
By The Repository Editorial Board

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Editorial: Vivitrol, Probuphine offer opioid addicts new hope

The heroin and opioid epidemic marks a massive change in the way we think about treating addiction.

Treatment for alcoholism and addiction to other drugs, for example, has generally consisted of counseling, such as 12-step programs, therapy and a user's commitment to abstinence. Rarely, though, do we consider the critical role that medication can play in recovery — and for good reason. First, the use of medication hasn't always been at the forefront of treatment programs. And second, the level of success of some medications has been debatable.

Consider the drugs methadone, which has been used for decades to treat heroin addiction, and Suboxone. Both are tools to counter the scourge, but they come with steep drawbacks: Both are opioids themselves and they work by producing a high to control cravings to heroin and opioid painkillers. They, too, can become addictive. In other words, the solution to one addiction can be the basis for another.

But there's new hope that medication can play an important role in a successful, comprehensive treatment program.

Enter Vivitrol, a new version of an old drug.

Vivitrol is the injectable extended-release form of Naltrexone. Naltrexone has a long history; it was first approved by the FDA in 1984 in pill form to treat heroin addiction, but it never caught on. Other forms of Naltrexone have been more commonly used to treat alcoholism.

When Vivitrol first came on the market in 2006, it, too, was approved for the treatment of alcohol addiction. Four years later, in 2010, the FDA approved Vivitrol for treating opioid addiction.

Vivitrol has major advantages over methadone and Suboxone. It works by dulling the brain's receptors to ward off cravings. As The Washington Post noted in a 2015 report, unlike methadone, Vivitrol is not a controlled substance and no black market exists for it.

Most important is how it is now administered. Only one dose a month is needed. Prior to becoming injectable, Vivitrol was only available as an oral drug taken in pill form, which meant addicts needed to begin a new journey toward recovery each day.

CommQuest Services and Stark Mental Health & Addiction Recovery have made Vivitrol available to addicts incarcerated at the Stark Regional Community Correction Center and the Stark County Jail, as the Rep's Shane Hoover reported last week. The program targets a population of users especially vulnerable to relapse and overdose. The program is good example of the comprehensive approach to treating the heroin and opioid epidemic.

Vivitrol is not a miracle drug. In fact, its ability to dull the sensation of opioids can make for a deadly game of chance if an addict uses heroin on top of it. It can have serious side effects, too.

That's why stringent programs, such as the one CommQuest Services requires, are necessary. The program requires counseling, 12-step meetings and random drug testing over a minimum of six months. Vivitrol patients are screened for potential health risks at the outset of the treatment, as Hoover reported. It's a program that treats the body and treats the mind.

Vivitrol wasn't the first medication to treat opioid addiction and it won't be the last. Probuphine implants, which are placed under the skin and contain the drug buprenorphine, were given to the first 10 patients just this month. These medications, when part of a comprehensive treatment program, could prevent a countless number of overdose deaths and give addicts a new chance at a start fresh. For addicts and those who've been on the front line of this fight, that's encouraging news.

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