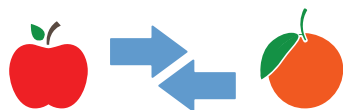
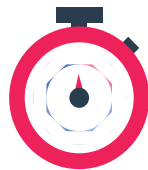


Understanding the Truth behind Medication for Opioid Use Disorder (MOUD)



Myth: MOUD just trades one addiction for another.

Truth: MOUD bridges the biological and behavioral components of addiction. Research indicates that a combination of medication and behavioral therapies can successfully treat substance use disorder (SUD) and help sustain recovery. (1)



Myth: MOUD is only for the short term.

Truth: Research shows that residents on MOUD for at least 1-2 years have the greatest rates of long-term success. Reducing or stopping medication should be a resident-driven decision, and some people stay on MOUD for many years. (2)



Myth: My resident's condition is not severe enough to require MOUD.

Truth: Encourage residents to discuss options with their opioid treatment program (OTP)/ office-based opioid treatment (OBOT) providers. Encourage residents to call the MA Helpline where they can find appropriate treatment providers to meet with/explore their options. (3)



Myth: MOUD increases the risk for overdose.

Truth: MOUD helps to prevent overdoses from occurring. Even a single use of opioids after detoxification can result in a life-threatening or fatal overdose. Following detoxification, tolerance to the euphoria brought on by opioid use remains higher than tolerance to respiratory depression. (4)



Myth: Providing MOUD will only disrupt and hinder a resident's recovery process.

Truth: MOUD has been shown to assist residents in recovery by improving quality of life, level of functioning, and the ability to handle stress. Above all, MOUD helps reduce mortality throughout a resident's recovery. Encourage residents to call the MA Consultation Service for Treatment of Addiction and Pain (MCSTAP) for a consult if their provider is unsure. (5)

$$l \leq \frac{1,2}{k}; k = \frac{4}{\sqrt{4EJ}};$$

Myth: There isn't any proof that MOUD is better than abstinence.

Truth: MOUD is evidence-based and the recommended course of treatment for opioid use disorder (OUD). The American Academy of Addiction Psychiatry, American Medical Association, National Institute on Drug Abuse, Substance Abuse and Mental Health Services Administration, National Institute on Alcohol Abuse and Alcoholism, Centers for Disease Control and Prevention, and other agencies emphasize MOUD as first line treatment. (6)

1) <http://www.integration.samhsa.gov/clinical-practice/mat/mat-overview>

2) <https://www.health.harvard.edu/blog/opioid-addiction-long-term-treatment-for-a-chronic-condition-2017050511379>

3) <https://www.pharmacytimes.com/contributor/jeffrey-fudin/2018/01/opioid-agonists-partial-agonists-antagonists-oh-my>

4) "MAT Maintenance Treatment and Superior Outcomes" PowerPoint, Dr. Arthur Williams

5) <https://nuckeyarecoverynetwork.com/medication-assisted-treatment/> 6) <http://www.samhsa.gov/medication-assisted-treatment/training-resources/support-organizations>

6) Adapted from the National Council Infographics.

7) <https://dcmh.mo.gov/media/pdf/challenging-myths-about-medication-assisted-treatment-mat-opioid-use-disorder-oud>

Adapted from The National Council Infographic. (7)