Medicated Assisted Treatment in RI: Friend or Foe?

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Rhode Island has surely proven itself as a small but mighty state. In 1636, Roger Williams obtained the charter for the Rhode Island and Providence Plantations colony and established it to be the first state with complete religious tolerance. We are best known as the smallest state in the nation, but also widely regarded as one of the most beautiful. Throughout history, Rhode Island has proven itself as a unique and crucial part of the United States as a whole. Our beautiful landscape as well as our importance in the rise of religious tolerance and separation of church and state has effectively carved Rhode Island’s name in the history books. However, Rhode Island is on the road to becoming historic for another, more important reason; a program for treatment of opioid dependence.

Addiction is a disease. A crucial step in the treatment process is the acknowledgment of this fact. Addiction can be caused by a variety of factors, most notably being biological factors and history of mental health. Opioids in particular are a unique kind of drug. Instead of taking the pain away, the drugs attach to receptors in the brain. Once attached, they send pleasure signals to the brain which replaces the pain with temporary pleasure. The most common way a person gets addicted is becoming dependent through a prescription. After surgery or a complicated medical procedure, doctors will often prescribe opioids for 5-7 days. Because the body quickly builds a tolerance to opiates, a person can become dependent in a short period of time, making it more likely that they will renew and abuse their prescription.

The opioid crisis has struck America to its core, officially being declared a public health emergency in October, 2017 by President Trump. Synthetic and prescription opioid related abuse
has increased drastically over the past few years, becoming a national crisis. The crisis has hit hard in every part of the country, Rhode Island being among the top ten states for highest rate of opioid abuse. In fact, according to the National Institute of Drug Abuse, 26.7 out of every 100,000 RI deaths are a result of opioid overdose, which is over twice the national rate. Traditional treatment for addiction is detoxification followed by complete abstinence. This course of treatment starts with the detoxification and the withdrawal process, often including grueling symptoms such as fever, sweating, headaches, and vomiting for an extended period of time. In general, detox symptoms are not life threatening, but can cause extreme physical and emotional distress to a person. Often times, these unpleasant symptoms cause the addict to want to use again, each relapse making it harder for them to try and quit the next time. The second part of this treatment involves complete abstinence from the drug via extensive therapy and rehab sessions. Those who have strong personal motivation and drive to better themselves tend to succeed in staying sober more than those who do not. Unfortunately, with the long and difficult treatment plan, relapse is still an extremely high risk for both parties.

Rhode Island was the first of many states to introduce a program for addicts that quickly took over as the standard for the care of opioid addiction. This program is known as Medicated Assisted Treatment (MAT). This groundbreaking two million dollar program started in the Rhode Island prisons where drug addicts were allowed to take either Methadone, Suboxone, or Vivitrol, which are three medicines approved to help with the detox process and opioid dependence. The program was a part of a series of reforms made by governor Gina Raimondo in response to the terrible epidemic in Rhode Island. She claims that Rhode Island is the “only state in America that has a state-supported, state funded, full range of medically assisted treatment”. The program works by prison inmates taking one of the medicines that helps with the detox and
dependence on the drug, and the treatment continues after they are released. Medicated Assisted Treatment was looked down upon by many for a long time. People believed the misconceptions that it was ineffective and just substituting one drug for another. However, the program puts people at much less of a risk of an overdose. Essentially, a drug is being substituted for another, but a much less dangerous one. The new drugs dosage is regulated by a doctor, making it much safer and more predictable. Also, the program is anything but inefficient. In the first year of the program alone, the fatality rate from opioid overdose went down 61 percent in Rhode Island (Politico Magazine). Dr. Josiah Rich, a professor at Brown University medical school remarks, “The magnitude of that drop in mortality is almost unheard of in public health”. No other treatment plans have showed results this effective, as the outcome is always better with Medication Assisted Treatment than without it.

Medicated Assisted Treatment has been extremely helpful in the treatment of opioid addiction. However, there is still more controversy surrounding the treatment. Among these is the difference between the different medicines used. Methadone is a much more dangerous drug than Suboxone, which makes it seem like Suboxone is clearly the safer choice. However, Methadone is harder to obtain in large amounts because an addict can only obtain one dosage a day from a doctor. This makes Methadone harder to obtain on the streets. Suboxone is given in monthly dosages. Sometimes, this large of an amount can even further tempt users to trade or sell this drug and not use it to get sober.

It is important to know that MAT is not a cure for opiate addiction; it is a tool and means of harm reduction, which is to say that MAT, put simply, is safer than the alternative street drugs. It is easy to take one of the medications just to get off of the drug, but to conquer the problem of addiction more work needs to be done. A crucial part of recovering from addiction
has always been good mental health care through therapy and rehab. With the rise of Medicated Assisted Treatment, less of the focus of treatment has been on mental health care, which is still just as important. In order for an addict to recover fully, they not only need to be okay physically, but mentally, which starts with therapy and rehab programs.

Medicated Assisted Treatment is a great program used throughout the United States that has saved the lives of many. However, it is not a miracle cure for addiction, just a tool used to get an addict back on their feet. This program can become dangerous if it overshadows comprehensive mental treatment. While it has done more good than bad, it takes more than just medication to recover from addiction. As a state, Rhode Island needs to be mindful and cautious with the course of treatment for opioid addiction. We need to ensure that people suffering from opioid addiction are not simply being pacified through drug substitutions, but are also being treated thoroughly, through therapy, to resolve the root of their addictions.