

Methadone for Opioid Use Disorder

Methadone is a medication used to treat opioid use disorder. It is long-acting, which means it is slowly released in the body over a long time.

Methadone is an opioid. It helps lower withdrawal symptoms from opioids (like heroin, hydromorphone, morphine, codeine, and others). It will not help with withdrawal from other substances.

When a person is given the right dose, methadone does not give a feeling of being high.

How do I take this medication?

- Methadone for opioid use disorder comes as a liquid mixed with juice.
- It is usually taken once a day, but sometimes it may be taken 2 times a day.
- Your health care team will work with you to find the right dose to help you manage your withdrawal symptoms and cravings.

How fast does methadone start to work?

- When you start taking methadone, you will feel the effects within 2 hours.
- It can take 5 to 10 days of regular use to see the full effects of a dose. It will take several days for the level of methadone to go up in your blood. Once you are taking the right dose, you will be able to take the dose daily without having opioid withdrawal symptoms.

How will my health care team find the right dose for me?

- The starting dose for methadone varies for each person and is based on many factors, including risk of overdose.
- Your health care team will work closely with you to adjust your dose until your withdrawal symptoms and cravings are not as strong. For each dose adjustment, you will need to be assessed (checked) by a prescriber.
- **Once you are taking the right dose, methadone can:**
 - › lower opioid withdrawal symptoms.
 - › lower cravings.

How long will I need to take methadone?

- How long you need to take methadone is different for each person.
- Once you are stable and have a lower risk of using opioids again, ask your health care team about slowly lowering your dose.

Does methadone interact with any other medications?

- **Methadone can interact with other medications.** Always review other medications with your health care team and pharmacist before taking them, including over-the-counter medications, herbal products, and supplements.

- It can be dangerous to take methadone with other drugs that slow down the central nervous system (like alcohol, benzodiazepines, gabapentin, pregabalin [Lyrica®], or other opioids). The nervous system controls most of your bodily functions (like breathing, cognition (thinking), and heartbeat).

- Do not take any opioids, benzodiazepines (medications for anxiety and insomnia [not being able to sleep]), or drink alcohol when taking methadone. This can cause poisoning, overdose, and even death.
- If you come to the pharmacy and are impaired (under the influence of drugs or alcohol), your methadone dose may not be given to you. This is for your safety.

What else do I need to know about methadone?

- If you miss 3 doses of methadone:
 - › Your tolerance to methadone and opioids can go down. When you miss doses, your body will be less used to taking methadone, and you may feel the effect of the opioid more.
 - › **You are at a higher risk of overdose.** Your dose will need to be changed after you are assessed by your prescriber.
- It is important to take your methadone dose daily as prescribed.

What are the possible side effects?

- Not everyone will experience side effects. They usually happen early in treatment or when you are taking a higher dose. Side effects may include:
 - › Constipation (not being able to poop)
 - › Dry mouth
 - › Weight gain
 - › Sweating a lot
 - › Lower sex drive
 - › Insomnia
 - › Drowsiness (sleepiness)
- All opioids, including methadone, can cause intoxication and overdose. This may happen when the dose is too high.
- Signs of intoxication include:
 - › Sedation (drowsiness or sleepiness)
 - › Dysphoria (feeling uneasy)
 - › Slowed or slurred speech
 - › Pinpoint pupils (pupils are very small in normal light)
 - › Moving slowly
 - › Euphoria (feeling very happy or excited)
- Signs of overdose include:
 - › Slow or shallow breathing
 - › Cardiac arrest (heart stops beating)
 - › Slow heartbeat and low blood pressure
 - › Death
 - › Severe (very bad) sedation (very drowsy or sleepy)

- The risk of an opioid overdose and death is highest during the first 2 weeks of treatment. This is because the tolerance to opioids goes down so much.
- Because of the risk of overdose, you will be given a naloxone kit. Your health care team will show you how to use it.

The information in this pamphlet is for informational and educational purposes only.
The information is not intended to be and does not constitute health care or medical advice.
If you have any questions, please ask your health care provider.