

# **BUPRENORPHINE TREATMENT** FOR YOUNG ADULTS

Your Challenge: Reducing the relapse rate when treating young adults addicted to prescription and other opioids.

An Evidence-Based Approach: Buprenorphine treatment.

Where to Start: The NIDA/SAMHSA Blending Initiative publishes free, online awareness and training materials that specifically address the use of buprenorphine in treating young adults.

*uprenorphine Treatment for Young Adults* is a package of online tools and training resources for substance abuse professionals. Findings from a National Drug Abuse Clinical Trials Network (CTN) study

According to Monitoring the Future data from 2010, 1 in 12 high school seniors used the prescription pain reliever Vicodin for nonmedical reasons in the past year.

indicate that buprenorphine treatment can be safely used with young adults to decrease the likelihood of relapse (see figure 1).

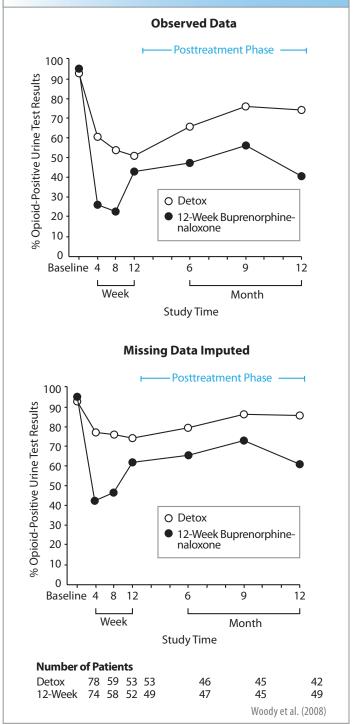
## Why Is Effective Treatment for Opioid Addiction Especially Important for Young Adults?

Opioid addiction is a problem among adults of all ages. According to the National Survey on Drug Use and Health by the Substance Abuse and Mental Health Services Administration, 3.8 million people aged 18-25 (or 11.1 percent) used prescription pain relievers for nonmedical reasons in the past year. The rates of certain consequences of prescription drug abuse among young adults have also increased dramatically. For example, the number of ED visits related to nonmedical use of opioid pain relievers for young adults age 18-24 more than doubled (from about 20,000 to 49,000) from 2004 to 2009. In addition, treatment admissions for primary abuse of prescription opioid pain relievers surged from 18,300 in 1998 to 113, 506 in 2008, with the largest increases in the 18-24 year old age group. This age group also experienced a greater increase in death rates from opioid analgesics than any other age group from 1999-2006.

## Why Should Buprenorphine Treatment Be Considered as a Treatment Option?

The CTN study compared long-term versus short-term buprenorphine treatment in combination with individual drug counseling in an outpatient setting. Primary study findings indicate that young adults in the long-term buprenorphine treatment were more likely to remain in treatment and less likely to inject drugs or abuse opioids, cocaine, and marijuana than those who received short-term detoxification.

#### FIGURE 1. PERCENTAGE OF OPIOID-POSITIVE URINE TEST RESULTS AT BASELINE AND WEEKS 4, 8, AND 12; AND FOLLOW-UP MONTHS 6, 9, AND 12



Note: "Detox" indicates "detoxification group," and "12-Week buprenorphinenaloxone" indicates "buprenorphine group." Error bars indicate 95% confidence intervals. According to the CTN study, *Buprenorphine/Naloxone-Facilitated Rehabilitation for Opioid Dependent Adolescents/Young Adults*, continuing the buprenorphine treatment for 12 weeks versus 2 weeks improved outcomes. During weeks 1 through 12, patients in the 12-week buprenorphine group reported less opioid use (p < .001), better retention (p < .0001), less injecting (p = .01), less use of cocaine (p = .001) and less use of marijuana (p = .001). Continuing the treatment for 12 weeks was safe in opioid-addicted adolescents and young adults, and improved outcomes compared with short-term detoxification.

Although relapse following short-term detoxification is high, clinicians within the drug abuse treatment community remain reluctant to use medication with opioid-addicted youth and young adults. These findings indicate that treatment with buprenorphine is a viable alternative for helping young adults overcome opioid addiction and that young adults do not require a special treatment regimen.

### What Does Buprenorphine Treatment for Young Adults Offer for Treatment Providers?

This package of materials is designed to help substance abuse treatment providers understand and adopt evidence-based treatment interventions. Available online for easy access, it provides a review of the prevalence of nonmedical use of opioids among young adults, as well as information about treatment admission rates. Training materials explain the results of new research on using buprenorphine to treat opioid addiction in young adults and present implications for practice.

## **Tools Included in the Package**

*Buprenorphine Treatment for Young Adults* includes a complete set of training materials, supported by research-based information such as

- A training manual.
- A PowerPoint presentation (with and without short video); also available in Flash.

- Research articles.
- Much more!

## **Additional Resources**

The following resources are also available from SAMHSA's Center for Substance Abuse Treatment (CSAT):

#### **CSAT Buprenorphine Information Center**

http://buprenorphine.samhsa.gov

This website provides information and resources for physicians, nurses, researchers, and others. Included is information relevant to the Drug Abuse Treatment Act of 2000 and links to buprenorphine-related reports and publications.

#### Buprenorphine Physician and Treatment Program Locator

#### http://buprenorphine.samhsa.gov/bwns\_locator/index.html

States, medical and addiction treatment communities, and potential patients and their families can use this online resource to locate physicians and treatment programs authorized to treat opioid addiction with buprenorphine.

## Treatment Improvement Protocol for the Use of Buprenorphine

#### http://www.ncbi.nlm.nih.gov/books/NBK64245

Clinical Guidelines for the Use of Buprenorphine in the Treatment of Opioid Addiction (TIP 40) provides consensusand evidence-based treatment guidance on the use of buprenorphine. Physicians can use this information to make practical, informed decisions about the use of buprenorphine to treat opioid addiction.

#### References

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Substance Abuse and Mental Health Services Administration. (2011). Results from the 2010 National Survey on Drug Use and Health: Summary of national findings (NSDUH Series H-41, HHS Publication No. (SMA) 11-4658). Retrieved from http://www.samhsa.gov/data/NSDUH/2k10NSDUH/2k10Results.htm

Woody, G. E., Poole, S. A., Subramaniam, G., Dugosh, K., Bogenschutz, M., Abbott, P.,...Fudala, P. (2008). Extended vs short-term buprenorphine-naloxone for treatment of opioid-addicted youth: A randomized trial. *Journal of the American Medical Association*, 300(17), 2003–2011.

## THE **BLENDING**INITIATIVE

Accelerating the dissemination of research-based drug abuse treatment into clinical practice is a priority for the National Institute on Drug Abuse (NIDA) and represents the core mission of the **Blending Initiative**. NIDA and the Substance Abuse and Mental Health Services Administration (SAMHSA) joined together to create the **Blending Initiative** in 2001 to reduce the gap that exists between the publication of research results and impact on treatment delivery. This initiative incorporates collaboration between clinicians, scientists, and experienced trainers to catalyze the creation of user-friendly treatment tools and products and facilitate the adoption of research-based interventions into front-line clinical settings. Through this initiative, NIDA and SAMHSA's Addiction Technology Transfer Centers (ATTCs) disseminate treatment and training products based on results from studies conducted by the National Drug Abuse Clinical Trials Network (CTN) as well as other NIDA-supported research.

Get the Products and Additional Resources from:

National Institute on Drug Abuse: http://www.drugabuse.gov/blending-initiative

SAMHSA ATTC: http://www.attcnetwork.org/blendinginitiative

U.S. Department of Health and Human Services National Institutes of Health

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