

Common Medication-Assisted Treatment Myths: A Guide for Patients

Myth	Evidence
<p>1. Medication-assisted treatment (MAT) is more dangerous than other chronic disease treatments.¹</p>	<ul style="list-style-type: none"> • MAT is less complicated than many other treatments, such as medicines for diabetes or high blood pressure.¹ • When taken as prescribed and monitored appropriately, MAT is safe and effective.^{2,3}
<p>2. MAT replaces one addiction with another.^{1,2}</p>	<ul style="list-style-type: none"> • Addiction can be defined by repeated use of a drug despite negative effects on health and relationships. Taking a medication prescribed by a doctor to treat a chronic illness does not meet this definition.^{1,2} • Drug addiction involves a cycle of drug use leading to a high, a crash, and cravings to use again. MAT helps to break this cycle by preventing the high and reducing cravings.²
<p>3. Detoxification for opioid use disorder is effective.¹</p>	<ul style="list-style-type: none"> • Medically assisted detoxification programs can be a helpful first step in the treatment process; detoxification alone is not treatment. Patients who do not receive treatment after detoxification are likely to start using drugs again.^{2,3} • Detoxification can lower tolerance to opioids. People who complete detoxification without treatment are at higher risk of overdose death due to lowered tolerance.^{1,4}
<p>4. Reducing opioid prescribing alone will reduce overdose deaths.¹</p>	<ul style="list-style-type: none"> • Reducing overdose deaths requires multiple strategies. Reducing prescribing can help to prevent some overdose deaths, but treatment options are still needed for those with opioid use disorder. Overdose death rates continued to increase even when opioid prescribing decreased nationally.¹ • Patients with opioid use disorder may turn to street drugs, where the risk of overdose is higher. The increasing availability of strong opioids like fentanyl in the community increases the chances of overdose death.^{1,5}
<p>5. MAT is not effective because it does not immediately end drug addiction.³</p>	<ul style="list-style-type: none"> • MAT medications are not meant to “cure” opioid use disorder or addiction. Addiction is a chronic (long-lasting) disease that can affect people for their entire lifetime.^{2,3} • Medications such as methadone, buprenorphine, and naltrexone are meant to manage the physical symptoms of addiction. This helps patients to focus on recovery, which may include going to counseling, therapy, and self-help groups.^{2,3}

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6. MAT is morally wrong. It is inferior to complete, unassisted abstinence. ⁶	<ul style="list-style-type: none"> Scientific research suggests that addiction is a medical condition caused by factors including exposure to a drug, genetics, and the environment. These factors cause physical changes in the brain.^{3,6} Addiction can be treated and with medication and counseling, much like other medical conditions.^{3,6}
7. MAT is only for the short term. ²	<ul style="list-style-type: none"> There is no one-size-fits-all approach to treatment length. Addiction may be viewed as a chronic disease requiring ongoing care and treatment. Success depends on patients remaining engaged in treatment long enough to maintain recovery.^{2,3} Patients should continue MAT as long as they continue to benefit from treatment. In general, when patients stay in treatment longer they have better outcomes.³ Research does not support abstinence as an effective treatment for opioid use disorder.^{3,7}
8. MAT increases the risk for overdose in patients. ²	<ul style="list-style-type: none"> People who use opioids after detoxification have a higher chance of overdose death due to lowered tolerance. Starting MAT after detoxification can help reduce or remove cravings to use opioids, which can help to prevent overdose.^{3,4} If people use opioids while taking naltrexone, they will be unable to get high. If they take more opioids to try to get high, they are at risk of opioid overdose and death.³ Research has shown that methadone and buprenorphine treatment decrease the risk of overdose death for patients.^{3,8}

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