

Facts About

Medication-Assisted Treatment

Despite evidence of its effectiveness, there are still a number of misconceptions about MAT that could be preventing people from receiving life-saving treatment and recovering from their addiction. Here's what you need to know:

Fact 1:

MAT medications save lives

Using FDA-approved medications for opioid use disorder (OUD) reduces the death rate among those living with addiction by 50% or more.

Fact 2:

Reduces the chance of relapse & overdose

Not only does MAT reduce the chances of relapse and overdose, but criminal activity and transmission of infectious diseases are also reduced for those receiving treatment.

Fact 3:

MAT provides a whole-patient approach

MAT is tailored specifically to each individual. The medication relieves the withdrawal symptoms while counseling promotes positive behavior and lifestyle change.

Fact 4:

Recovery is possible

When the cravings and withdrawal symptoms stop, people who are struggling with addiction have time to focus on long-term goals, remission, and recovery. Up to 90% of patients who use MAT maintain sobriety at the 2-year mark.



You don't have to go it alone.

Those struggling with addiction can feel isolated, hopeless, and helpless. There are several MAT licensed providers in South Dakota ready to help you on your path to recovery.

If you or a loved one need help or have questions call the **South Dakota Opioid Resource Hotline** at **1-800-920-4343** and ask to speak with a Care Coordinator. They are experts in connecting people and their families with support and treatment in South Dakota.



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things you need to know about Medication-Assisted Treatment (MAT)



Myths About Medication-Assisted Treatment

Myth 1:

“It’s just trading one addiction for another.”

MAT medications do not get a person high—instead, the medications work to:

- Block the euphoric effects of opioids
- Relieve cravings
- Normalize brain chemistry
- Normalize physical functions without withdrawal effects

Taking medication for opioid addiction is the same as taking medication for any other chronic disease like diabetes or asthma. When used according to a doctor’s instructions, the medication is safe and effective, and will not create a new addiction.

Myth 2:

“If you’re still using, you’re not in recovery.”

Some believe if medication is used to achieve sobriety, it isn’t truly recovery. MAT medications allow patients to focus on building healthy behaviors and support systems so they can fully recover. The goal is always to get to a point where medication is no longer needed.



Myth 3:

“There’s no proof that MAT is more effective than abstinence.”

Nearly all addicted individuals believe they can stop using drugs on their own, and most try to stop without treatment. Although some people are successful, many attempts fail. Research shows that long-term drug use changes brain function which can result in an inability to control the impulse to use drugs despite the negative consequences.

MAT is an evidence-based, first line treatment for Opioid Use Disorder (OUD) endorsed by many respected organizations that do their homework, review the research, and support a whole-patient approach to addiction treatment including:

- American Academy of Addiction Psychiatry
- American Medical Association
- The National Institute on Drug Abuse
- Substance Abuse and Mental Health Services Administration
- National Institute on Alcohol Abuse and Alcoholism
- Centers for Disease Control and Prevention

Myth 4:

“There are dangerous side effects to MAT.”

As with any prescription medication, there is a potential risk for side effects. Use of other medications, alcohol, or illegal drugs can increase those risks. Doctors who provide MAT will discuss medical conditions, side effects, and risks before treatment begins.



Myth 5:

“MAT is just a new way for doctors to prescribe more opioids.”

In South Dakota, providers undergo an intensive process to prescribe medication-assisted treatment. Once approved, treatment programs must follow strict federal regulations to maintain their license.

Myth 6:

“MAT medications are like liquid handcuffs.”

Two of the drugs used to treat OUD—Buprenorphine and Naltrexone—can be taken orally in pill form or monthly by sustained-release injection. Taking these medications does not require a daily visit to an authorized clinic. And, telemedicine appointments are available at some facilities making it possible for the doctor to come to you.

While Methadone does require a daily visit to a licensed facility, it is known to reduce fatal overdoses by more than half and is often prescribed to those who have a severe dependence on opioids.