Attitudes Toward Medication-Assisted Treatment Within a Drug Court Program

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Abstract

In recent years, there has been a dramatic increase in the number of individuals who become addicted to prescription drugs due to a misperception that they are safe. However, although the number of opiate users has increased, data indicates about 50% refuse drug court because of its current abstinence-based requirement to not use any mood altering medication, including prescriptions. Hillsborough County’s 13th Judicial Circuit Court was awarded a SAMHSA Adult Treatment Drug Court grant entitled Medication Assisted Drug Court Treatment (MADCT) to expand substance abuse treatment for court-ordered felony offenders with opioid dependency. Clients receive methadone or buprenorphine, outpatient counseling, and drug court monitoring. However, even though recognized as an evidence-based practice, medication-assisted treatment has been a controversial method of opioid treatment. Therefore, the goal of this study is to evaluate attitudes within the MADCT program toward medication assisted treatment including treatment professionals, court affiliates, law enforcement detectives, and community partners (including professionals working on task forces). Results will be disseminated in order to recommend educational tools and guidelines to make medication-assisted treatment more widely accepted as a positive, effective practice within drug court.
Statement of Problem

Prescription drug abuse is a rising problem, specifically in Florida, affecting all aspects of the community including law enforcement, treatment agencies, families, and policymakers. In 2009, more than 250 people died of an accidental drug overdose in Hillsborough County (Florida Medical Examiner’s Office, 2009). These high numbers may be attributed to the distribution and inflated amount of prescribing in Florida. According to the United Way of Broward County, the top 49 of 50 oxycodone dispensing practitioners are located in Florida (United Way, 2010). Hillsborough Country ranks fifth among them, with 184,330 units dispensed between October 2008 and March 2009. Florida has been described as a national hotspot for opiate use, abuse and dealing; Americans are traveling to Florida every day with the intent to purchase and traffic prescription drugs.

Literature Review

The safety of prescription drugs has been questioned due to rising rates of addiction, crime, and death related to them (Florida Regional Prescription Drug Task Force, 2009). This problem could be a result of physician bias as well. In a recent study of fourth year medical undergraduate students, the average student response to the item “Cancer patient can easily develop addiction to opioids” was Totally Disagree and Moderately Disagree (Niemi-Murola et al., 2007). This is alarming, as it has been shown that opiates such as heroin and opium are addicting; yet, these drugs are perceived to be safe by upcoming medical professionals. It also has been shown that 12% of college students have used prescription medication for non-medical purposes in their lifetime, as well as 1 in every 10 college students (18-25) report non-medical analgesic opiate use in the past year (Niemi-Murola et al., 2007). When these
analgesics are titled “prescription drugs” it may give a false sense of the way that these drugs are obtained. While opium, morphine, and oxycodone are all schedule II controlled substances, those who are abusing them often are not themselves prescribed the drugs (Drug Enforcement Agency, 2011).

Misconceptions about the addictive properties and safety of these drugs have likely played a role in how society has managed to inflate this problem over time. Because these drugs are prescribed by a doctor, there is an illusion of safety surrounding their use. In reality, the opiate class of analgesic drugs is pharmacologically similar to illicit drugs, such as heroin and opium. Their prescription counterparts include morphine, codeine, and the semi-synthetic version oxycodone which can all be obtained through prescriptions in emergency rooms, general care physicians, and pain management clinics as they are highly effective analgesics used to treat pain after surgery and other traumatic injuries (Facts About Opiates, 2007). Further research is needed to evaluate the conceptions and misconceptions of prescription drugs.

Current Study

Because of the alarming rate of prescription drug abuse, Hillsborough County’s 13th Judicial Circuit Court was awarded a SAMHSA Adult Treatment Drug Court grant and the steering committee decided to focus on opiate offenders. Entitled Medication Assisted Drug Court Treatment (MADCT), the goal of the grant is to expand substance abuse treatment for court-ordered felony offenders with opioid dependency. Clients receive methadone or buprenorphine, outpatient counseling, and drug court monitoring. However, even though recognized as an evidence-based practice, medication-assisted treatment has been a controversial method of opioid treatment. Therefore, the goal of this study is to evaluate
attitudes within the MADCT program toward medication assisted treatment including
treatment professionals, court affiliates, law enforcement detectives, community partners
(including professionals working on task forces), medical examiners, and clients currently
enrolled in the MADCT program. The attitudes toward medication-assisted treatment often
differ between stakeholders, and it is important that these attitudes are understood so that an
effective and positive program may be implemented for clients.

Method

Participants

Study participants consist of ten key stakeholders in the areas of court/law enforcement,
treatment, and community leaders in medication-assisted drug court treatment. The
stakeholders consented to a 15-minute interview regarding treatment of opiate-addicted
clients, effectiveness of medication assisted treatment, and legislation regarding prescription
drug abuse. These leaders represent the following agencies: (1) Temple Terrace Police
Department, (2) Hillsborough County 13th Judicial Court, (3) DACCO, Inc., (4) Hillsborough
County Medical Examiner’s Office, (5) Tampa Alcohol Coalition, and (6) DUI Counterattack. Each
of these organizations plays a key role in the treatment and prevention of opiate addiction as
well as ensuring the effectiveness of medication-assisted drug court programs.

Measures

Stakeholders were administered a face-to-face eight question interview to determine
attitudes toward medication-assisted treatment in a drug court program focusing on legislation,
treatment services, gaps in the system, and recommendations. The following interview
questions were included:
1. Which do you think is the most effective way to treat opioid dependency: medication-assisted treatment, abstinence based programs, or any other programs?

2. Do you think an opioid user can maintain abstinence for a lifetime? Why or why not?

3. How can legislation affect availability of prescription pain medications?

4. What are the strengths of medication assisted drug court treatment? Weaknesses?

**Design and Procedure**

A qualitative research design was used to determine attitudes and recommendations for implementing the most effective drug court treatment solutions, as well as to assess ways in which legislation can affect the prescription drug problem. The evaluation was approved by the USF Institutional Review Board and participants were provided informed consent forms. During the interview, participants could provide more than one response for each item. The researcher also observed drug court judicial reviews, treatment assessments and group therapy, as well as attending the Hillsborough County Prescription Drug Task Force.

**Data Analysis**

Using Microsoft Excel, the researcher entered and coded the responses based on central themes and key words. This process was repeated for each item. Responses were grouped based on similarities and emerging categories, and were then totaled to create graphs for items that showed trends and variability.

**Results**

The stakeholders interviewed in this project represented a unique combination of program leaders from three separate entities of a drug court program. The court officials that are involved in placing clients into the MADCT program, the treatment providers who attempt to
deliver effective treatment regimens, and community leaders with a role in keeping people from falling under the umbrella of opiate dependency. These leaders provided information regarding strengths, barriers, and recommendations for medication-assisted treatment programs to operate effectively, as well as how communities can combat the prescription drug problem to reduce volumes of clients utilizing the court and treatment systems in place.

Attitudes toward medication-assisted treatment

Participants were asked “What is your stance on medication-assisted treatment to assess the attitudes regarding the effectiveness of the current program.” To date, 78% of the responses were positive. Comments coded positively included “Clients need medications to avoid cravings and other suffering that causes issues in treatment,” as well as “People need help getting off opiates.” 22% of responses were coded negatively, with responses reflecting attitudes of misuse. One participant responded “Clients use treatment to network for better access to drugs,” and another stated that medication-assisted treatment is “overused.”

Preferences between methadone and Suboxone

To assess medication-assisted treatment preferences, participants were asked “Do you have a preference between methadone and Suboxone?” No responses reflected a preference for methadone – participants cited reasons such as the dangers of using opiates as well as “Methadone clients seem to have more physical problems and issues with detox.” Sixty six percent of respondents suggested that Suboxone is the better option because it may “provide an easier track toward abstinence,” or “Suboxone is less likely to be abused.” Some non-treatment team stakeholders (33%) had no preference, and some suggested that they would prefer to defer to the expert opinion in the matter.
Legislative affect on availability of prescription narcotics

For the question “How can legislation affect availability of prescription narcotics?”, the majority of responses centered around the idea that different forms of monitoring could change the routes of obtainment in the community. Responses also highlighted the fact that local law enforcement could take greater action. Table 1 displays the majority responses.

Table 1

<table>
<thead>
<tr>
<th></th>
<th># of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician/Prescriber</td>
<td>6</td>
</tr>
<tr>
<td>Prescription drug monitoring</td>
<td>5</td>
</tr>
<tr>
<td>Better rules for pain clinics</td>
<td>4</td>
</tr>
<tr>
<td>Local action oversight</td>
<td>3</td>
</tr>
</tbody>
</table>

Reported strengths of medication-assisted drug court treatment

Stakeholders were asked to describe their perceived strengths of medication-assisted drug court treatment. Responses tended to reflect a quality of effectiveness for clients’ treatment of opiate addiction, as well as the parts of the program that ensure that effectiveness. This included the medical element that has been shown to assist opiate dependent persons recover from their addiction, as well as the added support through supervision by the court. Table 2 indicates the highest quantity responses.
Reported weaknesses of medication-assisted drug court treatment

Finally, stakeholders’ perceived weaknesses of the MADCT program were assessed. Their responses suggested that the medication is perceived to maintain addiction, as well as the idea that treatment may be manipulated by clients to continue achieving a high. The cost of medication also was a reported weakness, as the preference for Suboxone indicated frequently is often not met due to the extreme high cost of this drug. Table 3 indicates majority responses.

Table 2

<table>
<thead>
<tr>
<th># of Responses</th>
<th>Court supervision</th>
<th>Outpatient therapy</th>
<th>Get needed meds</th>
<th>Give client clarity during treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 3

<table>
<thead>
<tr>
<th># of Responses</th>
<th>Maintaining addiction forever</th>
<th>Clients manipulating treatment</th>
<th>Cost of Drugs</th>
<th>Stigmatized</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>6</td>
<td>5</td>
<td>4</td>
<td>1</td>
</tr>
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</table>
Discussion

The data collected on attitudes toward medication-assisted treatment indicate differing opinions among various stakeholders. This suggests a need for active participation from the various agencies and groups represented for effective education and understanding of the treatment being administered to clients. The research also indicates a need for policy change to affect the prescription drug abuse problem. This may also be achieved by a pooling of efforts among the groups represented in the study to continue to educate the community on the danger of these substances, as well as the outlets for treatment if one is already addicted.

Recommendations

Based on the interviews with the stakeholders, researchers were able to make recommendations to improve the effectiveness and conditions of the medication-assisted drug court treatment program.

*Methadone vs. Suboxone.* As indicated by the research and the stakeholder opinions, methadone is not considered to be the best option for opiate dependency treatment from a clinical perspective. The dangers of methadone have been highlighted through misuse and abuse on the street, as well as the lethal combination with benzodiazepines which often happens in and out of a treatment setting. The high rate of use among treatment providers, however, is likely linked to a historical purpose – methadone has been used for years, beginning with heroin addiction, to treat opiate dependency, and providers may have a difficult time transitioning to new substances, which may be more effective, for comfort purposes. Methadone is also less expensive than alternatives, and providers may have a difficult time presenting another drug to clients in a way that money will not be the major consideration.
Suboxone is clearly indicated by this study to be a quality alternative to the dangers of methadone. Because of its partial opiate mechanism, it provides a safer way to provide clarity to clients in treatment. As the goal of medication-assisted treatment is to offer a sense of normalcy to the client physically in a safe and monitored way, it is recommended that treatment teams more strongly utilize the opportunity to administer this alternative to clients. This includes educational resources for clients to understand the benefits of Suboxone. It is also recommended that resources such as grant funds be utilized to relieve financial burden for clients who seek effective treatment but may not be able to afford this drug.

Prescription drug monitoring. The prescription drug monitoring program (PDMP) that has been passed in Florida is a small step to controlling the prescription drug problem that has plagued the state in recent years. If implemented properly the program will achieve oversight of prescribers in Florida and control the amount of illegal trafficking of opiates from clinics and dealers, as well as false prescriptions. Recent legislative changes have taken place, however, and the PDMP currently in place is being challenged by the government. It is important to ultimately have a checking system in place that while hold physicians and pharmacies accountable for their role in prescription drug use and abuse. To be effective, this program must also include funding from government programs that will assist in developing an online tracking program of prescription from companies to prescribers, to pharmacies, and pharmacies to patients.

Local community efforts. Until a PDMP is in place, local law enforcement agencies must take action to challenge the rising rates of illegitimate prescriptions in Florida, as well as holding clinics and physicians accountable for faulty practices leading to large amounts of pills sold to
patients responsible for reselling them to users on the street. This would include greater prescription pain initiatives within agencies and departments, and greater funding for methods that lead to a higher volume of arrests, such as undercover officers and high profiles busts.

Conclusions

With the high risks involved in non-prescription opiate use, and the likelihood of dependence to these drugs, it is important to offer effective treatment solutions to offenders who have violated the law due to drug dependence. Medication-assisted drug court treatment programs can help lead clients to successfully handle their addiction without putting strain on the jails and law enforcement agencies that intercept these offenders. These programs could also help reduce the number of dependent users violating laws, as well as reduce the likelihood of dependence overall. Legislation changes and preventative action by law enforcement and community groups can also have great impact on dependence and availability of these drugs through illegal outlets.
References


Hillsborough County Medical Examiner’s Office. (2010). *Deaths Due To Drug Intoxication*. Tampa, FL: Pearson, J.M.


