

# Helping people who are dependent on opioids

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**Health**  
Sydney  
Local Health District

Acknowledgement



# Thanks to

- Bradley Freeburn
- Paul Haber
- Many others

# Overview

- Talking to people about their opioid use
- Knowing when is a person dependent on opioids?
- Medications for treating opioid dependence

# Case 1: 'Joanna', aged 52

- Pain following knee damage in motor vehicle accident
- 6 months later:
- Still has pain.
- It bothers her by day and makes sleeping hard
- 'Panadeine forte or Endone, they're the only things that help'

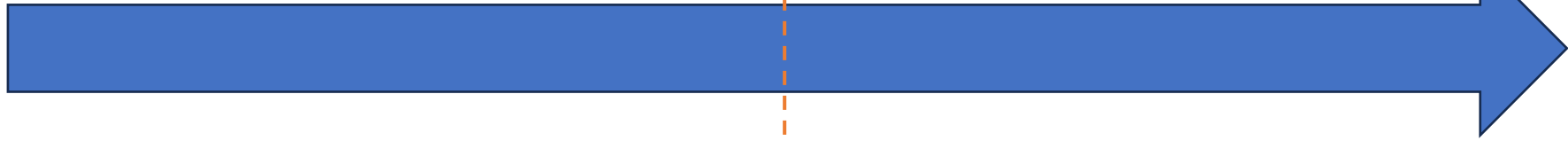
# Joanna's painkillers

- Panadeine forte most days
- About 8 tablets per day
- Max 2 per occasion



# The spectrum of opioid pain killer use

For pain  
only



Purely  
because of  
dependence

# When is someone dependent? (ICD-11)

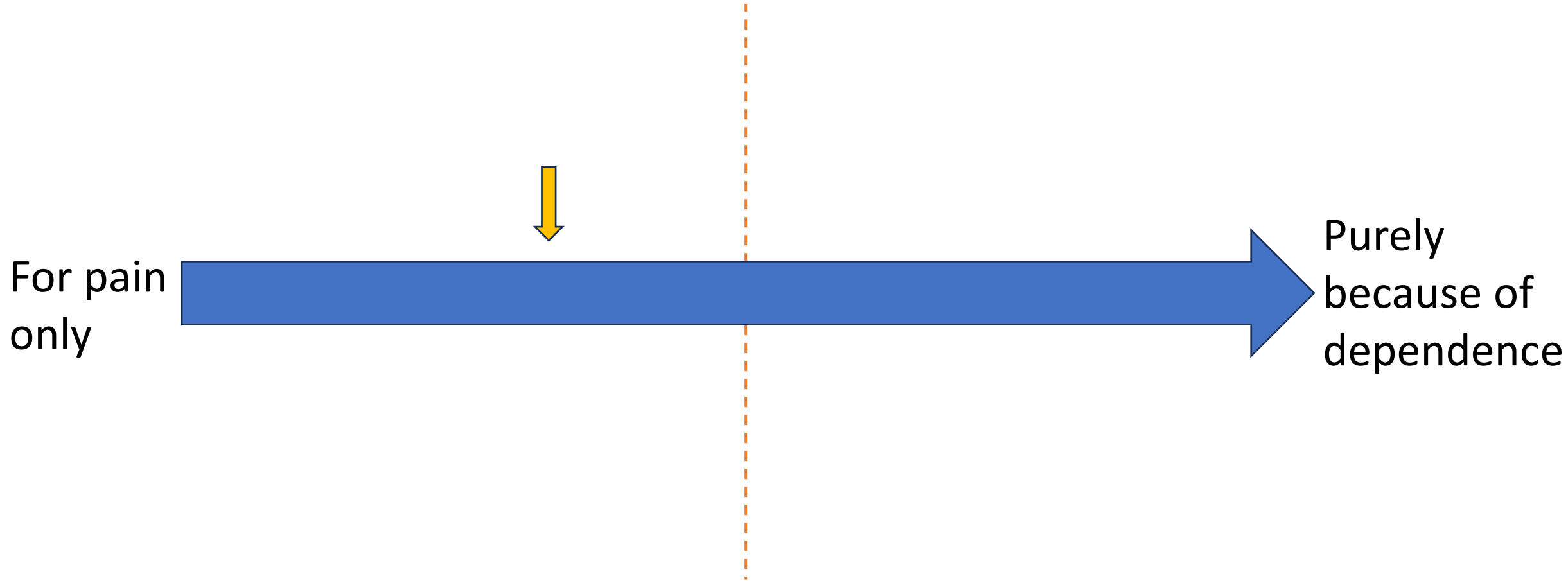
- Loss of control
- Tolerance/withdrawal
- The opioid starts becoming number 1



- If Joanna doesn't get her Panadeine Forte:
  - Pain, can't sleep
  - No runny nose or diarrhoea
  - She's less stressed when she has the Panadeine Forte



Where is Joanna on that spectrum of pain killer use?



Your conversation with Joanna?

# Hunter Integrated Pain Centre, HNE Health

<https://www.youtube.com/embed/EFOa7Z7MHHk>

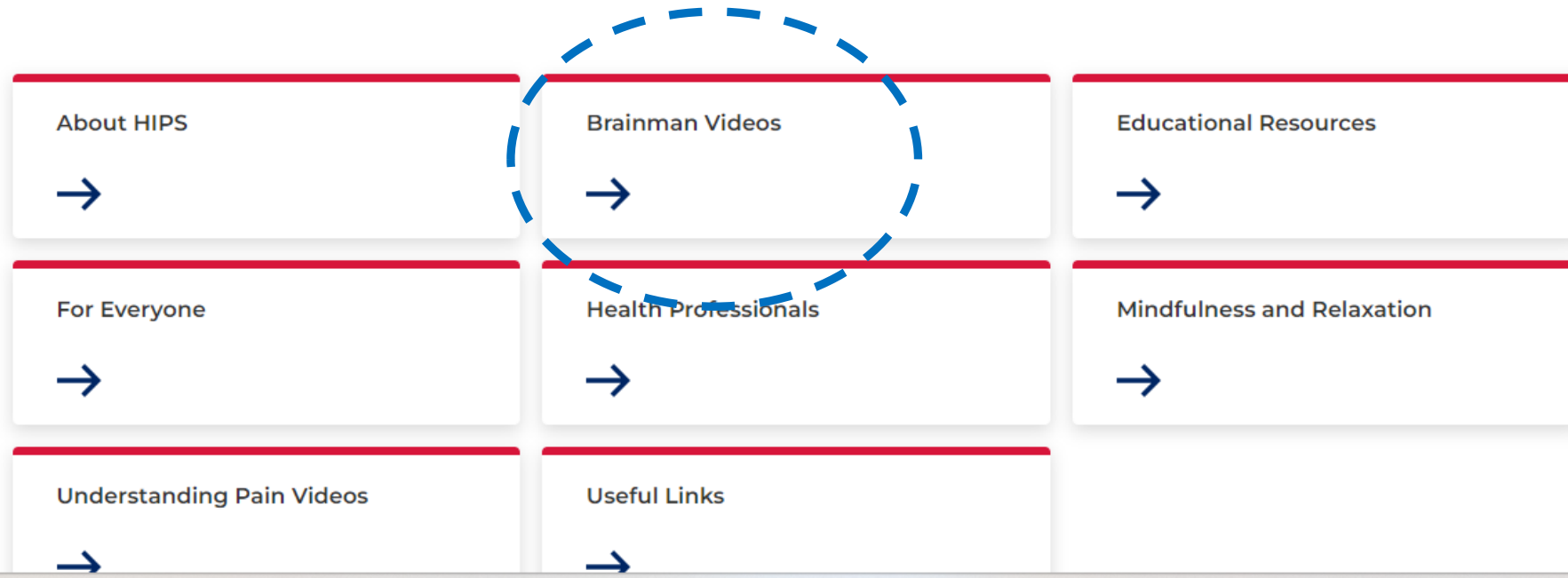
# Hunter Integrated Pain Service

Hunter Integrated Pain Service (HIPS) welcomes you to our website. Here you will find information and resources for people living with pain, their friends and families as well as health professionals.



HIPS acknowledges the impact that pain can have on a person's physical, social and mental wellbeing and ultimately their quality of life. Our team is dedicated to providing an evidence based 'whole person' approach to pain treatment emphasising 'active strategies'. We invite you to explore the website further.

*"A tree draws strength from the elements. Likewise a person is nourished by their environment".*



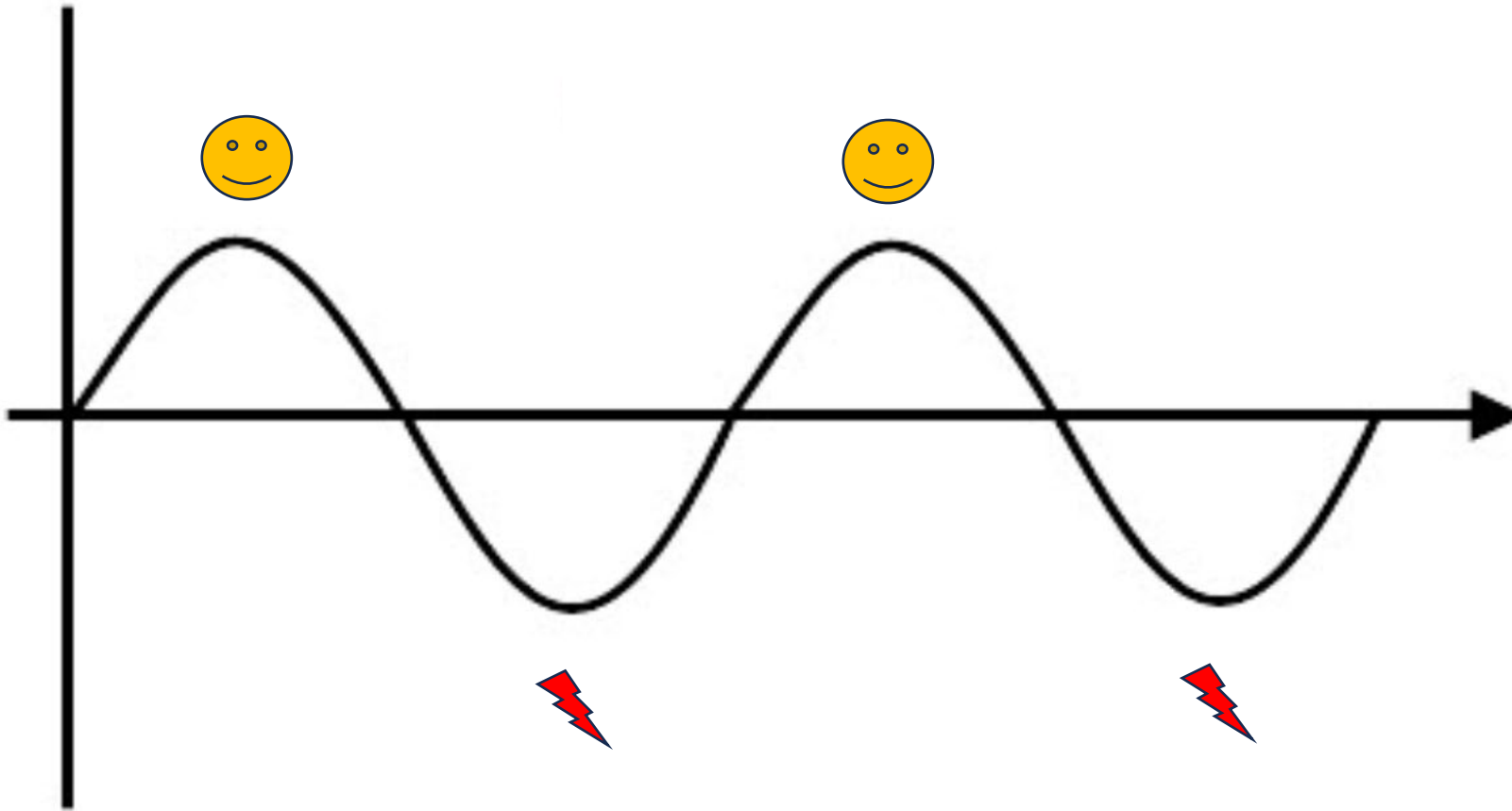


Image adapted from:  
[www.electronicshub.org](http://www.electronicshub.org)

# If not dependent, and opioid is unavoidable

- Slower onset, longer acting is less reinforcing
  - E.g. Norspan (buprenorphine) patch
- Regulated dispensing (e.g. weekly pickup)
- Can gradually step down the dose

# Other elements to pain control

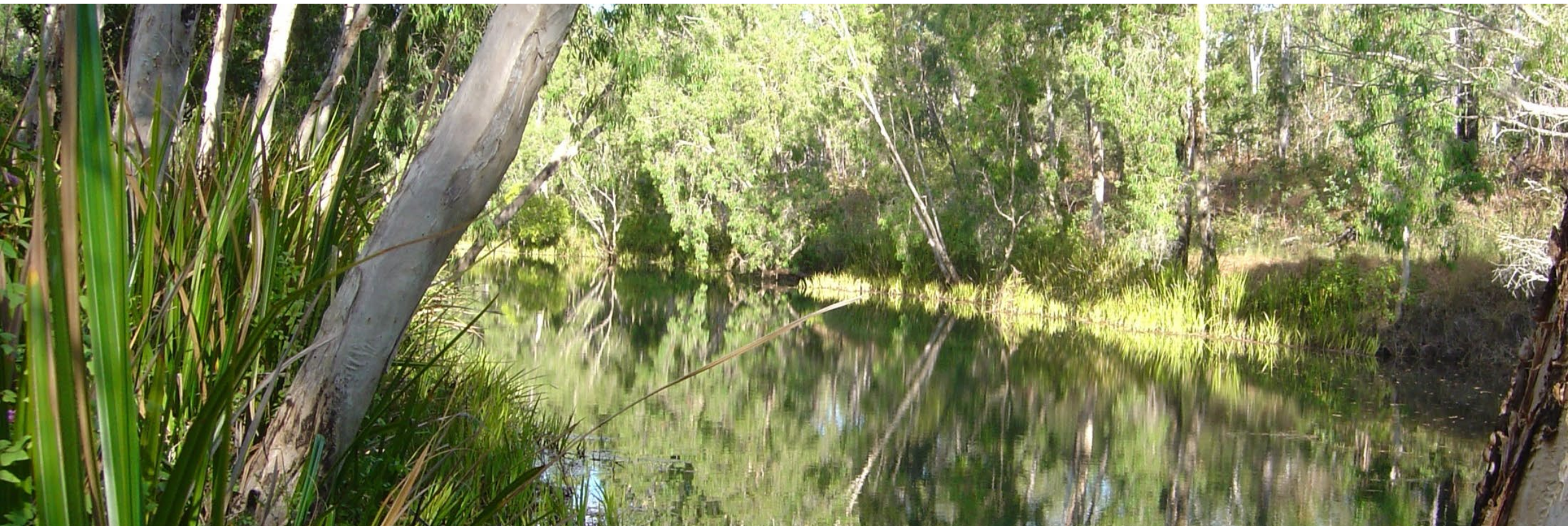
- Identifying what is pain, what is fear/stress about the pain
- Mindfulness approaches
- Increasing pleasurable activities (?Women's group)
- Managing expectations



*“If a person is suspected of being **drug-dependent**, it is **illegal to prescribe** OxyContin, MS Contin or any other **Schedule 8 drug** without prior **written approval** from the **NSW Ministry of Health**.”*

*www.health.nsw.gov.au*

*[www.health.nsw.gov.au/pharmaceutical/doctors/Pages/faq-medical-practitioners.aspx](http://www.health.nsw.gov.au/pharmaceutical/doctors/Pages/faq-medical-practitioners.aspx)*



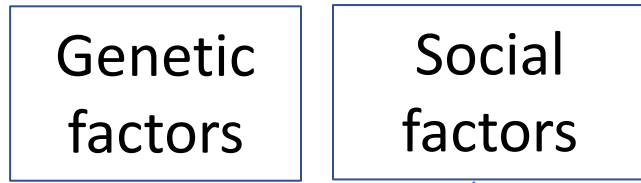
## Case 2: Brett, aged 36

- Smoked heroin from age 15
  - His parents had separated, he had moved to the city
- After a while, needed more heroin to get the effect
- Too expensive, so switched to injecting
- Now uses 3 caps IV every day (about \$150/d)
- (clean needles etc, from needle syringe service)
- Keen to stop: sick of 'chasing money for the hit'

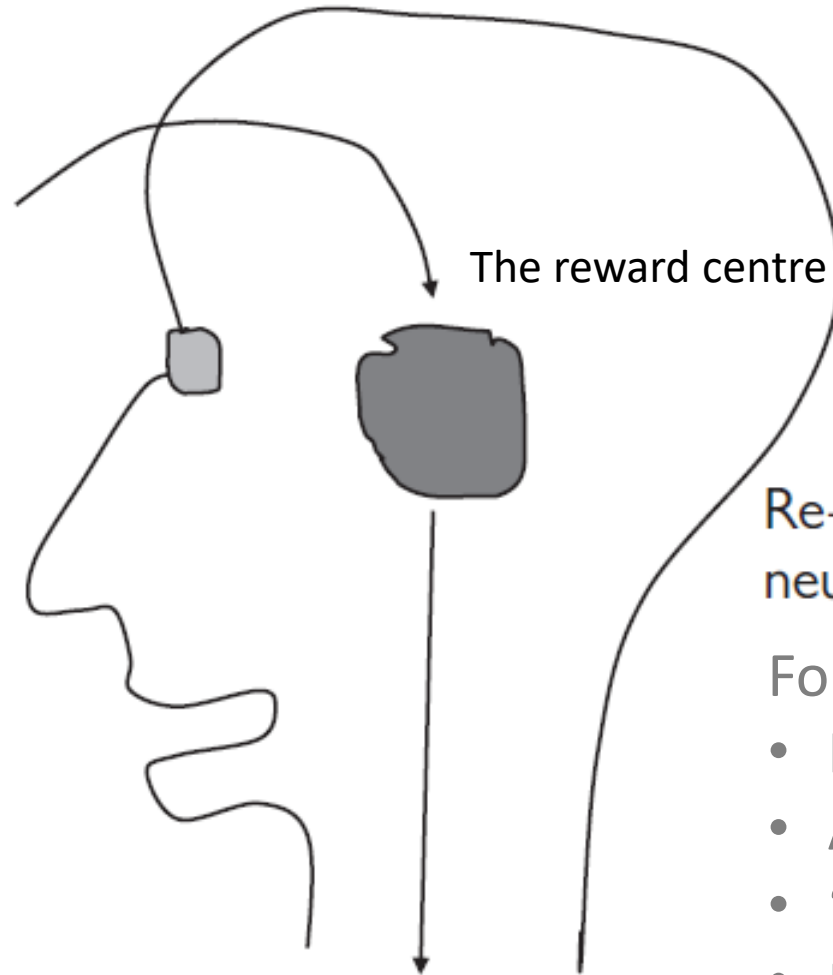
## Brett (cont.)

- Recently moved back to the country to get away from using peers
- Still finds the heroin is available
- Has tried to stop, but gets too sick
- Needs the heroin to have energy to function

# Neurobiology of addiction



Repeated use of substances



The reward centre

The driving force of substance dependence

Re-setting of neurocircuits

For:

- Reward
- Alertness
- 'Salience' (i.e. priorities)
- Behavioural control

# What would Brett's opioid withdrawal be like?

- Runny eyes and nose
- Diarrhoea
- Aching muscles/ 'bones'
- Insomnia
- Craving ++
- (Dilated pupils; goosebumps)

Occasional  
use



Dependent  
use





# What treatment can you offer for Brett?

- Refer to nearest public Drug and Alcohol Unit?
  - Long wait lists at some regional/rural centres
- Detox/rehab? – not all will accept people with opioid dependence
- Treatment onsite?

# Medications for opioid dependence

Opioid agonists (e.g. buprenorphine, methadone) are the most effective treatment for opioid dependence

Reduce overdose

Improve health, quality of life

## Buprenorphine under the tongue:

- Strips (=Suboxone; includes naloxone)
- Tablets (Subutex)



Source: [www.abc.net.au/news/2021-06-15](http://www.abc.net.au/news/2021-06-15)

## Methadone – liquid (oral)



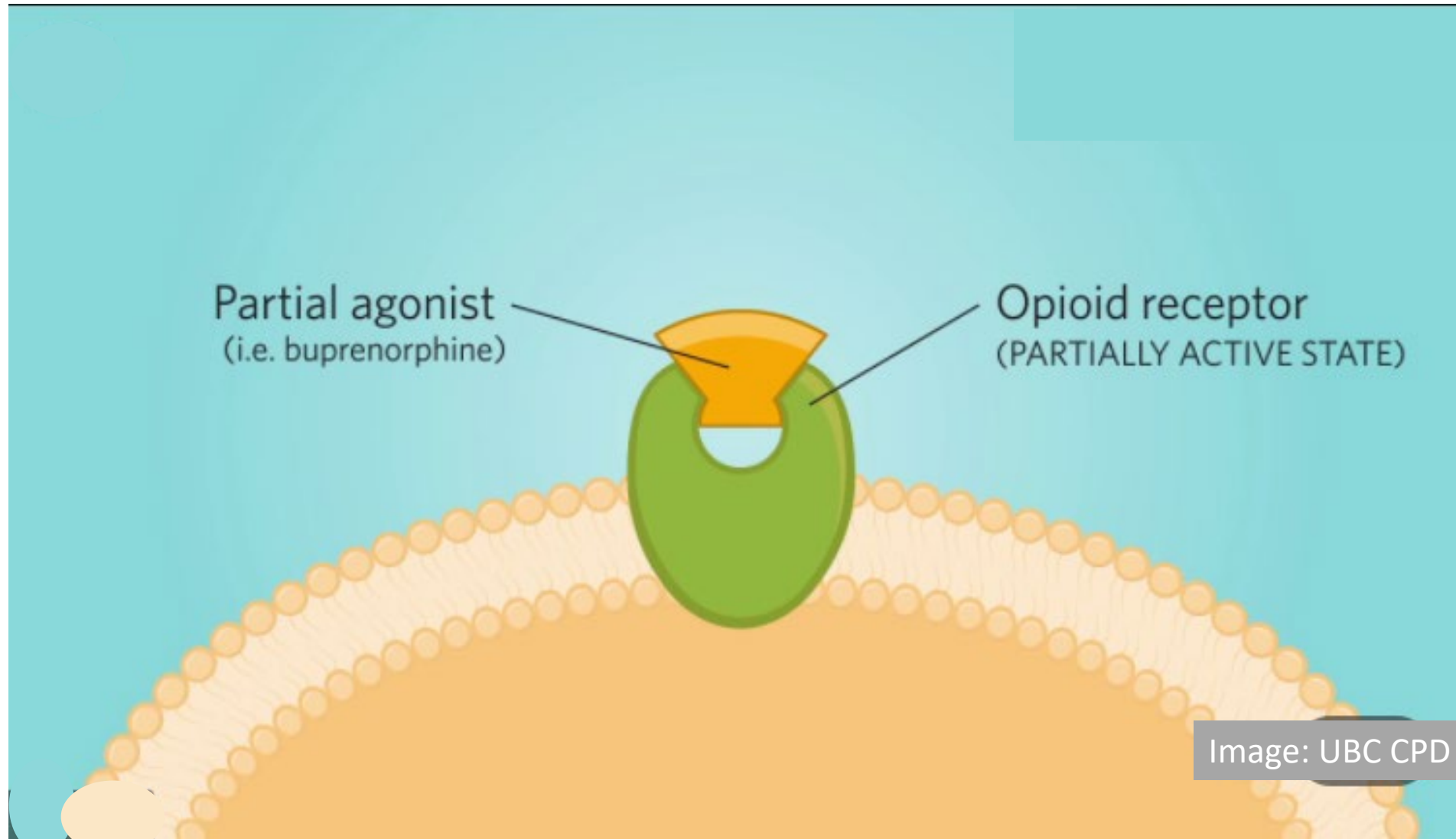
Source: ADF

# Extended release ('depot') buprenorphine

- Weekly (Buvidal); or
- Monthly (Buvidal or Sublocade)



# Buprenorphine: a partial opioid agonist



# Any GP can now prescribe buprenorphine

- No specific accreditation needed [www.health.nsw.gov.au/aod](http://www.health.nsw.gov.au/aod)
- Up to 20 patients per GP
- For each patient:
  - Application to NSW Health (PRU) for each new person
  - S100 script (streamline code)
  - Pharmacy delivers medication to the service (or provides dosing)

# Seek specialist advice if

- Starting buprenorphine after a longer acting opioid (e.g. methadone, oxycontin)



Providing opioid dependence treatment at an ACCHS

# Aboriginal Medical Service, Redfern



# Dosing Suboxone (staffmember acting as client)



# Some of the staff in 2018



# Other models in NSW ACCHSs

- GPs dosing and prescribing 'depot' bupe (only)
- GPs prescribing only - dosing elsewhere
- Visiting prescribers
  - Addiction Specialist or Nurse Practitioner
  - Videolink or phone review in between

# 24/7 support available:

- For clinicians (only)
  - DASAS: Drug and Alcohol Specialist Advisory Service, NSW
  - (02) 9361 8006 or 1800 023 687
  
- For patients or families
  - ADIS (Alcohol and Drug Information Service)
  - 1800 250 015



# Other resources

- NSW Health : [www.health.nsw.gov.au/aod](http://www.health.nsw.gov.au/aod)  
(Opioid treatment program):

**NSW Clinical Guidelines:  
Treatment of Opioid  
Dependence 2018**

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**Depot Buprenorphine**

# Opioid Treatment Education for Health Professionals in NSW

Funded by the NSW Ministry of Health, we offer a range of free courses for all health professionals in New South Wales to improve knowledge, skills and practices around providing opioid treatment.

Medical and nurse practitioners can also complete the *Opioid Treatment Accreditation Course (OTAC)*, which forms part of the process to apply to receive accreditation as an opioid pharmacotherapy prescriber.

To get started, create an account using the login and registration button.

ACCOUNT LOGIN & REGISTRATION

VIEW AVAILABLE COURSES



# Summary

- Opioid dependence treatment can transform and save lives
- Treatment can now be provided through any GP  
(authorisation per patient via NSW Health)
- Clinical support and advice is available 24/7