

Information for Medical Practitioners Acting as Locum for a prescriber of Medication Assisted Treatment for Opioid Dependence (MATOD)

This circular assists the prescriber who acts as locum for a community prescriber involved in providing Medication Assisted Treatment for Opioid Dependence (MATOD). Medications used for MATOD include methadone, buprenorphine [Subutex®], buprenorphine-naloxone [Suboxone®] and buprenorphine depot preparations [Sublocade® and Buvidal®]

Legal Responsibility

The prescribing or supply of a drug of dependence, such as methadone or buprenorphine, to a patient for the purposes of treating or maintaining drug dependence must be in accordance with an Authority issued by the Minister responsible for the *Controlled Substances Act*, in South Australia. (Section 18A, *Controlled Substances Act* 1984)

Authorities issued for MATOD treatment with Methadone and buprenorphine (Subutex®) are restricted to prescribers who have been accredited after completing training and assessment. This restriction applies due to the special hazards that exist with regards to methadone commencement and potentially lethal toxicity, and for buprenorphine (Subutex®) due to an increased risk of diversion.

<u>Authorities issued for buprenorphine DEPOT preparations</u> [Sublocade® and Buvidal®] are restricted to accredited prescribers who have undertaken additional training.

Non-accredited prescribers can be granted Authorities for up to 10 patients at any one time for <u>Buprenorphine-naloxone</u> (Suboxone®). This preparation is less prone to diversion.

The Minister issues an Authority to the prescriber prior to treating a particular patient. Each Authority has a unique number and is granted subject to certain conditions and these conditions are legally binding. (Section 55, *Controlled Substances Act 1984*). The Authority also covers locum medical practitioners acting for the authorised prescriber within the designated practice and the locum may prescribe or supply only in accordance with that Authority and any amendments.

Clinical Responsibility

Patients in these programs are dependent on opioid drugs. Any sudden reduction or interruption to patients receiving daily dosing may result in physical opioid withdrawal symptoms and a strong craving for an opioid to relieve these symptoms. Although these withdrawal symptoms are not normally life threatening, they can be very distressing and may result in a resumption of drug seeking behaviour and illicit drug use. These actions are potentially hazardous and interfere with the treatment program.

It is imperative that locum practitioners act to permit the treatment program to continue in a safe manner when the regular MATOD prescriber is not available.

If you are acting as a locum for a MATOD prescriber and a patient presents who receives buprenorphine DEPOT preparations contact DACAS (08 7087 1742) for clinical advice. **Locums are not permitted to prescribe or administer buprenorphine depot preparations [Sublocade® and Buvidal®] unless specifically authorised.** The use of these formulations removes the requirement for daily dosing.

A locum prescriber may:

Continue to prescribe methadone or buprenorphine for patients where the Authority is held by the principal provided:

- 1) Before issuing a new prescription, the patient is assessed for treatment progress including intoxication, unsanctioned drug use (usually by patient self-reporting or prescriber assessment) and the patient's psychosocial situation.
- 2) All conditions of the Authority are complied with,
- The daily dose is not increased or decreased more than:5mg/day of methadone every two weeks,2 mg/day of buprenorphine every two weeks.

Note

- 1) The dispensing pharmacist is required to refer patients back to their prescriber for review if the patient has missed three consecutive doses, (and thus requires prescriber review)
- 2) If the patient/client has missed five consecutive days, they need to be reassessed for readmission to the program.
 In these circumstances, the <u>locum must contact the Drug and Alcohol Clinical Advisory Service</u> (08 7087 1742) for advice as admission by a non- accredited prescriber is not permitted. See below for contact details.

A locum prescriber may not:

- 1. Prescribe or administer buprenorphine DEPOT preparations [Sublocade® and Buvidal®] unless accredited and approved to do so by DDU.
- 2. Initiate treatment,
- 3. Change the drug,
- 4. Change the dose to any significant degree without prior consultation and support with the Drug and Alcohol Clinical Advisory Service.
- 5. Approve the dispensing pharmacist to provide additional doses for take-away or non-supervised administration,
- 6. Approve replacement of any claimed lost, stolen or damaged drugs of prescriptions without prior contact and support of the Drug and Alcohol Clinical Advisory Service or
- 7. Initiate regular ongoing treatment with benzodiazepines.
- 8. Prescribe other opiates unless advice has been sought from the Drug and Alcohol Clinical Advisory Service and approval has been obtained from the Drugs of Dependence Unit.
- 9. Initiate other medications which may interfere with the metabolism of methadone e.g. fluvoxamine (Luvox ®), phenytoin, rifampicin, etc. when in doubt seek advice. The national MATOD guidelines p192 provides more details of drug-drug interactions.

Prescriptions

- Methadone for MATOD must always be prescribed as oral liquid form in a strength of 5mg/ml.
- Buprenorphine in combination with Naloxone (Suboxone®) is available as a sublingual film in strengths of 2mg/0.5mg and 8mg/2mg.
- Buprenorphine (Subutex®) is available as a sublingual tablet in strengths of 0.4mg, 2mg and 8mg.

Prescriptions for methadone or buprenorphine should include:

- The full name, address and contact details of the prescriber.
- Name of the nominated MATOD Community Pharmacy that can exclusively dispense the prescription and supervise daily dosing.
- Patient name.
- Date of birth.
- Authority number.
- The daily **dose in milligrams** and for **methadone**, to minimise error also include **millilitres** [e.g. "<u>methadone liquid 65mg (13mls) daily</u>"]. Underline and highlight this daily dose to distinguish the daily dose from the total quantity of medication to be dispensed.
- That doses are to be administered under supervision of the pharmacist.
- The number of **non-supervised administrations** (take-away doses) that may be provided each week.
- The **expiry date** of the prescription. This date is the date after which no more drug can be supplied and should coincide with the date that the patient is to be reviewed.
- Total quantity of medication to be dispensed, expressed in words and numbers, [e.g. 65mg methadone per day x 10 days = 650mg total].

Help Is Available

Locum prescribers are encouraged to contact the following for assistance and advice if unsure on any aspect of patient treatment.

Drug and Alcohol Clinical Advisory Service [DACAS] – Phone 7087 1742 or contact DACAS via **Alcohol and Drug Information Service [ADIS]** – 1300 131 340 from 8:30am — 10pm 7 days/week including public holidays or e-mail your enquiry to: HealthDACASEnquiries@sa.gov.au

DACAS provides a telephone and email service for South Australian health professionals seeking clinical information and clarification around clinical procedures, guidelines and evidence-based practice.

DACAS should be contacted for advice if the patient:

- 1) reports they have become or intend to become pregnant,
- 2) is consuming other drugs (e.g. opioids, benzodiazepines or alcohol) in an unsafe manner or
- 3) shows any signs of opioid withdrawal or intoxication

Drug Dependence Unit - 1300 652 584, email: <u>HealthDrugsofDependenceUnit@sa.gov.au</u>

This Unit operates during <u>normal business hours</u> and can:

- 1) provide advice to prescribers regarding their legal obligations and Authority status,
- 2) in certain circumstances, can release patient information to prescribers





