

Do You Know...

Street names: juice, meth (also used to refer to methamphetamines)

What is it?

Methadone belongs to the opioid family of drugs. It is used most commonly to treat addiction to other opioid drugs such as heroin, oxycodone (e.g., Percodan, Percocet), fentanyl (e.g., Duragesic, Sublimaze) and hydromorphone (e.g., Dilaudid).

Methadone is a synthetic opioid, which means that it is made from chemicals in a lab. Methadone was developed in Germany during the Second World War and was first used to provide pain relief.

Methadone maintenance treatment, which prevents opioid withdrawal and reduces or eliminates drug cravings, was first developed in the 1960s. For many years, Canadian regulations around the prescription of methadone were so restrictive that few doctors offered the treatment. People who wanted methadone treatment often had to wait months or years.

Methadone

In the 1990s, the need to reduce the harm of drug use was more clearly recognized, and changes were made to make it easier for doctors to provide methadone treatment.

Methadone maintenance is not a “cure”: it is a treatment. Through treatment, people who are addicted to opioids receive the medical and social support they need to stabilize and improve their lives. They are encouraged to stay in treatment for as long as it helps them.

Another treatment for opioid addiction, buprenorphine/naloxone (Subutex, Suboxone), was approved for use in Canada in 2008.

What does methadone look like?

Pure methadone is a white crystalline powder. For the treatment of addiction, the powder is dissolved, usually in a fruit-flavoured drink, and is taken orally once a day. Methadone is also available as a tablet or oral solution for the treatment of severe pain.

Who uses methadone?

Most people who are prescribed methadone are being treated for addiction to opioid drugs. This includes people who are addicted to illegal opioids, such as heroin, and also prescription opioids, such as oxycodone, fentanyl and hydromorphone.

Methadone is also sometimes prescribed to provide pain relief for people who have severe chronic pain or pain associated with terminal illness.

Methadone is sometimes used as a street drug, but when it is, it is usually to prevent symptoms of withdrawal from other opioid drugs.

Women who use opioid drugs regularly and who are pregnant are often treated with methadone to protect the fetus. Short-acting opioids such as heroin or hydromorphone must be taken frequently to avoid withdrawal. Opioid withdrawal increases the risk of miscarriage or premature birth. Methadone maintenance, combined

with medical care, improves the chances of having a healthy baby. There are no known long-term effects of methadone on the baby.

People who inject opioid drugs regularly, and who are HIV- or hepatitis C–positive, are enrolled in methadone treatment to help protect their health. Methadone treatment also helps to prevent these infections from spreading to others through needle sharing.

The number of people receiving methadone maintenance treatment in Ontario has increased sharply in recent years, from 6,000 in 2000 to 38,000 in 2012.

How does methadone make you feel?

When people begin methadone treatment, some may experience sedation and other effects that are common to all opioid drugs. As treatment continues and a stable dose of methadone is established, tolerance to most of these effects develops. Those in treatment often describe the feeling of being on methadone as “normal.” Methadone treatment does not interfere with their thinking. They can work, go to school or care for family. Methadone also blocks the euphoric effect of heroin and other opioids, and in this way reduces the use of these drugs.

Most people experience some side-effects from methadone treatment. Possible side-effects include sweating, constipation and weight gain.

How long does the effect last?

A person who is physically dependent on opioids is kept free of withdrawal symptoms for 24 hours with a single dose of methadone. In contrast, a person who uses heroin or other short-acting opioids to avoid withdrawal must use three to four times a day.

Daily treatment with methadone may continue indefinitely. If, however, the person taking methadone and his or her doctor agree to move toward ending treatment, the methadone dose is tapered down gradually over many weeks or months, easing the process of withdrawal.

If methadone is stopped abruptly, symptoms such as stomach cramps, diarrhea and muscle and bone ache will occur. These symptoms begin within one to three days after the last dose, peak at three to five days and then gradually subside, although other symptoms such as sleep problems and drug cravings may continue for months.

Is methadone dangerous?

When methadone is taken as prescribed, it is very safe and will not cause any damage to internal organs or thinking, even when taken daily for many years. On the other hand, methadone is a powerful drug and can be extremely dangerous to people who are not tolerant to its effects. Even a small amount may be fatal for a child. For this reason, the dispensing of methadone is carefully monitored and controlled.

Is methadone addictive?

Modern definitions of addiction look at many factors in assessing a person's drug use. These include tolerance, or the need to use increasing amounts to achieve the same effect; physical dependence, resulting in withdrawal symptoms if drug use is stopped; and compulsive use, despite the negative consequences of continuing to use the drug.

Some people say that methadone is just as addictive as heroin. People in methadone treatment do become tolerant to certain effects of the drug, and will experience withdrawal if they do not take their regular dose. But methadone fails to meet a full definition of addictive when we look at how and why the drug is used.

First of all, methadone maintenance is offered as a medical treatment, and is prescribed only to people who are already addicted to opioid drugs. For these people, methadone provides a safe alternative to the routine danger and desperation of securing a steady supply of opioid drugs illegally. It frees them from the nagging compulsion to use, and allows them a chance to focus on improving their lives.

What are the long-term effects of methadone?

Methadone maintenance is a long-term treatment. Length of treatment varies, from a year or two to 20 years or more. This prolonged treatment with proper doses of methadone is medically safe and is one of the most effective treatments currently available for opioid addiction.

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