

RIGHTS, RESPONSIBILITIES & OTHER AGREEMENTS

Most clinics have documents that you will have to sign before starting treatment. These may involve privacy and who has access to your files, rights and responsibilities and a treatment agreement.

All opioid substitution clinics have a document outlining your rights and responsibilities which they will ask you to sign. And, while it may not be easy to concentrate while you are waiting for your first dose, try to read the Treatment Agreement carefully so you know what is expected of you and how you can expect to be treated.

To obtain a copy of a general treatment agreement visit www.health.nsw.gov.au

Look in the OTP Clinical Guidelines.

TAKEAWAYS

Takeaways are doses of 'done or bupe' that you can take with you to have at home or when you're travelling.

To be allowed takeaway doses your doctor / clinic consider a range of indicators, including:

- Your physical and mental health
- How regularly you collect methadone or buprenorphine
- How regularly you come to your clinic appointments
- If you have recently used heroin or other drugs
- If you can safely store your medication at your home.

USING WHEN ON PHARMACOTHERAPY

If you are going to use illicit drugs when on treatments you should consider that there is:

- A higher risk of overdose in the first week
- A higher risk of overdose when using illicit drugs combined with benzos (like valium/xanax) or alcohol
- Random urine testing which could affect your takeaways

These are some of the reasons why if you can, it is important to try and be as honest as possible with your prescribing doctor.

Takeaways are not easy to get at public clinics and takeaways at chemists and private clinics cost about \$7-10 per day.

PREGNANCY

If you are pregnant or become pregnant whilst using the most important thing is looking after yourself and your baby. Evidence shows that going on pharmacotherapy is the best option when you are pregnant.

For further information, or to be linked with a specialist service, call ADIS.

TRAVEL

You have the right to travel interstate or overseas, just like everyone else, but there are some things that you can do to protect your doses and avoid hassles from security:

- You need to provide your doctor with copies of your tickets and itinerary.
- Keep your doses in their original wrappers with name labels.
- Obtain and keep hold of a doctor's authorising letter.
- If travelling internationally be familiar with local laws.
- If travelling with liquid methadone carry it on board with you and keep it tightly sealed. Hold temperatures and pressure have been known to cause leakages and baggage can get lost.

Consider Physeptone. These are methadone tablets and a great option for travelling. You'll need to ask your prescriber for details.

SAFER INJECTING

Remember methadone syrup, biondo, Subutex and Suboxone are not meant to be injected. However if you choose to inject always use sterile equipment.

Check your local pharmacy to buy larger barrels and butterflies.

Further reading and information visit www.abvl.org.au for more information on safer injecting.



CHANGING TREATMENT OPTIONS

It is easy to change treatments, but changing from methadone to bupe needs to be done with care as this can lead to precipitated withdrawal.

Some people prefer to come down to 30mg of methadone or less before swapping to bupe.



KNOWLEDGE AND MYTHS

If you have problems adjusting to pharmacotherapy it might help to chat to people who have been on the OTP; they will have a lot of knowledge and helpful tips for adjusting to treatment.

A few commonly asked questions are answered below:

Q. What are some of the side effects of being on the OTP?

A. Everyone is different but some people experience: sleep problems (insomnia); feeling drowsy; sweating; dry mouth/nausea/vomiting/loss of appetite; constipation, mood swings; and headaches. These usually settle down when you start treatment and they should stop after a few weeks.

Q. Will my teeth decay?

A. Methadone and Subutex/Suboxone won't cause tooth decay but can lead to dry mouth syndrome, which can contribute to teeth decay. To help with this you could chew sugar free gum and regularly drink water, brush your teeth twice a day and floss just like your dentist told you last time you visited them.

Q. Will I lose my sex drive?

A. It depends; being on treatment can contribute to a lower sex drive but so can many other factors like aging. We are all getting older. Make time to spend with your partner, set up date nights, send the kids to the grandparents for the weekend and before you know it you will be wondering why you even asked this question.

Q. Will my period become irregular?

A. Many women have irregular periods when using heroin or other opioids. For most, the menstrual cycle will return to normal when on the OTP. Some women will continue to have irregular periods. But remember if your periods are irregular it doesn't mean you aren't fertile so it is important to use contraception and condoms also protect you from STIs.

Opioid Treatment Line (formerly MACS)

is a telephone line providing opiate pharmacotherapy information including methadone and buprenorphine, referrals, advice and a forum for pharmacotherapy concerns.

Ph: 1800 642 428

SETTING GOALS

- Talk to other people who have undergone treatment before or who are still on treatment.
- Be prepared - a great place to start is visiting www.mytreatment.com.au or contact NUAA ph: 8354 7300 or www.nuaa.org.au
- Be realistic - small steps are more realistic and achievable.
- Write your goals down - so you can refer back to them keep a journal or diary.
- Start with small issues - moving forward will be easier to tackle larger issues.
- Be patient - nothing will happen overnight but you will start to notice and feel the changes.
- Be informed - never be afraid to ask questions, it's your health.

nuaa
NEW USERS & AIDS ASSOCIATION

This card has been produced by NUAA (New Users & AIDS Association) with others who have used the NSW Opioid Treatment Program. We hope it can help you to make an informed decision. NUAA is a peer-based member organisation which means many of the team have a history of illicit drug use and drug treatment. We advocate for the rights, health and dignity of people with a history of illicit drug use.

If you're not a member you can visit www.nuaa.org.au

WHAT ARE MY OPTIONS?

PHARMACOTHERAPY is a treatment for people wanting to reduce or moderate their opioid use.

There are several treatment options so it's important to decide which one is best for you. There is no right or wrong choice; what works for one person might not work for another.

Different treatments will work at different times in your life and most people end up trying several types of treatment.

Common approaches:

SHORT-TERM DETOX - medication is taken for 5-10 days to help with the most severe withdrawal symptoms.

LONGER TERM MAINTENANCE - medication is taken for a longer period to prevent withdrawal and to support you manage your drug use.

For more info visit www.mytreatmentmychoice.com.au

HOW CAN I GET PHARMACOTHERAPY?

OTP = OPIOID TREATMENT PROGRAM

It is important to find a clinic or doctor that you feel comfortable with. This isn't always easy, but talking to a doctor who you can trust will help you get the most out of your treatment.

The clinic/doctor should assess what you want to achieve, develop a care plan with you, and give you a prescription for your treatment.

To get a prescription an application will be made to the NSW Ministry of Health for you to receive a script for a regulated medication. This can take several hours and up to a day for approval. Hanging out for government departments is no fun so if you can, be prepared for the wait!

Paperwork will also need to be completed so ask beforehand what you will need to take to your first appointment.

You will need a Medicare Card and photo ID



There are three options for accessing pharmacotherapy in NSW: public clinics, private clinics and through a GP/doctor and chemist. The table below shows how they differ:

	WAITING LIST	DOCTOR'S FEE	DISPENSING FEE	TAKEAWAYS	URINE TEST	FLEXIBLE HOURS
PUBLIC CLINICS	USUALLY	NO	NO	NO	YES	NO
PRIVATE CLINICS	NOT USUALLY	WITH MEDICINE ABOUT \$20	APPROX \$1 PER DAY PLUS \$25 SIGN UP FEE	YES	YES	YES
GP/DOCTOR	POSSIBLY	YES UNLESS BULK BILLED COSTS ABOUT \$30	YES	YES	LESS OFTEN	YES
CHEMIST	YES	N/A	CAN COST \$50 - \$50 PER WEEK	YES	N/A	YES

The Alcohol and Drug Information Service, ph 1800 422 599, can help you locate a prescribing doctor or clinic.

ADiS
Alcohol and Drug Information Service

ADiS provides confidential information, advice and referrals, 24 hours a day.

You can also call the OPIOID TREATMENT LINE for free on 1800 642 428 www.findapharmacy.com.au

"BUPE WAS EASIER TO WITHDRAW FROM THAN OTHER OPIATES ... AND I DIDN'T FEEL AS HAZY AS I DID ON 'DONE'."

Kylie - Public Clinic

METHADONE OR BIODONE (KNOWN AS 'DONE')

Methadone and Biodone are brand names for methadone hydrochloride. They are both liquid and in NSW are 5mg/ml. Methadone is a yellow coloured syrup and Biodone is reddish liquid. Methadone has a much thicker consistency than biodone as it has additives including sugar.

"GOING ON METHADONE HELPED ME GET MY LIFE BACK IN ORDER. STRESSES ABOUT MONEY, WORK AND BILLS BECAME MANAGEABLE. I FELT LIKE A BLACK CLOUD HAD BEEN LIFTED OFF ME"

John - GP/Pharmacy

BUPRENORPHINE (BUPE)

Buprenorphine (pronounced bew-pre-NOR-teen) comes in two forms:

- Subutex is the brand name for buprenorphine tablets which come in different strengths (0.4mg, 2mg and 8mg).
- Suboxone is available as a tablet or gel film. It contains two drugs: buprenorphine and naloxone.

BUPE OR DONE?

Both are good options for staying on top of things.

If you are still using opioids illicitly and need pharmacotherapy as a back-up option then methadone is likely the best for you. If you want to come down and withdraw then maybe buprenorphine (Suboxone or Subutex) is your best option.

While you can't always tell your doctor everything do try to talk to them about your needs and options. And don't forget to talk to help too! Methadone needs to be taken every day; buprenorphine is longer acting and a safer drug, often people take a double dose every two days.

Once you choose methadone, Suboxone or Subutex you will need to visit the clinic or chemist to collect your dose, every day for at least three months. If you are seeing a GP/doctor or at a private clinic and are stable you will be able to get takeaways or double dose.



TAKING THE MEDICATION

Methadone is taken by drinking your dose, but there are two ways to take bupe. Both may feel a little strange to begin with, but will soon feel easy and they are very effective.

You will either take:

- Subutex/Suboxone tablets are placed under the tongue (sublingually) until it dissolves. This can take 2-8 minutes. Tiny capillaries under the tongue quickly absorb drugs into the bloodstream. This is known as sublingual dosing.
- Suboxone gel film is placed on the inside of your cheek (on the buccal mucosal) and is dissolved in about 2-8 minutes.

You might have to be supervised for the first few minutes to prevent you from diverting your dose.



TIPS FOR FASTER DISSOLVING

- Try not to smoke anything before your dose as it can dry out your mouth and take longer for the tablet or gel to dissolve.
- Avoid drinks that dry out your mouth, such as coke and coffee - drink water instead.
- Make sure there is a bit of time between cleaning your teeth and dosing as tooth paste and alcohol-based mouthwashes can dry out the mouth.
- Chewing gum can help to lubricate the mouth - Bupe tablets and gels like clean and moist mouths.

BUPE AND PRECIPITATED WITHDRAWAL (PW)

To avoid PW wait at least six hours after using or until you have started to feel some symptoms of withdrawal, then take your dose.

If PW is going to happen it usually starts 1 to 2 hours after the first dose of bupe, and peaks about 4-6 hours after the dose.

Whilst the symptoms are usually not as severe as 'cold turkey' withdrawal, you may experience sweating, aches and pains, nausea, cravings and anxiety.

If you go into precipitated withdrawal, there is not much you can do other than wait until it subsides, which it eventually will.

Using on top doesn't usually make any difference to the 'hanging out' feeling of PW.

