2.9 injections while poly-substance abusers with a primary affiliation for opiates received a mean of 2.4 injections.
- 38% of male poly-substance users with a primary affiliation for opiates and 23% of female poly-substance users with a primary affiliation for opiates received 3 or more XR-NTX injections.
- Adverse effects reported: few cases of swelling at injection site, rare cases of mild withdrawal symptoms.

Conclusion

Data has shown that naltrexone is a safe, effective method of treatment. It serves as a useful component in successful addiction treatment.^{1,2,4,9,13,15,18} While there are many methods of treatment that all prove useful, treating the obsessive thoughts, compulsive behaviors, and cravings for the drug and drug lifestyle is an effective and emerging approach.¹⁹ Our four year experience has found that extended release naltrexone (XR-NTX/Vivitrol) facilitates sobriety maintenance. XR-NTX provides an opportunity to integrate the delivery of substance abuse treatment into a primary care practice.^{7,8,10,11} Surveillance with toxicology screening and case management increases effectiveness and patient adherence.^{7,8} XR-NTX assists in early sobriety. Once-monthly dosing, the rapid onset of therapeutic effect in the first two days, and the fact that it is generally well tolerated with a demonstrated safety profile contribute to adherence to treatment plans.

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