

Royal College of General Practitioners

STARTING METHADONE SAFELY

The Department of Health publication 'Drug Misuse and Dependence: Guidelines in Clinical Management' (1999) provides useful guidance on how to commence someone on a prescription for methadone. The publication has been sent to every doctor in the UK.

There is however ample evidence that many doctors have not read this publication. There have been a number of instances over the last couple of years where doctors have started people on methadone in unsafe ways e.g. without checking for evidence of opiate tolerance, starting on doses above 40mg and making no arrangements for daily dispensing or supervised consumption.

Repeated calls to prescribe only in accordance with the UK or local guidelines have not been successful and some disasters and near misses continue to occur.

It has been suggested that a simple sheet sent to all doctors or made available to doctors during training could set out the minimum requirements to make the initiation of methadone prescribing safer.

This initiative is approved by RCGP College Council and supported by the Medical Defence Union.

STARTING METHADONE SAFELY

Prescribing methadone mixture is a useful evidence-based approach to supporting people with opiate dependency *but methadone needs to be prescribed safely to avoid the dangers of overdose and diversion.*

If you are not familiar with caring for drug users, a decision to start methadone for the first time should be taken with advice from a specialist service or from a GP colleague with a special interest.

Always use methadone mixture 1mg/ml (not tablets or injectables).

Before starting methadone mixture for the first time:

- **carry out urine toxicology to check that there are opiates in the urine (results can take up to a week)**
- **check for objective signs of opiate dependence including dilated pupils when the patient is withdrawing**

N.B. Starting methadone is never an emergency.

Starting methadone without evidence of opiate dependency can be very dangerous and should never be done.

If a substitute prescription of methadone mixture is appropriate:

- **start with 20-30mg methadone mixture daily**
- **be prepared to see patient (after 1-2 doses) to titrate dose up**

N.B. Deaths have occurred following the commencement of a daily dose of 40mg methadone

- **arrange for the drug user to receive methadone mixture on a daily basis (if possible, supervised for at least the first 12 weeks)**

For more details see Departments of Health publication 'Drug Misuse and Dependence: Guidelines in Clinical Management' (1999) p.45-46.

**Your local specialist service
(or GP colleague with a special interest) is:**

(add name and telephone number here)